

## Family Law Client Information

## ABOUT YOU:

Name:	Date of Birth:	
Physical Address:		
Mailing Address:		
Home Telephone:		
Social Security #:		
State of Birth:		
Employer's Name:		
Employer's Address:		
Email Address:		
ABOUT THE OTHER PARTY:		
Name:	Date of Birth:	
Physical Address:		
Mailing Address:		
Social Security #:		
State of Birth:		
Employer's Name:		
Employer's Address:		

## ABOUT YOUR MARRIAGE (if applicable): Date of Marriage:\_\_\_\_\_\_ Date of Separation:\_\_\_\_\_ Place of Marriage: ABOUT YOUR CHILDREN (if applicable): First Child: Name:\_\_\_\_\_\_\_ Sex:\_\_\_\_\_\_ Date of Birth: Social Security #:\_\_\_\_ Place of Birth: Second Child: Name:\_\_\_\_\_\_\_ Sex:\_\_\_\_\_\_ Date of Birth: Social Security #:\_\_\_\_ Place of Birth: Third Child: Name:\_\_\_\_\_\_\_ Sex:\_\_\_\_\_\_ Date of Birth: Social Security #:\_\_\_\_ Place of Birth: Fourth Child: Name:\_\_\_\_\_\_\_ Sex:\_\_\_\_\_\_ Date of Birth: Social Security #:\_\_\_\_ Place of Birth:

## OTHER PERTINENT INFORMATION:

Have You,	/your spouse resided in the State of T	Texas for at least 6 months?
What Cou	unty have you/your spouse resided in	for the last 90 days?
Have your	children resided in the State of Texa	as for at least 6 months?
What Cou	anty have your children resided in for	the last 6 months?
		y the subject of a Family Violence Protective Order or d? If so, please provide the following:
Date:	Cause #:	Court:
=	prior orders for conservatorship, pos y any Court? If so, please provide the	ssession and access, or support of your children been e following:
Date:	Cause #:	Court:
other child	dren are you currently obligated to su	will not be the subject of this case? If so, how many apport?
	_	
	Visitation	
	Child Support	
	Modification of prior order	
	Enforcement of prior order	
	Termination of Parental Rights	
	Adoption of Child	
	Adoption of Adult	
	Name Change (vours) to	

 Name Change (child(ren)'s) to: