

THE LAW OFFICES OF PAUL T. FANNING, P.C.
Tyler, Texas
(903) 597-7878

DIVORCE BASIC INFORMATION

Please complete this questionnaire. If you will expend the time and effort to complete all items, you will give us some of the basic background information necessary to begin to understand the complexity of your Family Law problem. All information will be held in confidence subject to legal limitations.

Today's Date: _____

CLIENT:

Full Name: _____

Residence Address: _____

City: _____ County: _____ State: _____ Zip: _____

Mailing Address (where you wish correspondence from this office to be sent, if other than the above):

Street or Box: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Office Phone: _____ Fax: _____

Mobile Phone: _____ Pager: _____ Alternate Phone: _____

E-Mail: _____ Secure? _____

Do You Check Daily? _____ Okay to with you communicate online? _____

Birth Date: _____ Present Age: _____ Place where born: _____

Social Security No. _____ Driver's License No. _____

Employer: _____

(Name) (Complete Address)

Position or Job Title: _____

Gross Pay: _____ Pay Period: _____

Length of Employment: _____ Education: _____

Military: Branch: _____ Dates: _____ to _____ Rank: _____

SPOUSE:

Full Name: _____

Residence Address: _____

City: _____ County: _____ State: _____ Zip: _____

Home Phone: _____ Office Phone: _____

Birth Date: _____ Present Age: _____ Place where born: _____

Social Security No. _____ Driver's License No. _____

Employer: _____

(Name) (Complete Address)

Position or Job Title: _____

Gross Pay: _____ Pay Period: _____

Length of Employment: _____ Education: _____

Military: Branch: _____ Dates: _____ to _____ Rank: _____

WIFE:

Wife presently pregnant? _____ Wife's Maiden Name: _____

Does wife want a prior last name restored? _____

If so, what name does she desire? _____

JURISDICTION AND VENUE:

Have you lived in Texas continuously for the past 6 months? _____

Have you lived in your county continuously for the past 90 days? _____

MARRIAGE AND SEPARATION:

Date of Marriage: _____ City: _____ State: _____

If you are now separated, date of last separation: _____

Have you or your spouse ever previously filed suit for divorce against the other?
_____ If so, when and where? _____

RELIGIOUS PREFERENCES:

Your religious preference: _____

If you regularly attend religious services, where: _____

Your spouse's religious preference: _____

If spouse regularly attends religious services, where: _____

PREMARITAL AGREEMENTS OR POST-MARITAL AGREEMENTS:

Have you and your spouse signed a Pre-Marital Contract or any agreement during marriage which governs your property?_____

If so, do you have a copy of each with you?_____

DOCUMENTS:

Following this you will find a list of document descriptions. Next to each please check as appropriate those documents which belong to you, your spouse, or any entity in which either of you has an interest, and whether you have brought copies of them with you today:

	<u>Yours</u>	<u>Spouse's</u>	<u>Business</u>	<u>Brought Copies</u>
Income tax returns	[]	[]	[]	[]
Personal financial statements	[]	[]	[]	[]
Loan applications	[]	[]	[]	[]
Bank & S & L Statements	[]	[]	[]	[]
All love letters, cards, and notes to and from spouse	[]	[]	[]	[]
Securities (brokerage house) statements of account	[]	[]	[]	[]
All video, movie and sound recordings of you and your spouse	[]	[]	[]	[]
All diaries & journals	[]	[]	[]	[]

RECORDINGS: Have you and/or your spouse made any video or sound recordings of your activities or the activities of others?

If so, where are the recordings?_____

MARITAL DIFFICULTIES: Check as appropriate if you perceive your marital difficulties involve any of the following. Include what your spouse does to avoid you, *i.e.*, maintains a separate apartment, reads all the time, talks on phone or otherwise stays up until you are asleep, devotes all time to church/synagogue or charity work, *etc.*):

What You Say About Your Spouse

- | | |
|---|--|
| <input type="checkbox"/> Substance Abuse/Dependency | <input type="checkbox"/> Violence (Physical or Threats) |
| <input type="checkbox"/> Sexual Disappointment | <input type="checkbox"/> Religious Differences |
| <input type="checkbox"/> Sexual Infidelity | <input type="checkbox"/> Incompatibility |
| <input type="checkbox"/> Financial Disputes | <input type="checkbox"/> Homosexuality |
| <input type="checkbox"/> Disputes About Children | <input type="checkbox"/> Sexually Transmitted Disease(s) |
| <input type="checkbox"/> Career Decisions | <input type="checkbox"/> Infertility |
| <input type="checkbox"/> Other: _____ | |

Explain each item checked (continue on reverse or backs of other pages as completely as possible): _____

What Your Spouse Says About You

Regardless of whether or not you agree, and remembering what your spouse has said during conversations and/or arguments, check as appropriate if you think your spouse might say your marital difficulties involve any of the following (include what you do to avoid your spouse [see above]):

- | | |
|---|--|
| <input type="checkbox"/> Substance Abuse/Dependency | <input type="checkbox"/> Violence (Physical or Threats) |
| <input type="checkbox"/> Sexual Disappointment | <input type="checkbox"/> Religious Differences |
| <input type="checkbox"/> Sexual Infidelity | <input type="checkbox"/> Incompatibility |
| <input type="checkbox"/> Financial Disputes | <input type="checkbox"/> Homosexuality |
| <input type="checkbox"/> Disputes About Children | <input type="checkbox"/> Sexually Transmitted Disease(s) |
| <input type="checkbox"/> Career Decisions | <input type="checkbox"/> Infertility |
| <input type="checkbox"/> Other: _____ | |

Explain each item checked (continue on reverse or backs of other pages as completely as possible): _____

POLICE/BATTERINGS/CRIMINAL RECORDS: Have the police ever been called to your house? _____ If so, how many times? _____ Give dates and name of police department: _____

Have there been any acts of physical violence or threats of physical violence between you and your spouse? _____ If so, how many? _____ Explain on the reverse side.

Has either you or your spouse ever been arrested by the police or charged with a crime? _____ If so, explain on the reverse side.

Do either you or your spouse have a Concealed Handgun License? _____

Do either you or your spouse possess any firearms? _____

List all firearms: _____

MEDICAL/PSYCHIATRIC/PSYCHOLOGICAL:

Do you have any unusual medical problems? _____ Does your spouse? _____

If so, please explain on reverse. Please include *all* hospitalizations.

Please list on reverse all medications you regularly take. Please list on reverse all medications your spouse regularly takes.

Do you or your spouse have a history of HIV+? _____ Chlamydia? _____ Genital herpes? _____ Genital warts? _____ Gonorrhea? _____ Syphilis? _____ Any other S.T.D.? _____ As to each, please explain on reverse, including time and method of contraction.

Have you or your spouse ever had breast augmentation? _____ Penis enlargement? _____ An abortion? _____ As to each, on reverse please set forth time and place and physician and hospital involved.

Is there a history of substance abuse (alcoholism, drugs, *etc.*) in your family? _____ In your spouse's family? _____ Has there been any other problem with substance abuse? _____ If so, please explain.

Have you ever been evaluated, treated, or undergone therapy from a psychiatrist or psychologist, threatened to attempt suicide, or actually attempted suicide? _____ If so, please explain on reverse; include identity of doctor(s), dates, places, details and reasons.

Has your spouse ever been evaluated, treated, or undergone therapy from a psychiatrist or psychologist, threatened to attempt suicide, or actually attempted suicide? _____ If so, please explain on reverse; include the identity (names, addresses, and phone numbers) of doctor(s), dates, places, details, and reasons.

COUNSELING:

If you have ever sought marriage counseling, give dates and counselor: _____

Would counseling help now?

Is your spouse willing to cooperate in counseling? _____

PRIOR MARRIAGES:

Have you ever been married before? _____ If so, how many times?

Do you have children by previous marriage(s)? _____ If so, give full name, date and place of birth, and sex of each child of your previous marriage(s):

	<u>Name and Sex (M/F)</u>	<u>Date of Birth</u>	<u>Place of Birth County, State</u>
a.	_____	____/____/____	_____
b.	_____	____/____/____	_____
c.	_____	____/____/____	_____
d.	_____	____/____/____	_____

With whom do these children reside? _____

Do you pay/receive child support? _____ If so, how much? \$ _____ per _____

PRESENT MARRIAGE:

Has your spouse ever been married before? _____ If so, how many times?
_____ Does your spouse have children by a previous marriage? _____ If so, give full name, date and place of birth, and sex of each child of your spouse's previous marriage(s):

	<u>Name and Sex (M/F)</u>	<u>Date of Birth</u>	<u>Place of Birth County, State</u>
a.	_____	____/____/____	_____
b.	_____	____/____/____	_____
c.	_____	____/____/____	_____
d.	_____	____/____/____	_____

With whom do these children reside? _____

Does your spouse pay/receive child support? _____ If so, how much?
\$ _____ per _____

ADULTERY (complete on back using this caption and numbers, if necessary):

1. Has the time of day your spouse usually showers changed?

When? _____ Previous time: _____ Present time: _____

2. Has your spouse stopped being naked in front of you? _____

When did this change occur? _____

3. Have you noticed any unusual marks on your spouse's skin, *i.e.*, scratches or bruises?
_____ When and what were they? _____

4. Has there been any significant change in your spouse's sexual appetite, either increase
or decrease? _____ When and describe: _____

5. Has there been any significant change in your spouse's sexual techniques? _____

When and describe: _____

6. Has there been any significant change in your spouse's mood, *i.e.*, irritability, sudden
and unusual generosity, bursts of anger, or weeping? _____

When and describe: _____

Who else has noticed and remarked? _____

7. Have there been suspicious changes in your spouse's odometer readings? _____

When and describe: _____

8. Have you found unusual telephone numbers, matchbooks, or receipts on your spouse's
person or in your spouse's vehicle or clothing/belongings? _____

When and describe: _____

Have you brought this evidence with you? _____ If "no," why not? _____

9. Have you found suspicious credit card receipts, automated teller transaction receipts,
credit card charges, or canceled checks? _____ When and describe: _____

Have you brought this evidence with you? _____

If "no," why not? _____

10. Have you noticed unusual scents on your spouse? _____ When and describe: _____
_____ Who else has noticed and remarked? _____

11. Does your spouse spend unnecessary time away from home? _____

Describe: _____

12. Does your spouse take continuing education courses without a specific goal related to present employment or future plans? _____ When did this begin? _____
What and where? _____
13. Has your spouse become difficult to reach by pager and/or mobile phone? _____
When? _____
14. Has your spouse stopped receiving mobile phone itemizations? _____
When? _____ What mobile phone service? _____
15. Has your spouse stopped answering the mobile phone when you are in the vehicle?
_____ When? _____ What was the reason given, if any? _____
16. Do you and/or your spouse have a toll tag that has an itemization of use? _____
17. Would you be willing to buy your spouse such a toll tag? _____
18. Do you and/or your spouse have a cellular phone that has an itemization of use? _____
19. Would you be willing to buy your spouse such a cellular phone? _____

DEVELOPMENT OF THEMES:

In contested divorce cases, it is frequently important to develop and be prepared for the development of themes. Please list below ten (10) good things about you, ten (10) bad things about you, ten (10) good things about your spouse, and ten (10) bad things about your spouse:

Good About Me:

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____

7

8

9

10

Bad About Me:

1

2

3

4

5

6

7

8

9

10

Good About Spouse:

- 1 _____

- 2 _____

- 3 _____

- 4 _____

- 5 _____

- 6 _____

- 7 _____

- 8 _____

- 9 _____

- 10 _____

Bad About Spouse:

- 1 _____

- 2 _____

- 3 _____

- 4 _____

- 5 _____

6 _____

7 _____

8 _____

9 _____

10 _____

EMPLOYMENT HISTORY:

Please list in **reverse** chronological order, each employment or job *you* have had and the approximate years you had each, together with annual income:

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

7 _____

8 _____

Continue on reverse, if necessary.

To the best of your knowledge, please list in **reverse** chronological order, each employment or job *your spouse* has had and the approximate years of each, together with annual income:

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

7 _____

8 _____

Continue on reverse, if necessary.

CHILDREN:

<u>Full Name</u>	<u>Sex</u>	<u>Birth Date</u>	<u>With</u>	<u>Lives</u>
-------------------------	-------------------	--------------------------	--------------------	---------------------

1. _____

Social Security Account Number: _____ Texas Driver's License No. _____

Addresses for past five (5) years and the names and present addresses of each person with whom the child has lived during that period: _____

If this child has been involved in any prior suit where custody or visitation was or could have been at issue, give cause number, date of judgment, court name, and county and

state of jurisdiction on reverse and attach copies of all papers. Additionally, please check here so we can make sure you comply with the required provisions of **TEX. FAM. CODE ANN. §152.209**, *et seq.*

School Name: _____ Grade: _____ G.P.A.: _____

School conduct: _____ School teacher: _____

School Address: _____ Phone: _____

<u>Full Name</u>	<u>Sex</u>	<u>Birth Date</u>	<u>Birthplace</u>	<u>Lives With</u>
-------------------------	-------------------	--------------------------	--------------------------	--------------------------

2. _____

Social Security Account Number: _____ Texas Driver's License No. _____

Addresses for past five (5) years and the names and present addresses of each person with whom the child has lived during that period: _____

If this child has been involved in any prior suit where custody or visitation was or could have been at issue, give cause number, date of judgment, court name, and county and state of jurisdiction on reverse and attach copies of all papers. Additionally, please check here so we can make sure you comply with the required provisions of **TEX. FAM. CODE ANN. §152.209**, *et seq.*

School Name: _____ Grade: _____ G.P.A.: _____

School conduct: _____ School teacher: _____

School Address: _____ Phone: _____

<u>Full Name</u>	<u>Sex</u>	<u>Birth Date</u>	<u>Birthplace</u>	<u>Lives With</u>
-------------------------	-------------------	--------------------------	--------------------------	--------------------------

3. _____

Social Security Account Number: _____ Texas Driver's License No. _____

Addresses for past five (5) years and the names and present addresses of each person with whom the child has lived during that period: _____

If this child has been involved in any prior suit where custody or visitation was or could have been at issue, give cause number, date of judgment, court name, and county and state of jurisdiction on reverse and attach copies of all papers. Additionally, please check

here so we can make sure you comply with the required provisions of **TEX. FAM. CODE ANN. §152.209**, *et seq.*

School Name: _____ Grade: _____ G.P.A.: _____

School conduct: _____ School teacher: _____

School Address: _____ Phone: _____

<u>Full Name</u>	<u>Sex</u>	<u>Birth Date</u>	<u>Birthplace</u>	<u>Lives With</u>
-------------------------	-------------------	--------------------------	--------------------------	--------------------------

4. _____

Social Security Account Number: _____ Texas Driver's License No. _____

Addresses for past five (5) years and the names and present addresses of each person with whom the child has lived during that period: _____

If this child has been involved in any prior suit where custody or visitation was or could have been at issue, give cause number, date of judgment, court name, and county and state of jurisdiction on reverse and attach copies of all papers. Additionally, please check here so we can make sure you comply with the required provisions of **TEX. FAM. CODE ANN. §152.209**, *et seq.*

School Name: _____ Grade: _____ G.P.A.: _____

School conduct: _____ School teacher: _____

School Address: _____ Phone: _____

<u>Full Name</u>	<u>Sex</u>	<u>Birth Date</u>	<u>Birthplace</u>	<u>Lives With</u>
-------------------------	-------------------	--------------------------	--------------------------	--------------------------

5. _____

Social Security Account Number: _____ Texas Driver's License No. _____

Addresses for past five (5) years and the names and present addresses of each person with whom the child has lived during that period: _____

If this child has been involved in any prior suit where custody or visitation was or could have been at issue, give cause number, date of judgment, court name, and county and state of jurisdiction on reverse and attach copies of all papers. Additionally, please check here so we can make sure you comply with the required provisions of **TEX. FAM. CODE ANN. §152.209**, *et seq.*

School Name: _____ Grade: _____ G.P.A.: _____

School conduct: _____ School teacher: _____

School Address: _____ Phone: _____

DISABLED CHILD(REN): If any child has a physical or mental disability to the point that he or she requires special care, give the child's name, disability, and current arrangements for care: _____

PROPERTY OF CHILD(REN): Is any property owned by the child(ren)? _____

If yes, please fully describe on reverse side. Include child's name and a complete description of the property owned.

JUVENILE PROBLEMS: Has any child ever been in trouble with the juvenile or school authorities or placed under the supervision of the courts? _____

If yes, please describe fully on the reverse side. Include child's name, approximate dates, name and address of authority, and your understanding of what happened.

CHILD CUSTODY: Please complete either 1. *or* 2., and *maybe* 3. below:

1. After much discussion, my spouse and I have definitely agreed upon:

Me My spouse Both Disputed

2. My spouse and I have not discussed this subject. I presume that custody will be with: Me My spouse Both

3. I want custody, but I just don't think I can get it because _____

Has any child 12 years of age or older in the past signed, or do you believe that any such child would now be willing to sign, an affidavit expressing preference as to whom the Court appoints as custodial parent? _____

If so, which child(ren) and what preference? _____

Have you made any statements which would damage or which would be harmful to you obtaining or maintaining custody? _____

Has your spouse made any statements which would damage or which would be harmful to his/her obtaining or maintaining custody? _____

Have you signed any document(s) which would damage or which would be harmful to you obtaining or maintaining custody? _____

Has your spouse signed any document(s) which would damage or which would be harmful to his/her obtaining or maintaining custody? _____

If your answer to any of the preceding four (4) questions is "yes," please elaborate of reverse side. Remember the five (5) "w's": When, Who, What, Where and Why.

CHILD SUPPORT:

Has child support been agreed upon by you and your spouse? _____

If so, how much \$_____ per _____

(See page one and **TEX. FAM. CODE ANN. §154.001**, *et seq.*)

Other terms (such as college tuition, medical insurance, dental insurance, *etc.*): _____

Who presently provides **medical** insurance for the child(ren)? _____

Please state the name, address, and policy number of the insurance policy(ies):

_____ (Name)	_____ (Name)
_____ (Street address)	_____ (Street address)
_____ (City) (State) (Zip)	_____ (City) (State) (Zip)
Phone: (800) _____	Phone: (800) _____
_____ (Policy Number or Gp. & Cert. #)	_____ (Policy Number or Gp. & Cert. #)

Who presently provides **dental** insurance for the child(ren)? _____

Please state the name, address, and policy number of the insurance policy(ies):

_____ (Name)	_____ (Name)
_____ (Street address)	_____ (Street address)
_____ (City) (State) (Zip)	_____ (City) (State) (Zip)
Phone: (800) _____	Phone: (800) _____
_____	_____

(Policy Number or Gp. & Cert. #)

(Policy Number or Gp. & Cert. #)

CHILD POSSESSION AND ACCESS (VISITATION):

Has any agreement been negotiated concerning child visitation? _____

If so, please state your agreement:_____ If Standard Possession Order, circle here: SPO.
If not Standard Possession Order, please describe:

SUMMARY OF PROPERTY

(You may substitute where applicable a **current personal financial statement, if it is accurate;** but please complete requested items which are *not* enumerated on your current personal financial statement.)

REAL ESTATE: (Please include all kinds, *i.e.*, homestead, lake house, resort condominium/townhouses, time shares, *etc.*)

1. Address:_____

Name(s) on title:_____

Mortgage company:_____ (Name) (Address)

(Address cont'd) _____

Estimated fair market value: \$ _____ Year bought: _____

Mortgage balance: \$ _____ Monthly payments: \$ _____

Acct #: _____

2. Address:_____

Name(s) on title:_____

Mortgage company:_____

(Name) (Address)

(Address cont'd) _____

Estimated fair market value: \$ _____ Year bought: _____

Mortgage balance: \$ _____ Monthly payments: \$ _____

Acct #: _____

3. Address: _____

Name(s) on title: _____

Mortgage company: _____

(Name) (Address)

(Address cont'd) _____

Estimated fair market value: \$ _____ Year bought: _____

Mortgage balance: \$ _____ Monthly payments: \$ _____

Acct #: _____

MOTOR VEHICLES, BOATS, AIRPLANES, MOTORCYCLES, TRAILERS, ETC.:

1. Year: _____ Make: _____ Model: _____ Who Drives?: _____

License Plate: (Texas) _____ VIN #: _____

Name(s) on title: _____

Financed with: _____

(Name) (Address)

Acct #: _____

(Address cont'd)

Estimated fair market value: \$ _____ Year bought: _____

Balance owed: \$ _____ Monthly payments: \$ _____

2. Year: _____ Make: _____ Model: _____ Who Drives?: _____

License Plate: (Texas) _____ VIN #: _____

Name(s) on title: _____

Financed with: _____

(Name) (Address) Acct #: _____

(Address cont'd)

Estimated fair market value: \$ _____ Year bought: _____

Balance owed: \$ _____ Monthly payments: \$ _____

3. Year: _____ Make: _____ Model: _____ Who Drives?: _____

License Plate: (Texas) _____ VIN #: _____

Name(s) on title: _____

Financed with: _____

(Name) (Address) Acct #: _____

(Address cont'd)

Estimated fair market value: \$ _____ Year bought: _____

Balance owed: \$ _____ Monthly payments: \$ _____

4. Year: _____ Make: _____ Model: _____ Who Drives?: _____

License Plate: (Texas) _____ VIN #: _____

Name(s) on title: _____

Financed with: _____

(Name) (Address) Acct #: _____

(Address cont'd)

Estimated fair market value: \$ _____ Year bought: _____

Balance owed: \$ _____ Monthly payments: \$ _____

5. Year: _____ Make: _____ Model: _____ Who Drives?: _____

License Plate: (Texas) _____ VIN #: _____

Name(s) on title: _____

Financed with: _____

(Name) (Address)

(Address cont'd) Acct #: _____
Estimated fair market value: \$ _____ Year bought: _____
Balance owed: \$ _____ Monthly payments: \$ _____

BANK ACCOUNTS, SAVINGS ACCOUNTS, C.D.'s, CREDIT UNION ACCOUNTS, SAVINGS BONDS:

1. Name of institution: _____

(Street address) (City) (State) (Zip)
Account name: _____ Account Number: _____
Amount on deposit: \$ _____ Total loan amount: \$ _____
Name(s) on signature card: _____

2. Name of institution: _____

(Street address) (City) (State) (Zip)
Account name: _____ Account Number: _____
Amount on deposit: \$ _____ Total loan amount: \$ _____
Name(s) on signature card: _____

3. Name of institution: _____

(Street address) (City) (State) (Zip)
Account name: _____ Account Number: _____
Amount on deposit: \$ _____ Total loan amount: \$ _____
Name(s) on signature card: _____

4. Name of institution: _____

(Street address) (City) (State) (Zip)
Account name: _____ Account Number: _____
Amount on deposit: \$ _____ Total loan amount: \$ _____
Name(s) on signature card: _____

5. Name of institution: _____

(Street address) (City) (State) (Zip)

Account name: _____ Account Number: _____

Amount on deposit: \$ _____ Total loan amount: \$ _____

Name(s) on signature card: _____

(If necessary, please continue on reverse side.)

LIFE INSURANCE:

1. Name of company: _____

Address: _____ Phone: _____

Insuring life of: _____

Policy Number: _____ Face Amount: \$ _____

Beneficiary(ies): _____ Cash surrender
value: \$ _____

Pledged as collateral to: _____

Why? _____

2. Name of company: _____

Address: _____ Phone: _____

Insuring life of: _____

Policy Number: _____ Face Amount: \$ _____

Beneficiary(ies): _____ Cash surrender
value: \$ _____

Pledged as collateral to: _____

Why? _____

3. Name of company: _____

Address: _____ Phone: _____

Insuring life of: _____

Policy Number: _____ Face Amount: \$ _____

Beneficiary(ies): _____ Cash surrender
value: \$ _____

Pledged as collateral to: _____

Why? _____

4. Name of company: _____

Address: _____ Phone: _____

Insuring life of: _____

Policy Number: _____ Face Amount: \$ _____

Beneficiary(ies): _____ Cash surrender
value: \$ _____

Pledged as collateral to: _____

Why? _____

STOCKS, BONDS, MUTUAL FUNDS (Please attach the most recent brokerage statements in your possession for each account):

1. Name of account: _____

Name of brokerage firm: _____

(Street) (City) (State) (Zip)

Name of broker/account executive: _____

Account number: _____ Phone: ()

Estimated total value of account: _____

Margin account? _____ Pledged as collateral? _____

If pledged, to whom, when, and for what purpose and amount? _____

_____ \$ _____

2. Name of account: _____

Name of brokerage firm: _____

(Street) (City) (State) (Zip)

Name of broker/account executive: _____

Account number: _____ Phone: ()

Estimated total value of account: _____

Margin account? _____ Pledged as collateral? _____

If pledged, to whom, when, and for what purpose and amount? _____

_____ \$ _____

3. Name of account: _____

Name of brokerage firm: _____

(Street) (City) (State) (Zip)

Name of broker/account executive: _____

Account number: _____ Phone: ()

Estimated total value of account: _____

Margin account? _____ Pledged as collateral? _____

If pledged, to whom, when, and for what purpose and amount? _____

_____ \$ _____

RETIREMENT, PENSIONS, OTHER COMPANY BENEFITS, RECEIVABLES:

1. Do you participate in any retirement plan? _____

Full, formal name of plan: _____

Full name, address, and phone number of trustee or administrator:

Account number: _____

Estimated total value: \$ _____ Vested? _____

2. Does your spouse participate in any retirement plan?

Full, formal name of plan: _____

Full name, address, and phone number of trustee or administrator:

Account number: _____

Estimated total value: \$ _____ Vested? _____

3. Do you participate in any company savings plan?

Full, formal name of plan: _____

Full name, address, and phone number of trustee or administrator:

Account number: _____

Estimated total value: \$ _____ Vested? _____

4. Full, formal name of plan: _____

Full name, address, and phone number of trustee or administrator:

Account number: _____

Estimated total value: \$ _____ Vested? _____

5. Does anyone owe you or your spouse any money? _____

If so, how much and by whom? _____

Name and Address	Amount Owed
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

\$ _____

\$ _____

\$ _____

LAWSUITS:

1. Have you ever been a party to a civil or criminal case? _____

Have you ever been awarded a money judgment or settlement? _____

If so: When? _____ Why? _____ How much? \$ _____

What happened to the money? _____

Has a money judgment or compromise settlement ever been awarded against/conceded by you? _____ Have you ever filed bankruptcy? _____

If so: When? _____ Why? _____ How much? \$ _____

2. Has your spouse ever been a party to a civil or criminal case? _____

Has your spouse ever been awarded a money judgment or settlement? _____

If so: When? _____ Why? _____ How much? \$ _____

What happened to the money? _____

Has a money judgment or compromise settlement ever been awarded against or conceded by your spouse? _____

If so: When? _____ Why? _____ How much? \$ _____

Has your spouse ever filed bankruptcy? _____ When? _____

Why? _____ How much? \$ _____

3. Are you and/or your spouse presently involved in any other lawsuits? _____

If so, please explain: _____

LIVESTOCK, MINERAL INTERESTS, & CLUBS:

1. Do you own any livestock? _____ If so, please list: _____

2. Does your spouse own any livestock? _____ If so, please list: _____

3. Do you own any mineral interests? _____ If so, please list: _____

4. Does your spouse own any mineral interests? _____ If so, please list: _____

5. Do you belong to any clubs, *i.e.*, country clubs, with an equity interest? _____

If so, please state the name and address of the club and the amount of your equity interest: _____ \$ _____

When did you join? _____ What did it cost? \$ _____

6. Does your spouse belong to any clubs, *i.e.*, country clubs, with an equity interest? _____

If so, please state the name and address of the club and the amount of the equity interest: _____

_____ \$ _____

When did he/she join? _____ What did it cost? \$ _____

DEBTS: (Other than house and/or automobiles and/or credit cards)

1. Name, address and phone number of person/institution owed:

(Name) (Street)

(_____) _____

(Phone) (City) (State) (Zip)

\$ _____ When incurred? _____

Why incurred? _____ By whom? _____

Is creditor related to you or your spouse? _____

Is there a note? _____ Did you bring a copy? _____

Have regular payments been made? _____

2. Name, address and phone number of person/institution owed:

(Name) (Street)

(_____) _____

(Phone) (City) (State) (Zip)

\$ _____ When incurred? _____

Why incurred? _____ By whom? _____
Is creditor related to you or your spouse? _____
Is there a note? _____ Did you bring a copy? _____
Have regular payments been made? _____

3. Name, address and phone number of person/institution owed:

(Name) (Street)
(_____) _____
(Phone) (City) (State) (Zip)
\$ _____ When incurred? _____
Why incurred? _____ By whom? _____
Is creditor related to you or your spouse? _____
Is there a note? _____ Did you bring a copy? _____
Have regular payments been made? _____

4. Name, address and phone number of person/institution owed:

(Name) (Street)
(_____) _____
(Phone) (City) (State) (Zip)
\$ _____ When incurred? _____
Why incurred? _____ By whom? _____
Is creditor related to you or your spouse? _____
Is there a note? _____ Did you bring a copy? _____
Have regular payments been made? _____

5. Name, address and phone number of person/institution owed:

(Name) (Street)
(_____) _____
(Phone) (City) (State) (Zip)
\$ _____ When incurred? _____

Why incurred? _____ By whom? _____

Is creditor related to you or your spouse? _____

Is there a note? _____ Did you bring a copy? _____

Have regular payments been made? _____

6. Name, address and phone number of person/institution owed:

(Name) (Street)

(_____) _____

(Phone) (City) (State) (Zip)

\$ _____ When incurred? _____

Why incurred? _____ By whom? _____

Is creditor related to you or your spouse? _____

Is there a note? _____ Did you bring a copy? _____

Have regular payments been made? _____

7. Name, address and phone number of person/institution owed:

(Name) (Street)

(_____) _____

(Phone) (City) (State) (Zip)

\$ _____ When incurred? _____

Why incurred? _____ By whom? _____

Is creditor related to you or your spouse? _____

Is there a note? _____ Did you bring a copy? _____

Have regular payments been made? _____

8. Name, address and phone number of person/institution owed:

(Name) (Street)

(_____) _____

(Phone) (City) (State) (Zip)

\$ _____ When incurred? _____

Why incurred? _____ By whom? _____

Have you filed for all previous years? _____

Prepared by whom (name, address, & phone)? _____

Refund received? _____ If so, how much? \$ _____

Taxes owed? _____ If so, how much? \$ _____

Has any taxing authority ever filed a tax lien against you or any property owned or controlled by you? _____ If so, when, where and in what amount? _____

When was it released? _____

SEPARATE PROPERTY:

1. Do you own or claim any separate property (property owned or claimed before marriage or property received during marriage by gift or inheritance)? _____

If so, please detail your separate property. Wedding ring, _____

2. Does your spouse own or claim any separate property? _____

If so, please detail your separate property. Wedding ring, _____

LAST WILL AND TESTAMENT:

1. Do you have a Will? _____ If so, prepared by whom? _____

When? _____

Primary beneficiary: _____

Do you want to change this now? _____ If so, to whom: _____

2. Does your spouse have a Will? _____ If so, prepared by whom? _____

When? _____

Primary beneficiary: _____

POWERS OF ATTORNEY:

1. Have you ever executed a Power Of Attorney? _____ If so, prepared by whom? _____
When? _____

Your attorney-in-fact: _____

Was it a General Power Of Attorney or a Special Power Of Attorney? (Circle)

In what county is it recorded? _____

Do you want to change this now? _____ If so, to whom: _____

2. Has your spouse ever executed a Power Of Attorney? _____ If so, prepared by
whom? _____ When? _____

Your spouse's attorney-in-fact: _____

Was it a General Power Of Attorney or a Special Power Of Attorney? (Circle)

In what county is it recorded? _____

**EQUITIES - REASONS FOR ATTEMPTING TO OBTAIN MORE THAN JUST
HALF THE COMMUNITY PROPERTY (Check items which apply or may
apply to your case. If you don't know, check left margin and ask the
attorney.):**

1. Do you believe your spouse is more at fault in causing the dissolution of the marriage
or in preventing any reasonable reconciliation than you? _____

If so, how? _____

Do you believe you are more at fault in causing the dissolution of the marriage or in
preventing any reasonable reconciliation than your spouse? _____

If so, how? _____

2. Would you gain financially and otherwise if the marriage could be maintained in a healthy fashion? _____ If so, how? _____

Would your spouse gain financially and otherwise if the marriage could be maintained in a healthy fashion? _____ If so, how? _____

3. Does your spouse have a greater earning capacity than you? _____

If so, how much more per year do you estimate? \$ _____

Do you have a greater earning capacity than your spouse? _____

If so, how much more per year do you estimate? \$ _____

4. Does your spouse have a greater present personal income than you? _____

If so, how much per year? \$ _____

Do you have a greater present personal income than your spouse? _____

If so, how much per year? \$ _____

5. Are you in generally worse physical condition than your spouse? _____

If so, why/how? _____

Is your spouse in generally worse physical condition than you? _____

If so, why/how? _____

6. Do you for any reason have greater financial needs than your spouse? _____

If so, why/how? _____

Does your spouse for any reason have greater financial needs than you?
If so, why/how? _____

7. Does your spouse have more formal education or future employability than you?

_____. Please explain: _____

Do you have more formal education or future employability than your spouse ?
Please explain: _____

8. Has your spouse personally incurred substantial indebtedness or created substantial liabilities in matters which did not really involve or benefit you (such as a business

venture gone bust after you protested getting involved in it beforehand, or a lawsuit brought against your spouse and/or you because of your spouse's negligence or folly)?

If so, please explain: _____

Have you personally incurred substantial indebtedness or created substantial liabilities in matters which did not really involve or benefit your spouse?

If so, please explain: _____

9. Will there be oppressive tax consequences because of a property division by divorce? _____ Do you know? _____ If so, please explain: _____

10. What is the age disparity between you and your spouse? _____ yrs.

11. Does your spouse presently have greater earning power, business opportunities, capacities, or abilities than you? _____ If so, please explain: _____

Do you presently have greater earning power, business opportunities, capacities, or abilities than your spouse? _____ If so, please explain: _____

12. Is there any reason why you would have a greater need for future support after divorce than your spouse? _____ If so, please explain: _____

Is there any reason why your spouse would have a greater need for future support after divorce than you _____ If so, please explain: _____

13. Do you believe that the *nature* of your property is important (e.g., if your spouse is a licensed professional, the professional practice is a valuable asset; but only your *spouse* will be able to use it upon divorce) _____ If so, please explain: _____

14. Do you believe your spouse has wasted any community assets without your consent or knowledge _____ If so, please explain: _____

Have you wasted any community assets without your spouse's consent or knowledge?

_____ If so, please explain: _____

15. Do you believe that you will have to pay temporary alimony to your spouse during the pendency of the divorce action? _____

16. Has there been any expenditure of community funds to purchase out-of-state property? _____ If so, when, what, and by whom: _____

17. Has your spouse received or made (other than to you) any substantial gifts of community property during marriage? _____ If so, when, what, and to whom? _____

Have you received or made (other than to your spouse) any substantial gifts of community property during marriage? _____ If so, when, what, and to whom? _____

18. Does your spouse have a greater wealth (separate property) than you? _____

Do you have a greater wealth (separate property) than your spouse? _____

19. Has there been in your opinion any excessive gifts of community property to any child during marriage (including any child by a prior marriage)? _____ If so, please state to whom, when, and amounts: _____

20. Has there been any increase in the value of your spouse's separate property because of your spouse's expenditure of time, talent, labor, or effort during the marriage for which the community property estate was not fairly compensated? _____ If so, please explain (include the value of the increase for which there was no or inadequate fair compensation): _____

Has there been any increase in the value of your separate property because of your expenditure of time, talent, labor, or effort during the marriage for which the community property estate was not fairly compensated? _____ If so, please explain (include the value of the increase for which there was no fair or inadequate compensation): _____

21. Have any community funds (moneys earned during marriage) been used to pay off the indebtedness of your spouse's separate property (such as mortgage payments on your spouse's separate realty)? _____ If so, please enumerate: _____

Have any community funds (moneys earned during marriage) been used to pay off the indebtedness of your separate property (such as mortgage payments on your separate realty)? _____ If so, please enumerate: _____

22. Does your spouse presently have a greater expectation of receiving wealth than you (e.g., suit for damages pending, inheritance)? _____ If so, please explain: _____

Do you presently have a greater expectation of receiving wealth than your spouse (e.g., suit for damages pending, inheritance) _____ If so, please explain: _____

23. Did you help put your spouse through school or teach your spouse _____
If so, please explain: _____

Did your spouse help put you through school or teach you? _____ If so, what years in what school(s): _____

24. Did you assist your spouse in attaining your spouse's present business position? _____
How? _____

Did your spouse assist you spouse in attaining your present business position? _____
How? _____

25. Did you give up any good opportunities (such as career) or benefits (such as alimony) to become or to stay married to your spouse? _____ If so, when and what? _____

Did your spouse give up any good opportunities (such as career) or benefits (such as alimony) to become or to stay married to you? _____ If so, when and what? _____

26. Was any community property created through the use of your separate property?____
_____ If so, when and what? _____

Was any community property created through the use of your spouse's separate
property?_____ If so, when and what? _____

27. Was any community property *created* by the efforts or the lack of effort of either
you or your spouse?_____ If so, when and what? _____

Property Desires: What percentage of your total community property estate would you
like this Firm to attempt to secure for you by either settlement or trial? _____

Answer: _____%

What specific items of property, if any, do you wish this Firm to attempt to obtain for
you in your divorce case? _____

Feelings: In your own words, what are your *feelings* about your spouse? _____

(If necessary, please complete on reverse side.)

Divorce: Do you *want* to be divorced from your spouse? _____

Understandings: Do you understand this Firm has not and will not estimate your total
fee for legal services? Answer: _____

Do you understand that no attorney can ethically represent or warrant any particular
result in any case? Answer: _____

Do you understand this Firm has not and will not estimate the total amount of time that
will be required to handle your case? Answer: _____

Do you understand your obligation to be totally honest and candid with this Firm and
that your failure to be that way would be wrong and could impede or prevent us in
effectively representing you and could adversely affect you in virtually every aspect of
this matter? Answer: _____

Referrals: How did you select this Firm? _____

Southwestern Bell Business Pages _____ Yellow Pages? _____

TransWestern Business Pages _____ Yellow Pages? _____

If Personal Referral, indicate name : _____

May we write a "thank you" letter disclosing your identity? _____

Acknowledgment And Statement:

I have **read, understand, and agree with** the *General Information Concerning Post-Divorce Cases* **and** completed this questionnaire before communicating with any attorney of The Law Offices Of Paul T. Fanning, P.C. ("the Firm"). I understand that if I hire the Firm to represent me in a post-divorce case against my former spouse, its attorneys and staff will be relying upon the information I have submitted on this form and other information I give from time to time. I understand I have an obligation to be completely truthful and honest in my communications with my attorneys. I understand there will be an initial consultation of \$250.00 regardless of whether I decide to take any legal action or whether I choose to hire the Firm to represent me.

Your Signature

(FOR ATTORNEYS' OFFICE USE ONLY)

Card index checked for conflicts? _____ By whom? _____

Accept employment at present? _____, if paid retainer fee in full

Retainer fee: \$ _____ Minimum escrow deposit amount: \$ _____

Princ. \$250.00 \$ _____

Min. Hourly Rate: Assoc. \$150.00 \$ _____

Staff \$ 90.00 \$ _____

Check data processing to see if suit already filed. _____ or N/A

Post-divorce Counselor/Psychologist referral: _____ If "Yes," indicate name,
phone number and date of referral: _____

Send thank you letter? _____ Forwarding attorney (referral) fee with
advance consent of client, percentage: _____% of net fee for services. Will **not at all**
increase client's fee in any aspect.

ACTION RECOMMENDED NOW: Take no formal legal action at present _____

Petition/Answer _____ Counterclaim _____ T.R.O. Show Cause _____

Subpoena(e)

Duces Tecum: Former Spouse: __ Employer of Former Spouse: __ Other (indicate) __

Authorizations (FLL): Client _____ Children _____

General _____ General _____

Attorney _____ Attorney _____

Dental records _____ Dental records _____

Employment records _____ Employment records _____

Medical records _____ Medical records _____

School records _____ School records _____

Election by Child(ren): _____ (DA) Witness Instructions _____ (FLL)

General Instructions _____ (FLL) Support Exhibit Preparation _____ (FLL)

Inventory Instructions _____ (FLL) Request Protective Order _____ (FLL)

Settlement Proposal _____ (FLL) Investigator/Surveillance (details) _____

Need Police Records Check? _____ Need Court Records Check? _____

Additional documents that client is to produce for us: All items on pages 2 and 3 not brought already.

BY SIGNING BELOW I AM NOT RETAINING THE LAW OFFICES OF PAUL T. FANNING, P.C. ("THE FIRM") TO APPEAR AS MY COUNSEL OF RECORD. I AM ONLY ACKNOWLEDGING THE ABOVE HAS BEEN EXPLAINED TO ME AND AGREEING TO PAY THE FIRM AT THE RATES ABOVE FOR ANY ADDITIONAL CONSULTATION OR ADVICE I REQUEST SHORT OF RETAINING THE FIRM. IN ORDER TO RETAIN THE FIRM AS MY COUNSEL OF RECORD, I KNOW I MUST PAY THE RETAINER FEE AND MINIMUM COST DEPOSIT, AND SIGN AND DELIVER A WRITTEN CONTRACT OF EMPLOYMENT TO THE FIRM.

Client Signature After Interview

Date Employment Contract Sent: _____,
2001.

Date Employment Contract Received Back And Examined: _____,
2001.