

LAW OFFICES
CINDY M. FLOYD

DOMESTIC INFORMATION SHEET

Date of Interview: _____ Date File Opened: _____ File No: _____

1) CLIENT (Plaintiff, Defendant)

Full Name: _____ Race: _____
First Middle & Maiden Name if Wife Last

Address: _____ Telephone: _____

County: _____

Age*: _____ Date of Birth: _____ Place of Birth: _____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____ Driver's License#: _____

Education*: _____ SSN: _____

Where Employed: _____ Telephone: _____

How Long: _____ Pension: _____ Vested: _____ yes _____ no _____

Employment History*: _____ Health*: _____

Number of Previous Marriages: _____ Number of Minor Children by Previous Marriage: _____

How Much Support Furnished Children by Previous Marriages: _____

2) ADVERSE PARTY

Full Name: _____ Race: _____
First Middle & Maiden Name if Wife Last

Address: _____ Telephone: _____

County: _____

Age*: _____ Date of Birth: _____ Place of Birth: _____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____ Driver's License#: _____

Education*: _____ SSN: _____

Where Employed: _____ Telephone: _____

How Long: _____ Pension: _____ Vested: _____ yes _____ no _____

Employment History*: _____ Health*: _____

Number of Previous Marriages: _____ Number of Minor Children by Previous Marriage: _____

How Much Support Furnished Children by Previous Marriages: _____

3) DATE, STATE AND COUNTY OF THIS MARRIAGE: _____

4) DATE PARTIES SEPARATED: _____ Who Has Children Now? _____

5) RESIDENCY:
Both parties in South Carolina: More than three months: _____ More than one year: _____

6) COUNTY PARTIES LAST LIVED TOGETHER: _____

7) CHILDREN OF THIS MARRIAGE:

Full Name Age Date of Birth SSN Race

8) INTERNET PRESENCE: List all personal or professional Internet exposure such as: web page, Facebook, Myspace, LinkedIn, etc.

CLIENT: _____

ADVERSE PARTY: _____

9) PRIOR FAMILY COURT ACTIONS: _____

10) CLAIMS OR COURT ACTIONS RESULTING IN PAYMENT (e.g. auto accidents, employment benefits): _____

11) BANKRUPTCY: When filed: _____ Case No: _____ Discharged: _____

12) PROPOSED CUSTODY & CHILD SUPPORT REQUIREMENTS: _____

13) PROPERTY SETTLEMENT PROPOSED: _____

14) ALIMONY CONSIDERATIONS: _____

15) GROUND(S) FOR DIVORCE*: _____

16) NAME CHANGE: _____

17) REAL/PERSONAL PROPERTY:

Description	Names that property is titled	value	amount owed
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18) IF EITHER YOU OR YOUR SPOUSE HAVE RETIREMENT/PENSION: _____ **CLIENT** _____ **SPOUSE**
EMPLOYER: _____ **DATES OF SERVICE/EMPLOYMENT:** _____

IF ANY PORTION OF RETIREMENT/PENSION IS DISABILITY STATE PERCENTAGE/AMOUNT: _____

19) WITNESSES: (Potential and probable to corroborate grounds for divorce)

Name Address Phone

20) FACTS: