

LAW OFFICE OF DOMINGUEZ & ASSOCIATES, P.A.
ATTORNEYS AT LAW

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DIVORCE INTAKE FORM

Please complete this questionnaire and return it to the office. If you will spend the time to complete all items, you will give us the necessary background information to begin to understand the complexity of the personal aspects of your marriage. All information will be held in strict confidence.

1. Please give us your full name, date and place of birth, and social security number.
 - a. Name: _____
 - b. Date of birth: _____
 - c. Place of birth: _____
 - d. Social security number: _____
 - e. Highest degree of education: _____
Portion completed before marriage: _____

2. Where are you now living and what is your telephone number?
 - a. Street address: _____
 - b. City, state, and zip code: _____
 - c. Home telephone number: _____
 - d. How long have you lived in Florida? _____
 - e. Other residences during the last five years: _____

3. If you are not now living with your spouse, give an approximate date of separation: ____
Have there been prior separations? ____ How many? _____
Approximately when and for how long? _____

4. Please give the date and place of your marriage.
Date: _____ Place: _____

5. Please complete the following concerning your employment and income.
- a. Employer: _____
 - b. Street address: _____
 - c. City, state, and zip code: _____
 - d. Telephone number: _____
 - e. Job title: _____
 - f. Gross salary: \$ _____
 - g. Other sources of income (describe): _____
 - h. Average monthly income from all sources: \$ _____
6. Please provide the following information about your spouse.
- a. Name: _____
 - b. Date of birth: _____
 - c. Place of birth: _____
 - d. Social security number: _____
 - e. Highest degree of education: _____
Portion completed before marriage: _____
7. Where is your spouse now living?
- a. Street address: _____
 - b. City, state, and zip code: _____
 - c. Home telephone number: _____
 - d. How long has your spouse resided in Florida? _____
8. Please complete the following regarding your spouse's employment.
- a. Employer: _____
 - b. Street address: _____
 - c. City, state, and zip code: _____
 - d. Telephone number: _____
 - e. Job title: _____
 - f. Gross salary: \$ _____
 - g. Other sources of income (describe): _____

h. Average monthly income from all sources: \$ _____

9. Have there been prior court proceedings between you and your spouse? _____ If so, please provide copies of all related documents. Who was your previous attorney?

10. Are there any children? _____ If so, please provide the following information. If a child is adopted, please indicate. If a child is from a previous marriage, please indicate.

Name	Sex	Date and place of birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. Where are the children living at this time? _____

List all of the addresses for the children during the last five years. If any child lived with anyone other than you and your spouse, give the name and address of the custodian and the dates the child resided with that person.

Child	Custodian/Address	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

12. List all property, if any, owned by the children. _____

13. How long have you and your spouse been having marital difficulties? _____

Has there been domestic violence? _____

If so, date of most recent incident. _____

Were the police called? _____ Did either spouse receive medical attention? _____

Names, addresses, and phone numbers of any witnesses to incidents of domestic violence.

14. Have you and your spouse tried counseling? _____
If so, with whom and for how long? _____

15. Do you want counseling for yourself? _____ Your spouse? _____
Both you and your spouse? _____ Your children? _____

16. Do you see divorce as the only solution? _____

17. Is your spouse in favor of this divorce? _____

18. Do you want a reconciliation? _____

19. Do you want a maiden or prior name to be restored? _____
If yes, please give the name. _____

20. What is the condition of your mental and physical health? _____

21. Indicate your priorities on the following issues by assigning numbers, with one being the highest priority:

_____ Visitation	_____ Child custody
_____ Child support	_____ Property distribution
_____ Alimony	_____ Attorneys' fees
_____ Restraining abusive spouse	
_____ Other (specify):	_____

22. While married, have you ever lived in Nevada, New Mexico, Arizona, Washington, Louisiana, Texas, Idaho, Wisconsin, or California? _____ If so, circle the appropriate state(s).

23. List all real estate owned, indicating ownership and approximate value:

Street Address	Value	Ownership: Husband/Wife/Joint
_____	_____	_____
_____	_____	_____

24. List all present bank, savings, money market, and credit union accounts:

Bank	Account No.	Balance	Husband/Wife/Joint
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

25. Describe any special contributions you feel you have made to your spouse's career, education, or assets. _____

26. Were you referred to our office by someone? _____ If so, please indicate the name of the referring party. _____

27. Fill out the attached financial affidavit, using your current financial situation. This will be used at your temporary support hearing. _____

28. Attach a copy of your current driver's license. _____

29. Identify any matters you believe require emergency or immediate attention.

I represent that the aforementioned information is true and correct to the best of my knowledge.

Electronic Signature: Typing your name(s) below will have the same effect as your signature.

Print name: _____ Date: _____

Signature: _____ Date: _____

Please email the completed form to cesar@dominguezassociateslaw.com