**CLIENT INFORMATION**

(one per party)

**HOW DID YOU HEAR MY SERVICES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Middle Last

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_

Street Address City, State Zip

Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_ SS# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_ Work Authorized to leave message with:

 \_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_ Home E-mail : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County & State of Marriage \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marriage Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Separation Date\_\_\_\_\_\_\_\_\_\_\_

Fla. resident for \_\_\_\_\_\_ years

**CHILDREN**:

**Name Sex Date of Birth .**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Is wife pregnant? \_\_\_\_\_\_\_ Expected date of delivery \_\_\_\_\_\_\_\_\_\_\_\_\_

Does wife want her maiden name restored? \_\_\_\_\_ Yes \_\_\_\_\_\_\_No.

If yes, what is maiden name? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Child(ren)’s Residence for the past 5 years:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates:****(From/To)** | **Address (including city and state) where child lived** | **Name and present address of person child lived with** | **Relationship to child** |
|  /present |  |  |  |
|  /  |  |  |  |
|  /  |  |  |  |

**ISSUES TO BE ADDRESSED AT MEDIATION**

\_\_\_\_\_\_ Child Custody Arrangement

\_\_\_\_\_\_ Child Support

 \_\_\_\_\_ Allocation of Day Care Expense

 \_\_\_\_\_ Allocation of Medical Insurance

 \_\_\_\_\_ Allocation of Uncovered Medical Expense

 \_\_\_\_\_ Allocation of Tax Deduction

 \_\_\_\_\_ Allocation of Extracurricular Activities

 \_\_\_\_\_ Allocation of College Expense

 \_\_\_\_\_ Life insurance to be provided by one or both spouses

 \_\_\_\_\_ Equitable Division of Assets and Debts

 \_\_\_\_\_ Marital Home

 \_\_\_\_\_ Other Real Property

 \_\_\_\_\_ Vehicles

 \_\_\_\_\_ Bank or Investment Accounts

 \_\_\_\_\_ IRA or Retirement Accounts

 \_\_\_\_\_ Tax Issues

 \_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_ Alimony

 \_\_\_\_\_ permanent alimony

 \_\_\_\_\_ rehabilitative alimony

 \_\_\_\_\_ bridge the gap alimony