

DATE: _____

ATTORNEY: _____

1. PARTIES

FULL NAME OF CLIENT _____
+ MAIDEN NAME

AGE: _____ BIRTHPLACE (State): _____

SOCIAL SECURITY NUMBER: _____ BIRTHDATE: _____

NATIONALITY: _____

DRIVER'S LICENSE NUMBER: _____

CURRENT ADDRESS: _____

HOME PHONE NO.: _____

LENGTH OF RESIDENCE IN TARRANT COUNTY: _____

EDUCATION: H.S. ____ GRAD: ____ COLLEGE YRS. _____

EMPLOYER: _____

JOB TITLE: _____

WORK ADDRESS: _____

WORK PHONE NO.: _____ SALARY PER MO.: _____

DAYS AT WORK: _____ HRS. AT WORK: _____

LENGTH OF EMPLOYMENT: _____

FULL NAME OF SPOUSE: _____
+ MAIDEN NAME

AGE: _____ BIRTHPLACE: _____

NATIONALITY: _____

SOCIAL SECURITY NUMBER: _____ BIRTHDATE: _____

DRIVER'S LICENSE NUMBER: _____

CURRENT ADDRESS: _____

HOME PHONE NO.: _____

LENGTH OF RESIDENCE IN TARRANT COUNTY: _____

EDUCATION: H.S. _____ GRAD: _____ COLLEGE YRS. _____

EMPLOYER: _____

JOB TITLE: _____

WORK ADDRESS: _____

WORK PHONE NO.: _____ SALARY PER MO. _____

DAYS AT WORK: _____ HRS. AT WORK: _____

LENGTH OF EMPLOYMENT: _____

2. SERVICE:

WILL SERVICE OF PROCESS BE NECESSARY? _____

BEST PLACE FOR SERVICE: HOME: _____ WORK: _____

BEST TIME FOR SERVICE: _____

3. MARRIAGE INFORMATION:

DATE OF MARRIAGE: _____

PLACE OF MARRIAGE (City and state): _____

ARE YOU NOW SEPARATED? _____

DATE OF SEPARATION: _____

HAVE YOU PREVIOUSLY FILED FOR DIVORCE? _____

DO YOU THINK YOUR SPOUSE HAS AN ATTORNEY? _____

IF SO, NAME: _____

DATE OF PREVIOUS MARRIAGE OF PETITIONER: _____

OF RESPONDENT: _____

CHILDREN OF PREVIOUS MARRIAGE OF PETITIONER: _____

OF RESPONDENT: _____

DO YOU PAY CHILD SUPPORT? _____ \$ _____

DO YOU RECEIVE CHILD SUPPORT? _____ \$ _____

DOES SPOUSE PAY CHILD SUPPORT? _____ \$ _____

DOES SPOUSE RECEIVE CHILD SUPPORT? _____ \$ _____

4. GROUNDS FOR DIVORCE:

_____ Insupportability _____ Felony Conviction
_____ Cruelty _____ Abandoned for 1 yr.
_____ Mental Confinement _____ Lived apart 3 yrs.
_____ Adultery

5. CHILDREN:

None: _____ None under 18 years: _____

Children under 18 years of age:

A. NAME: _____ B.D. _____

BIRTHPLACE: _____ SEX: _____

SS#: _____ CURRENT RESIDENCE WITH: _____

HANDICAPS: _____

B. NAME: _____ B.D. _____

BIRTHPLACE: _____ SEX: _____

SS#: _____ CURRENT RESIDENCE WITH: _____

HANDICAPS: _____

C. NAME: _____ B.D. _____

BIRTHPLACE: _____ SEX: _____

SS# _____ CURRENT RESIDENCE WITH: _____

HANDICAPS: _____

Are children under previous court order? _____

Do the children own any property? _____

Plead agreement on conservatorship and support: _____

OR

Who will be named Managing Conservator? _____

Who will be named Possessory Conservator? _____

Do you want Joint Managing Conservatorship? _____

Use Standard Visitation? _____

Tax exemption should go to Petitioner ____ Resp. _____

6. PROPERTY:

REAL ESTATE:

A. ADDRESS: _____

MORTGAGE CO.: _____

MORTGAGE BALANCE: _____

PRICE PAID: \$_____ FAIR MARKET VALUE: \$_____

YEAR BOUGHT: _____

MONTHLY PAYMENTS: _____

B. ADDRESS: _____

MORTGAGE CO.: _____

MORTGAGE BALANCE: _____

PRICE PAID: \$_____ FAIR MARKET VALUE \$_____

YEAR BOUGHT: _____

MONTHLY PAYMENTS: _____

HOMESTEAD RESIDENCE SHOULD BE AWARDED TO:

VEHICLES, BOATS, MOTORCYCLES:

A. YEAR: _____ MAKE: _____ MODEL: _____

WHO DRIVES? _____ PAID OFF? _____

LOAN WITH: _____

FAIR MARKET VALUE: \$ _____

B. YEAR: _____ MAKE: _____ MODEL: _____

WHO DRIVES? _____ PAID OFF? _____

LOAN WITH: _____

FAIR MARKET VALUE: \$ _____

C. YEAR: _____ MAKE: _____ MODEL: _____

WHO DRIVES? _____ PAID OFF? _____

LOAN WITH: _____

FAIR MARKET VALUE: \$ _____

BANK ACCOUNTS, SAVINGS ACCT. CD'S, CREDIT UNION, ETC.:

A. NAME OF INSTITUTION: _____

ACCOUNT NAME: _____

AMOUNT ON DEPOSIT: _____

NAMES ON WITHDRAWAL CARDS: _____

B. NAME OF INSTITUTION: _____

ACCOUNT NAME: _____

AMOUNT ON DEPOSIT: _____

NAMES ON WITHDRAWAL CARDS: _____

C. NAME OF INSTITUTION: _____

ACCOUNT NAME: _____

AMOUNT ON DEPOSIT: _____

NAMES ON WITHDRAWAL CARDS: _____

LIFE INSURANCE:

A. NAME OF COMPANY: _____

INSURING LIFE OF: _____ AMOUNT: _____

B. NAME OF COMPANY: _____

INSURING LIFE OF: _____ AMOUNT: _____

STOCKS, MUTUAL FUNDS:

A. NAME OF STOCK: _____

ESTIMATED AMOUNT INVESTED: _____

RETIREMENT, PENSION OR OTHER BENEFITS:

DO YOU PARTICIPATE IN ANY RETIREMENT PLAN? _____

DOES YOUR SPOUSE PARTICIPATE IN ANY PLAN? _____

DO YOU PARTICIPATE IN ANY SAVINGS PLAN? _____

DOES YOUR SPOUSE PARTICIPATE IN ANY SAVINGS PLAN? _____

Is there any mineral interest? _____

Are there any livestock? _____

Do you and your spouse own a business? _____

INSURANCE:

Do you carry insurance through your job? _____

If so: Name of Company _____

Certificate/Policy #: _____ Group #: _____

Are the children covered under this plan? _____

Does your spouse carry insurance through job? _____

If so: Name of Company: _____

Certificate/Policy #: _____ Group #: _____

Are the children covered under this plan? _____

Do you want to ask for disproportionate share of property based on these reasons:

- _____ fault in the breakup of the marriage
- _____ benefits innocent spouse derived from continuation of marriage
- _____ disparity earning power of spouses/ability to support self
- _____ health of the spouse
- _____ spouse to whom conservatorship of children is granted
- _____ needs of the children of the marriage
- _____ education and future employability of the spouses
- _____ community indebtedness and liabilities
- _____ tax consequences of the division of property
- _____ ages of the spouses
- _____ earning power, bus. opportunities, capacities of spouses
- _____ need for future support
- _____ nature of the property involved in the division
- _____ wasting of community assets by the spouses
- _____ credit for temporary alimony paid by a spouse
- _____ community funds used to purchase out-of-state property
- _____ gifts to or by a spouse during the marriage
- _____ increased value of sep. prop. through community efforts
- _____ excessive community prop. gifts to parties' children
- _____ reimbursement
- _____ expected inheritance of a spouse
- _____ attorney's fees to be paid
- _____ creation of community prop. through spouse's sep. est.

_____ creation of comm. prop. by efforts or lack of spouse

7. DEBTS:

DOES ANYONE OWE YOU OR YOUR SPOUSE ANY MONEY?

IF SO, EXPLAIN: _____

ARE YOU INVOLVED IN ANY LAWSUITS? _____

IF SO, EXPLAIN: _____

LIST LIABILITIES OTHER THAN HOUSE AND/OR AUTOMOBILES:

| <u>Creditor:</u> | <u>H/W/J</u> | <u>Mo. Pymt.</u> | <u>Tot. Due</u> |
|------------------|--------------|------------------|-----------------|
| _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ |
| _____ | _____ | \$ _____ | \$ _____ |

8. SEPARATE PROPERTY:

DO YOU OWN ANY SEPARATE PROPERTY? _____

REIMBURSEMENT ON SEPARATE PROPERTY?

DOES YOUR SPOUSE OWN ANY SEPARATE PROPERTY?

9. TEMPORARY RESTRAINING ORDER:

- communicating with Petitioner in offensive manner
- threatening Petitioner
- harassing Petitioner by phone
- injuring Petitioner
- threatening bodily harm
- destroying property
- falsifying records
- concealing property
- destroying tangible property
- tampering with property
- alienating property
- incurring debts
- withdrawing funds
- spending funds
- withdrawing employee benefits
- entering safe-deposit box
- withdrawing insurance value
- changing life insurance beneficiary
- affecting casualty, auto or health insurance
- affecting utility service and deposits
- excluding Petitioner from residence
- opening or diverting mail
- signing or endorsing Petitioner's name
- terminating or limiting credit cards
- interfering with motor vehicle
- instituting other action

- molesting or disturbing children
- removing children beyond jurisdiction
- withdrawing children from school/day care
- hiding children from Petitioner or changing place of abode

Respondent's authorizations:

- operating business
- spending for legal fees
- spending for living expenses
- withdrawing funds: (Specific reasons)

EXTRAORDINARY RELIEF: (EX PARTE WITH AFFIDAVIT)

- _____ attaching children
- _____ taking possession of children
- _____ excluding Respondent from possession of children

10. TEMPORARY ORDERS ON PROPERTY:

Petitioner should have:

- _____ exclusive use of residence
- _____ exclusive use of automobile
- _____ exclusive use of other property:

11. TEMPORARY ORDERS ON CHILDREN:

Petitioner should:

- _____ be appointed Temporary Managing Conservator
- _____ be appointed Temporary Possessory Conservator
- _____ be paid temporary child support

- _____ order Social Study
- _____ appoint attorney ad litem

SHOULD RESPONDENT BE SERVED WITH A NOTICE OF HEARING FOR
 TEMPORARY ORDERS WHEN SERVED?

12. INTERIM ATTORNEY FEES AND TEMPORARY ALIMONY:

Ask for temporary attorney fees: _____ \$ _____

Ask for temporary alimony: _____ \$ _____

13. DISCOVERY:

Need from Respondent:

- _____ inventory/appraisement
- _____ copies of income tax returns 19__ to 19__

_____ copies of specific papers:

14. CHANGE OF NAME:

IF A DIVORCE IS GRANTED, WILL THERE BE A CHANGE OF NAME?

NO

YES: _____

15. ATTORNEY'S FEES:

DO YOU WANT TO ASK FOR RESPONDENT TO PAY PETITIONER'S

ATTORNEY FEES? _____

16. ADDRESS IN WHICH YOU WOULD LIKE TO RECEIVE MAIL (IF DIFFERENT FROM ABOVE ADDRESS):

17. MISCELLANEOUS INFORMATION:

WHO REFERRED YOU TO THIS OFFICE? _____