INITIAL INTERVIEW FORM FAMILY LAW

TODAY'S DATE: AT	TORNEY:		
REGARDING/MATTER:			
	REFERRED BY		
EMAIL ADDRESS:			
PERSONAL INFORMATION OF CL	<u>JENT:</u>		
FULL LEGAL NAME:	- · · · · · · · · · · · · · · · · · · ·		
	NICKNAME:		
ADDRESS:			
	E:		
MAILING ADDRESS:			
CITY/COUNTY:	STATE: ZIP:		
HOME PHONE NO.	_ CELL PHONE NO		
WORK PHONE NO	_		
BEST PLACE TO CONTACT YOU:			
DATE OF BIRTH:	STATE WHERE BORN:		
SSN:	DRIVER'S LICENSE NO.		
EDUCATION:	RACE: SEX:		
EMPLOYER:			

Olmstead & Olmstead, P.C.

Initial Consultation Form (Family Law)

Rev. 5/08

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EMPLOYER ADDRESS:	
JOB TITLE:	SALARY:
PAID WEEKLY, BIWEEKI	LY, MONTHLY?
ANY OTHER SOURCE OF	INCOME?
IF YES, STATE THE AMOU	
	ON OF OPPOSING PARTY:
IS THE OPPOSING PARTY	REPRESENTED BY COUNSEL?
IF YES, NAME & PHONE 1	NO
NAME:	
	NICKNAME:
	YOU LIVE:
HOME PHONE NO	WORK PHONE NO
DOB:	STATE WHERE BORN:
SSN:	DRIVER'S LICENSE NO
EDUCATION:	RACE: SEX

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JOB TITLE:	SALARY:
PAID WEEKLY, BIWEEKLY, MONTHLY	
ANY OTHER SOURCE OF INCOME?	
IF YES, STATE THE AMOUNT & SOUR	CE:
MARRIAGE:	
DATE OF MARRIAGE:	LENGTH OF MARRIAGE:
STATE WHERE MARRIED:	
COUNTY/CITY WHERE MARRIED:	
RESIDENT & DOMICILIARY OF VIRGIN	NIA? HOW LONG?
ADDRESS OF WHERE YOU LIVED AS F	HUSBAND & WIFE:
COUNTY/CITY OF:	
NAMES & RELATIONSHIP OF ALL PER	SONS LIVING IN THE HOME:
DATE OF SEPARATION:	_
CIRCUMSTANCES THAT LED TO YOUR	R SEPARATION:

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CHILDREN;				
FULL NAME	DATE OF BIRTH	AGE	IN THE CUSTODY OF	SCHOOL ATTENDING
	<u></u>	J <u> </u>	<u> </u>	
PENDING COURT DATE	S?			
HAS A SUIT BEEN FILE	O WITH TH	IE COUF	RTS?	·
ARE THERE ANY COUR	T ORDERS	S IN PLA	CE?	
ARE YOU RECEIVING C	HILD SUP	PORT?_		
AMOUNT?		НС	OW OFTEN?	
ARE YOU RECEIVING S				
AMOUNT?			OW OFTEN?	

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