

HERB WEISSER, P.C.
ATTORNEY AT LAW
4504 S.W. CORBETT AVENUE #200
PORTLAND, OREGON 97239
(503) 464-1072
herb@weisserfamilylaw.com

FOR ATTORNEY USE:

Retainer Amount: \$ _____
Hourly Rate: \$ _____
Type of Case: _____
Date: _____

PERSONAL INFORMATION - CLIENT

FULL NAME _____

BIRTH NAME _____ FORMER LEGAL NAME(S) _____

RESIDENCE ADDRESS _____

MAILING ADDRESS _____

If different than your residence address, or you want your mail sent to an alternate address

E-MAIL ADDRESS: _____

HOME PHONE _____ WORK PHONE _____
OK to Call? YES _____ NO _____

CELL PHONE _____ FAX NUMBER _____
OK to Call? YES _____ NO _____ *Call before faxing? YES _____ NO _____*

DATE OF BIRTH _____ PLACE OF BIRTH _____
City and state; Country if outside U.S.

SOCIAL SECURITY NO. _____ RACE/ETHNICITY _____
For vital records purposes – divorce cases only

DRIVER'S LICENSE NUMBER, ISSUING STATE _____ EDUCATION _____
Highest grade completed

EMPLOYER NAME/MAILING ADDRESS _____

OCCUPATION _____ HOW LONG? _____

HOURLY WAGE OR SALARY \$ _____ AVG. HOURS WORKED PER WEEK _____

MONTHLY EARNINGS \$ _____ \$ _____
Gross (before taxes/withholdings) *Net (after taxes/withholdings)*

OTHER SOURCES OF INCOME _____
List source and monthly amount

PERSONAL INFORMATION - OTHER PARTY

FULL NAME _____

BIRTH NAME _____ FORMER LEGAL NAME(S) _____

RESIDENCE ADDRESS _____

E-MAIL ADDRESS: _____

HOME PHONE _____ WORK PHONE _____

CELL PHONE _____ FAX NUMBER _____

DATE OF BIRTH _____ PLACE OF BIRTH _____
City and state; Country if outside U.S.

SOCIAL SECURITY NO. _____ RACE/ETHNICITY _____
For vital records purposes – divorce cases only

DRIVER'S LICENSE NUMBER, ISSUING STATE _____ EDUCATION _____
Highest grade completed

EMPLOYER NAME/MAILING ADDRESS _____

OCCUPATION _____ HOW LONG? _____

HOURLY WAGE OR SALARY \$ _____ AVG. HOURS WORKED PER WEEK _____

MONTHLY EARNINGS \$ _____ \$ _____
Gross (before taxes/withholdings) Net (after taxes/withholdings)

OTHER SOURCES OF INCOME _____
List source and monthly amount

MARITAL INFORMATION
FOR DIVORCE CASES ONLY

CLIENT:
NUMBER OF THIS MARRIAGE _____ (First, second, etc.)
PRIOR MARRIAGE(S) TERMINATED ON _____ REASON _____
Month and Year Annulment, Divorce, Death of Spouse

OTHER PARTY:
NUMBER OF THIS MARRIAGE _____ (First, second, etc.)
PRIOR MARRIAGE(S) TERMINATED ON _____ REASON _____
Month and Year Annulment, Divorce, Death of Spouse

THIS MARRIAGE:

DATE OF MARRIAGE _____ DATE OF SEPARATION _____

PLACE OF MARRIAGE _____
City, County and State; Country if outside U.S.

CHILDREN OF THIS MARRIAGE/RELATIONSHIP

Full name _____ Birthdate _____
Child's Social Security No. _____

Full name _____ Birthdate _____
Child's Social Security No. _____

Full name _____ Birthdate _____
Child's Social Security No. _____

Full name _____ Birthdate _____
Child's Social Security No. _____

Is there a prior court order for custody? Yes ____ No ____

If "YES", who has legal custody of the children? Me ____ Other Parent ____ Joint Custody ____

If "NO", do the children live primarily with you, the other parent,
or are they spending roughly equal time with each parent? Me ____ other parent ____ equal time ____

Is there an agreed or court-ordered parenting time (visitation) schedule? Yes ____ No ____
If "YES", is it. Agreed ____ or Court Ordered ____

CHILD SUPPORT

For children of this marriage/relationship

Are you paying child support to the other party? Yes ____ No ____

Monthly Amount. \$ _____

Are you receiving child support from the other party?. Yes ____ No ____

Monthly Amount. \$ _____

For children of prior marriage/relationship

Are you paying child support? Yes ____ No ____

To whom? _____ Monthly Amount \$ _____

Are you receiving child support?. Yes ____ No ____

From whom? _____ Monthly Amount \$ _____

The following information is required by Federal law in any proceeding involving minor children:

Where have the children of this marriage/relationship lived in the past 5 years, and with whom?
For children younger than 5 years old, specify for time period since the child(ren)'s birth.

| <u>Dates (from/to)</u> | <u>Address</u> | <u>Lived with</u> |
|------------------------|----------------|-------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

SPOUSAL SUPPORT

This marriage:

Are you paying spousal support to the other party? Yes No

Monthly Amount. \$ _____

Are you receiving spousal support from the other party?. Yes No

Monthly Amount. \$ _____

Prior marriage:

Are you paying spousal support? Yes No

To whom? _____ Monthly Amount \$ _____

When does this spousal support end? _____

Are you receiving spousal support?. Yes No

From whom? _____ Monthly Amount \$ _____

When does this spousal support obligation end? _____

PROPERTY

MARITAL RESIDENCE/FAMILY HOME _____

Purchase Date _____ Purchase Price \$ _____ Current Value of Property \$ _____

Monthly Payment: 1st Mortgage \$ _____ 2nd Mortgage \$ _____

Was this property purchased or owned by you prior to the date of marriage? Yes No

Does anyone other than your spouse/partner have an interest in this property? Yes No

RENTAL OR OTHER REAL PROPERTY _____

Purchase Date _____ Purchase Price \$ _____ Current Value of Property \$ _____

Monthly Payment: 1st Mortgage \$ _____ 2nd Mortgage \$ _____

Was this property purchased or owned by you prior to the date of marriage? Yes No

Does anyone other than your spouse/partner have an interest in this property? Yes No

RENTAL OR OTHER REAL PROPERTY _____

Purchase Date _____ Purchase Price \$ _____ Current Value of Property \$ _____

Monthly Payment: 1st Mortgage \$ _____ 2nd Mortgage \$ _____

Was this property purchased or owned by you prior to the date of marriage? Yes No

Does anyone other than your spouse/partner have an interest in this property? Yes No

OTHER ASSETS

VEHICLES

Cars, trucks, motorcycles, boats/trailers and recreational vehicles

| <u>Year</u> | <u>Make & Model</u> | <u>Purchase Date</u> | <u>Primarily Used by Whom?</u> |
|-------------|-------------------------|----------------------|--------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

BANK ACCOUNTS

| <u>Bank Name</u> | <u>Account Number</u> | <u>Account Type</u> | <u>Est. Current Balance</u> |
|------------------|-----------------------|---------------------|-----------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

RETIREMENT ACCOUNTS

List all 401(k)s, IRAs, Pensions, etc.

| <u>Account Type</u> | <u>Identifying Information</u> <i>e.g., account name, plan administrator</i> | <u>Estimated Current Balance</u> <i>Where applicable</i> |
|---------------------|---|---|
| | | |
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