

LAW OFFICES
LOCKE & LYDEN

A Professional Limited Liability Company
10615 Judicial Drive, Suite 502
Fairfax, Virginia 22030
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DOMESTIC RELATIONS INTAKE FORM

(Please complete the following form legibly)

Personal Information

Contact Name

_____ *First Name* _____ *Middle Name* _____ *Last Name*

Home Address

_____ *Street Address*

Home Telephone

_____ *City* _____ *State* _____ *Zip Code*

Work Telephone _____

Cell Phone

_____ Fax Number _____

Current Employer

_____ *Name*

_____ *Street Address*

_____ *City* _____ *State* _____ *Zip Code*

Place of Birth

_____ Date of Birth _____ / _____ / _____

Email Address

_____ Social Security No. _____

Have you ever used a different name, including maiden name? _____

If so, what name(s) & why? _____

Have you ever been in the military? _____ If so, which branch? _____

Information About Marriage

(Complete regarding current marriage if here about issues relating to current marriage. Complete regarding prior marriage if here about issues relating to prior marriage)

Date of Marriage _____ Place of Marriage _____

City State

Date of Separation _____ Date of Divorce _____

Place of Last Cohabitation _____

Number of this marriage for Husband? _____ Number of this marriage for Wife? _____

Information About Children

Full Names & Birth Dates _____

Information About Spouse, Ex-Spouse OR Other Parent (Complete about opposing party)

Name _____
First Name Middle Name Last Name

Home Address _____
Street Address

Home Telephone _____ *City State Zip Code* Work Telephone _____

Cell Phone _____ Fax Number _____

Current Employer _____
Name

Street Address

City State Zip Code

Place of Birth _____ Date of Birth ____/____/____

Email Address _____ Social Security No. _____

Has he/she ever used a different name, including maiden name? _____
If so, what name(s) & why? _____

Has he/she ever been in the military? _____ If so, which branch? _____

Information Needed by Commonwealth of Virginia

Husband's/Father's Race: _____

Husband's/Father's Highest Level of Education: _____

Husband's/Father's Primary Language: _____

Wife's/Mother's Race: _____

Wife's/Mother's Highest Level of Education: _____

Wife's/Mother's Primary Language: _____

Date Form Completed: _____

How did you hear about this firm? _____