PRO-SE CLIENT INTAKE FORM-DIVORCE/PATERNITY

Please fill out to completion. Any information left out could result in a delay in the completion of your documents and the timely filing of your case.

| Name: | |
|--|-----------|
| DOB: | |
| Address: | |
| _ | <u> </u> |
| SSN: | |
| Do you make more than \$50,000.00 in a year? Date of Marriage: | ☐ Yes ☐No |
| County/State of | |
| Other Partys' Name: | |
| Address: | |
| DOB: | |
| Do you have a property with the person named above? | □ Yes □No |
| Is it the same as the address listed above? | □ Yes □No |
| Do the parties have minor/dependent children in common? | □Yes □No |

| If Yes, please list names, dates of birth and SSN: | | | | |
|--|--|--|---|--|
| | Dates | Address (including city and state) where child lived | Name and present address of person child lived with | Relationship to child |
| Addresses children lived at for the past 5 years, with whom, and for how long? | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
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| Comments: | | | | |
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USE THIS SPACE IF YOU NEED EXTRA ROOM TO WRITE YOUR RESPONSES:

