

PARSONS, GRAHAM & DAY, LLC
ATTORNEYS AT LAW

Client Information

Name:	
Cell:	E-mail:
Address:	
City, State, Zip:	
Opposing Party's Name:	
Opposing Party's Address:	
City, State, Zip:	
Cell:	E-mail:
Date of Marriage: / /	City, State of Marriage:
Date of Separation:	Number of Children:
Child 1 Name:	
Date of Birth:	Residing with:
Child 2 Name:	
Date of Birth:	Residing with:
Child 3 Name:	
Date of Birth:	Residing with:
Current Visitation:	

Residence(s) of the Minor Children for past 5 years

Address 1:

Address 2:

Address 3:

Address 4:

Address 5:

Significant Property

Home:

Value:

Mortgage:

Vehicle:

Value:

Lien:

Vehicle:

Value:

Lien:

Other:

Other:

INITIAL DISCLOSURES

INCOME:

Salary and Wages (Biweekly x 2.15, Weekly x 4.3)	
Pension or retirement	
Social Security	
Disability and unemployment	
Public assistance (monthly payments only)	
Support from previous marriage	
Rental Income	
Any other sources of regular income	

EXPENSES:

Monthly recurring expenses – List names of all people for whom these expenses are incurred:	
Rent or mortgage	
Food and household supplies	
Utilities	
Telephone	
Laundry and cleaning	
Clothing	
Medical (not covered by insurance)	
Dental (not covered by insurance)	
Insurance (specify type)	
Child Care	
Payment of alimony or child support	
Children’s school expenses	
Entertainment	
Auto payment	
Auto expenses (gas, oil)	
Installment payments (charge cards, department stores, etc.)	

MUST HAVE COPIES OF PAY CHECK STUBS FOR THE LAST 3 MONTHS AND A COPY OF THE MOST RECENT FEDERAL TAX RETURN.