

ELLIS LAW OFFICE, P.A.
Domestic Client Intake Form
PLEASE PRINT CLEARLY

DATE: _____

1. Personal Information

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

Place of Work: _____ Occupation: _____

Date of Birth: _____ Date Married: _____

Location of Marriage: _____

Date of Separation: _____

2. Spouse's Information

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

Place of Work: _____ Occupation: _____

Date of Birth: _____

3. Prior Divorces / Separations

Dates of Prior Divorces: _____

Check all that apply: _____ Prior Separation Agreement

_____ Prior Divorce Decree

_____ Prior Custody/Support Order

4. Children's Information

Name and Date of Birth of each child:

Do you or your spouse have any children outside of the marriage? ___yes ___no
If yes, Please list the names and birthdates of each child:

5. Legal Issues Involved in Current Situation

Are you seeking any of the following? Please check all that apply.

- _____ Divorce
- _____ Child Custody
- _____ Child Support
- _____ Property Distribution
- _____ Alimony/Post Separation Support
- _____ Separation Agreement
- _____ Adoption
- _____ Name Change

6. How did you hear about our firm?
