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## CLIENT INFORMATION SHEET

No one knows the facts of your case better than you and in order to properly represent you I must be as familiar as possible with these facts. It is necessary for you provide the following information as fully and accurately as possible in order for me to properly develop your case. It is essential for you to be entirely forthright and honest with my office, regardless of how trivial or potentially embarrassing the facts of your case may seem. Please remember that you are billed on an hourly basis and the more accurate and complete the information you provide, the less time will be needed.

*This information is generally considered privileged and confidential as part of the attorney-client relationship. You should be aware, however, that under some extraordinary circumstances, such as, where a client persists in giving false testimony or uses false documents, client confidentiality may yield and the attorney may have a legal obligation to withdraw from the representation and possibly disclose to the court that false information has been provided by the client.*

### Part 1: General Information

1. Date: \_\_\_\_\_
2. How did you hear about our office? \_\_\_\_\_
3. Have you consulted any other attorneys in regard to this matter? If yes, please indicate the attorney's name and when you spoke to them.  
\_\_\_\_\_

Have documents been filed with the court in regard to this matter? \_\_\_\_\_ *If yes, please provide a copy of these documents.*

Have you been served? \_\_\_\_\_ If yes, when?  
\_\_\_\_\_

Is a hearing scheduled in this matter? If so, when?  
\_\_\_\_\_

### Part 2: Client Information

1. Name: \_\_\_\_\_  

(First)
(Middle)
(Last)

Maiden Name (If applicable): \_\_\_\_\_

Do you want your maiden name back as your legal name? \_\_\_\_\_

2. Date of Birth: \_\_\_\_\_

3. Social Security Number: \_\_\_\_\_

4. Address:

\_\_\_\_\_  
(Street) (City) (State) (Zip)

*\*Note: Correspondence and documents will be sent to you at this address. Please do not list an address where mail could be retrieved by the opposing party.*

On what date did you become a resident of South Carolina? \_\_\_\_\_

5. Home Phone: \_(\_\_\_\_\_)\_\_\_\_\_

May we contact you at this number? \_\_\_ May we leave messages at this number? \_\_\_

5. Cell Phone: \_\_\_(\_\_\_\_\_)\_\_\_\_\_

May we contact you at this number? \_\_\_ May we leave messages at this number? \_\_\_

6. Email Address: \_\_\_\_\_

*\*Please do not list an email address that might be accessed by an adverse party. Clients are encouraged to create a new password and/or email account for the purpose of communicating with our office.*

7. Name of Employer: \_\_\_\_\_ Position: \_\_\_\_\_

8. Dates of Employment: \_\_\_\_\_ Annual Salary: \_\_\_\_\_

9. Business Phone: (\_\_\_\_) \_\_\_\_\_ May we contact you at work? \_\_\_\_\_

10. Please list any other sources of income:

\_\_\_\_\_

11. Have you ever served in the military? \_\_\_ If yes, please list dates of service: \_\_\_\_\_

12. Please list all retirement and pension accounts:

\_\_\_\_\_

\_\_\_\_\_

13. Please list any serious health conditions:

\_\_\_\_\_

\_\_\_\_\_

14. Do you have health insurance? If so, by whom is it provided?

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15. Please state your educational and vocational training:

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16. Do you have any social media accounts? Please circle all that apply.

Facebook	Instagram	Flickr	Ask.fm
MySpace	Pinterest	Vine	Meetme
Twitter	Tumblr	Meetup	ClassMates
LinkedIn	VK	Tagged	Other: _____

17. Are you on any dating websites? \_\_\_\_\_ If yes, please list all that apply

18. Do you have a girlfriend/boyfriend? \_\_\_\_\_ Are you dating anyone? \_\_\_\_\_ If so, what is his/her name? \_\_\_\_\_ How long have you been dating? \_\_\_\_\_ Does he/she live with you? \_\_\_\_\_

**Part 3: Opposing Party Information**

1. Name:

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(First) (Middle) (Last)  
Maiden Name (If applicable): \_\_\_\_\_

2. Date of Birth: \_\_\_\_\_

3. Social Security Number: \_\_\_\_\_

4. Address:

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(Street) (City) (State) (Zip)  
On what date did he or she become a resident of South Carolina? \_\_\_\_\_

5. Home Phone: \_(\_\_\_\_\_)\_\_\_\_\_ Cell Phone: \_\_\_(\_\_\_\_\_)\_\_\_\_\_

6. Name of Employer: \_\_\_\_\_ Position: \_\_\_\_\_

7. Dates of Employment: \_\_\_\_\_ Annual Salary: \_\_\_\_\_

8. Business Phone: (\_\_\_\_) \_\_\_\_\_

9. Please list any other sources of income:

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10. Has he or she ever served in the military? \_\_\_\_ If yes, please list dates of service: \_\_\_\_\_

11. If represented by an attorney please list that attorney's name, address, and phone number:

\_\_\_\_\_

12. Please list all retirement and pension accounts:

\_\_\_\_\_

\_\_\_\_\_

13. Please list any serious health conditions:

\_\_\_\_\_

\_\_\_\_\_

14. Does he or she have health insurance? If so, by whom is it provided?

\_\_\_\_\_

\_\_\_\_\_

15. Please state his or her educational and vocational training:

\_\_\_\_\_

\_\_\_\_\_

16. Please list any social media websites with which he / she has an account:

\_\_\_\_\_

17. Please list any dating websites with which he / she has an account:

\_\_\_\_\_

18. Are you aware of a girlfriend / boyfriend? \_\_\_\_ If so, who? \_\_\_\_\_

**Part 4: Children**

1. Please list the name(s), birthday, and sex of any children from **THIS** relationship:

Name	Date of Birth	Sex	Social Security No.

2. Do either you or the opposing party have child(ren) from a prior relationship? If so, names and ages.

\_\_\_\_\_

3. Do any of the children have any serious physical or medical conditions, or learning disabilities (If yes, please explain)?

\_\_\_\_\_

4. Where are the children currently residing? \_\_\_\_\_

5. Who is currently providing financial support for the children? \_\_\_\_\_

6. Do you anticipate a dispute about custody of the children? \_\_\_\_\_

7. Are you and your spouse able to communicate civilly about the children? \_\_\_\_\_

**Part 5: Marriage**

1. Date of Marriage: \_\_\_\_\_ County and State Where Married : \_\_\_\_\_

2. Date Last Lived Together or Had Marital Relations: \_\_\_\_\_

3. Date of Separation: \_\_\_\_\_

4. Have you or your spouse signed any documents relating to the marriage or separation, such as, prenuptial and postnuptial agreements? \_\_\_\_\_ *If yes, please provide a copy of the document(s).*

5. Briefly state the reason for separation:

\_\_\_\_\_

6. Please provide a brief timeline of important events that led to the demise of your marriage:

Date	Describe Event

7. Were there any instances of *physical* abuse by either party during the marriage? \_\_\_\_\_

If yes, please briefly explain the details and state approximate dates of occurrences, including most recent incident.

\_\_\_\_\_

8. Were there any instances of adultery committed by either party during the marriage? \_\_\_\_\_

If yes, please briefly explain the details and state approximate dates of occurrences, including most recent incident.

9. Did either party have a problem with drug or alcohol abuse during the marriage? \_\_\_\_\_

If yes, please briefly explain the details and state approximate dates of occurrences, including most recent incident.

\_\_\_\_\_

10. Do you or your spouse have any interest in reconciliation? \_\_\_\_\_

11. Have either or both of you participated in marriage counseling? \_\_\_\_\_ If yes, when? \_\_\_\_\_

12. Have either of you previously considered ending your marriage? \_\_\_\_\_ If yes, when? \_\_\_\_\_

13. Were either of you previously married? \_\_\_\_\_ If yes, when? \_\_\_\_\_

14. Please list any child or spousal support currently being paid and/or received by either of you:

\_\_\_\_\_

15. Please describe your contributions (monetary or other) to the marriage, family, and household:

- a.
- b.
- c.
- d.

16. Please describe your spouse's contributions (monetary or other) to the marriage, family, and household:

- a.
- b.
- c.
- d.

17. Please describe any "foregone opportunities" that you have missed because of your marriage (ex.: further educational, career advancements, etc.):

- a.
- b.
- c.
- d.

18. Please describe any "foregone opportunities" that your spouse has missed because of your marriage (ex.: further educational, career advancements, etc.):

- a.
- b.
- c.
- d.

**Part 6: Property & Assets**

1. Address of Primary Residence:  
\_\_\_\_\_
2. If rent, in whose name is the lease? \_\_\_\_\_
  - a. Monthly rent? \$\_\_\_\_\_ How long is remaining on your lease? \_\_\_\_\_
3. If own, in whose name is the property is titled: \_\_\_\_\_
  - a. In whose name is the mortgage? \_\_\_\_\_
  - b. Monthly mortgage? \$\_\_\_\_\_ How much remains owed? \_\_\_\_\_
  - c. Approximate value:\$\_\_\_\_\_ How did you determine the value:?  
\_\_\_\_\_
  - d. Date Purchased: \_\_\_\_\_ Amount of Down Payment: \$ \_\_\_\_\_
  - e. What was the source of funds for the down payment? \_\_\_\_\_
4. If you or your spouse own any other property, please *attach an additional page* stating the address and other information as requested above for the primary residence, as well as, any dates you and/or your spouse have resided at the property during the marriage.
5. For all checking and savings accounts owned by you and/or your spouse please state the name of the bank, in whose name the account is held, and current balance.  
\_\_\_\_\_  
\_\_\_\_\_
6. Please list all stocks or bonds owned by you and/ or your spouse with current value(s):  
\_\_\_\_\_  
\_\_\_\_\_
7. Please list all life insurance policies for you and/ or your spouse with beneficiary:  
\_\_\_\_\_  
\_\_\_\_\_
8. Please list all vehicles owned by you and/or your spouse (cars, trucks, motorcycles, boats, etc):

Year/Make/Model	To Whom Titled	Amount Owed

9. Please describe any businesses owned by you and /or your spouse:  
\_\_\_\_\_

10. Please list any property you or your spouse have inherited or substantial gifts you have received from third parties during your marriage with approximate value(s), and date received.

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11. Please list all valuable personal property, such as furniture, electronics, jewelry, tools, guns, collectables, art, etc. owned by you and/or your spouse. *Attach additional pages as necessary.*

Describe Property	Current Estimated Value	When Acquired	How Acquired	Currently in whose possession?

12. List and describe any items of exceptional sentimental value to you and/ or your spouse?

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13. Please describe any pets owned, with whom currently living, and any related disputes?

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**Part 7: Debts**

14. Please list all loans and credit card debt owed by you and/or your spouse. *Attach additional pages as necessary.*

Lending Company	Current Amount Owed	When Debt Acquired	For What Purpose Was Debt Acquired	In Whose Name is the Card Held?



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15. Please describe any outstanding medical bills for you and/ or your spouse:

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16. Please describe any student loans for you and/ or your spouse:

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17. Please list any other debts owed by you and /or your spouse:

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18. Do you have a WILL? \_\_\_\_\_

**Part 8: Goals and Legal Relief Sought**

Please number in order the importance of the following issues to you:

- \_ Divorce
- \_ Custody
- \_ Child Support
- \_ Visitation
- \_ Alimony
- \_ Division of Marital Debt
- \_ Primary Residence
- \_ Other Property: \_\_\_\_\_
- \_ Personal Property: \_\_\_\_\_
- \_ Vehicle(s): \_\_\_\_\_

1. Other than stated above, what is most important to you in this case?

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2. Is there anything else you would like to accomplish through this case?

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3. List any future restrictions on your and/ or your spouse's behavior you believe would be in your children's best interest:

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4. Please briefly describe how you would like our office to best help you accomplish your goals in this legal matter.

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**PLEASE READ CAREFULLY & SIGN:**

Following your initial interview, if you agree to hire the Attorney and the Attorney agrees to represent you, you will both sign an Agreement for Representation. The Agreement for Representation will set forth the terms and conditions of the representation.

If the Attorney is willing to represent you and you decide not to sign the Agreement of Representation concluding your appointment, you are strongly urged to schedule a second appointment with the Attorney at the earliest possible time or to immediately consult with other legal counsel to protect your rights.

If for whatever reason, the Attorney is unable to represent you, the attorney does not represent you with regard to the matter set forth by you on this information sheet, nor any other matters you may discuss with the attorney during your consultation. If your legal problem(s) involve a potential lawsuit, it is important that you realize a lawsuit must be filed within a certain period of time called a Statute of Limitations. Therefore, the Attorney strongly urges you to immediately consult with another Attorney to protect your rights. The attorney's inability to represent you should not be taken by you as an expression regarding the merits of your case.

NOTICE: This office does not represent you with regards to the matters set forth by you herein in this information sheet or discussed during your consultation unless and until, both you and Attorney execute a written Agreement for Representation.

Your signature acknowledges only that you received a copy of this completed information sheet, believe the information to be accurate, and understand that submission of this information does not constitute an Attorney-client relationship unless you hire the Attorney and enter into the Agreement for Representation as described above.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



This portion to be completed by the Attorney

- Will represent.
- Will Investigate and report (Schedule a follow-up conference for \_\_\_\_\_ days)
- Representation declined – Letter of declination will be sent.
- Party will get back with us- No action to be taken and party was so informed.
- Client declined representation at this time.

Interviewed by: \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_

Office Location: \_\_\_\_\_

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