

INFORMATION

Please fill out as much information as you can. We will need all of your information and most of your spouse's information. If you do not have all of the information at this time, you can call our office with the information later.

Today's Date: _____

How did you hear about our offices? _____

Type of Case:

Divorce _____

Modification of _____ (please check one of the following three)

Custody _____

Visitation _____

Support _____

Enforcement _____

Other _____

TELL US ABOUT YOU **(Please provide complete names no abbreviations or initials)**

Name: _____
(Last) (First) (Middle) (Maiden Name)

Street Address: _____

City, State, & Zip Code: _____

E-mail Address: _____ (Please secure your e-mail from others viewing it.)

Facebook: _____ (Cease posting anything that may impact your case or discussing on line. Mutual friends may access and publish to opposing party to your detriment.)

Cell Phone: _____ (Please note there is software available to eavesdrop into conversation without ringing or lighting up your phone...an open microphone if someone had access to your phone. You may not want to bring your phone into our meeting.)

Home Phone Number (area code first): _____

Work Phone Number (area code first): _____

Ethnicity: _____ Sex: _____ Date of Birth: _____

Driver's License Number & State: _____ Social Security Number: _____

Employer: _____ Job Description: _____

Business Address: _____

City, State, & Zip Code: _____

Work Hours and Days: _____ **Can you be called at work?** _____

Place of Birth: _____ State _____

Please list all bank accounts to which only you have access: _____

Please list all joint bank accounts to which you or your spouse have access: _____

TELL US ABOUT YOUR SPOUSE OR EX-SPOUSE

Name: _____
(Last) (First) (Middle) (Maiden Name)

Street Address: _____

City, State, & Zip Code: _____

Home Phone Number (area code first): _____

Work Phone Number (area code first): _____

Ethnicity: _____ Sex: _____ Date of Birth: _____

Driver's License Number & State: _____ Social Security Number: _____

Employer: _____ Job Description: _____

Business Address: _____

City, State, & Zip Code: _____

Work Hours and Days: _____

E-mail Address: _____

Place of Birth: _____ State _____

TELL US ABOUT THE MARRIAGE OR DIVORCE

Date of Marriage: _____ Date Separated: _____

City and State Where Married: _____

Date Divorced: _____

City of Divorce: _____

TELL US ABOUT THE CHILDREN OF THIS MARRIAGE

If none from this marriage, please circle: none from this marriage

1. Name: _____ Sex: _____ Date of Birth: _____

Place of Birth: _____ Social Security Number: _____

2. Name: _____ Sex: _____ Date of Birth: _____

Place of Birth: _____ Social Security Number: _____

3. Name: _____ Sex: _____ Date of Birth: _____

Place of Birth: _____ Social Security Number: _____

4. Name: _____ Sex: _____ Date of Birth: _____

Place of Birth: _____ Social Security Number: _____

Present Address of Children: _____

Are you or your spouse pregnant? _____

RESIDENCY

You have lived in Dallas/Tarrant/Denton/Collin, etc. County for _____ years and _____ months.

You have lived in Texas for _____ years and _____ months.

Your spouse has lived in Dallas County for _____ years and _____ months.

Your spouse has lived in Texas for _____ years and _____ months.

*There is a requirement of 6 months residency in Texas and 90 days in Dallas/Tarrant/Denton/Collin, etc. County by at least one party.

BANKRUPTCY

Please circle one: I DO or DO NOT have a bankruptcy pending at this time.

HOW YOUR SPOUSE WILL BE SERVED WITH LEGAL DOCUMENTS

- 1. Please circle one: Will your spouse sign the legal documents he or she receives? YES ____ or NO ____
- 2. My spouse will not sign any documents and we may need to have the Sheriff serve the papers. Therefore, he or she should be served at: Day(s) of the Week: _____ Time(s) of Day: _____

Address for Service: _____

3. Please circle one: We will need some other form of service. YES ____ or NO ____ If so, please discuss with the attorney.

GROUND FOR DIVORCE (IF APPLICABLE)

The grounds for divorce I would like listed in the legal documents is/are:

Conflict of Personalities? (No Fault) YES ____ or NO ____ If other, please list: _____

CONSERVATORSHIP AND SUPPORT

If there are no children from this marriage, please circle NO CHILDREN and go to the next section.

Please circle True or False:

No child is born or adopted of this marriage? _____ TRUE or FALSE _____

We have children under 18 years of age? _____ TRUE or FALSE _____

I wish to be the Primary Custodial Parent (children live with me) and my spouse will pay child support? _____ TRUE or FALSE _____

I wish my spouse to be the Primary Custodial Parent (children live with my spouse) and I will pay child support? _____ TRUE or FALSE _____

There have been other court proceedings regarding the children of this marriage? _____ TRUE or FALSE _____

PROPERTY

Please circle True or False:

I expect that we CANNOT agree on the division of all personal property and debts and we will most likely need the Court to divide them? _____ TRUE or FALSE _____

I expect that we CAN agree on the division of all personal property by ourselves? _____ TRUE or FALSE _____

Additional Notes: _____

_____.

NAME CHANGE INFORMATION

If desired, the female party of this marriage may change her name back to her prior name. If applicable, please list the name to change from (first, middle, last): _____
to the desired name of (first, middle, last): _____.

NOTICE OF DISMISSAL

I know and understand that if my divorce is not finalized within ninety (90) days of the filing date on the Original Petition for Divorce, then it is subject to dismissal by the Court without any notice to me. With this in mind, I further understand it is my responsibility to get information to my attorney on time, to get my spouse to sign the legal documents, and to contact my attorney's office to schedule my court date. You may request the Court to extend any deadlines of dismissal of your court date.

(Signature)

(Date)

CONTESTED DIVORCE FEES

If the divorce is contested (meaning my spouse hires an attorney or represents themselves to the Court), I understand the attorney fees are \$550 per hour and that these additional fees must be paid within one (1) week of notice received by me by e-mail. In the event that these additional fees are not paid I hereby give Randy J. Essenburg permission to withdraw from representing me on this case. Furthermore, the signature below is my agreement that the attorney may withdraw and the attorney may use this document in a Motion to Withdraw as evidence of this agreement.

(Signature)

(Date)