## MARITAL INFORMATION SHEET

LOCATION OF APPPO	OINTMENT: □	Peoria 🗆 Mort	ton $\square$ Telephone $\square$ C	Other <b>DATE</b> :			
How did you hear al  ☐ Radio ☐ Printed Ad ☐ Referral from an attorne ☐ Google Search ☐ I am	□ Facebook □ y:		☐ Referral from a frie	nd			
CLIENT							
Name - First	Middle	Middle Last			(Maiden)		
Address - Street	County	<del></del>	City	State	Zip		
Date of Birth	State of Birth	Age	Social Security No	Driver'	s License No.		
			<del>T</del>	ength of Resid	ence in Illinois		
Years of Schooling	Degrees, Certifi	icates, etc.	L				
_							
Number of Previous Mar	riages How Eac		orce, death, etc.)				
Years of Schooling  Number of Previous Mar  Client Phone Numbers:  Client Email:	riages How Eac	ch Ended (divo		Cell			
Number of Previous Mar Client Phone Numbers:	riages How Eac	ch Ended (divo	orce, death, etc.)	Cell	d By:		
Number of Previous Mar Client Phone Numbers: Client Email:	riages How Eac	ch Ended (divo	Work	Cell	d By:		
Number of Previous Mar Client Phone Numbers: Client Email: SPOUSE	riages How Eac	Ch Ended (divo	Work	Cell	> _		
Number of Previous Mar Client Phone Numbers:	Home (For C	Ch Ended (divo	Work  Ly): Full Conflict Ch	Cell eck Complete	> _		
Number of Previous Mar Client Phone Numbers: Client Email: SPOUSE Name - First	How Each	Ch Ended (divo	Work  ly): Full Conflict Ch	Cell    Cell     (Maiden     State			
Number of Previous Mar Client Phone Numbers: Client Email: SPOUSE Name - First Address - Street	Home  (For C	Office Use On	Work  Ly): Full Conflict Ch	Cell  (Maiden  State  Drive	Zip		

Date of this Marriage Place (Ci	ty) (County)	(State) Date of Separation
Number of Living Children N	Tumber of Living Children Under Age	Desire to Resume Maiden Name
CHILDREN		
FULL NAME	DATE OF BIRTH	AGE SOCIAL SECURITY NO.
1.		
2.		
3.		
4.		
5.		
Any Adoptions?	Is Wife Exp	pecting?
EMPLOYMENT INFORMAT	TION	
Employer	Address	
Position	Length of Employment	1
Gross Earnings per Pay Period	Net Earnings per Pay Period	Frequency of pay period
Bonuses, Profit Sharing, etc.		Frequency of Award
SPOUSE'S EMPLOYMENT I	NFORMATION	
F 1	A 11	
Employer	Address	
Position	Length of Employment	
Gross Earnings per Pay Period	Net Earnings per Pay Period	Frequency of pay period
Bonuses, Profit Sharing, etc.		Frequency of Award

## **ASSETS**

REAL ESTATE:		roximate				ın Held	Whose Name
Address	Valı	ıe	on M	Iortgage	Wh	ere?	on Title?
1.							
2							
2							
VEHICLES: Appro	vimata	Ralance	Due	Loan He	14	Who	Whose Name
	XIIIIate	on Loan		Where?			
1						_	
2							
2.						_	
3				_		_	
4							
				_			
BANK ACCOUNTS:		What				Currently	Whose Name
Type (checking, savings, CDs, etc.)		Bank?		In A	ccou	ınt	on Account?
1							
2							
					1		
3.							
4							
STOCKS or BROKERAGE ACCO	IINTC.						
Name of Brokerage or Stock	UN13.	Shares	Held	Ap	proxi	mate Value	In Whose Name?
-							
1							
2							
3							
4							
BUSINESS OWNERSHIP OF CLO	SELY F	HELD CO	RPO	RATION	INTI	ERESTS:	
1							
2							

PENSIONS: Name of Employer	Present Value	Defined E	Benefit or Contribution	In Whose Name?	
1					
2.					
3.					
EMPLOYMENT RELATE					In Whose
Name of Employer					Name?
1		_			
2.					
3					
INDIVIDUAL RETIREME					In Whose
Where located		Type			Name?
1					
2					
3					
INSURANCE: Prov	rider Name		Address		
Homeowners:					
Health/Hospitalization:					
Life - Wife:					
Life - Husband:					
MARITAL DEBTS AND O					
Creditor's Name	Prese	ent Balance	Monthly Pay	ment	In Whose Name?
1					
2					
3					
4					
5.					

NON-MARITAL DEBTS AND OBLIGAT	ΓIONS:		
Creditor's Name	Present Balance	Monthly Payment	In Whose Name?
1			
2.			
3.			
5			
NON-MARITAL PROPERTY:			
Description		Owner	Value
1.			
2.			
3			
DEL ATER OURCEIONG			
RELATED QUESTIONS:			
A. Are you currently receiving or paying chi	ld support?	-	
If Yes, to or From Whom?		Amount	Frequency
1			
2			_
B. Are you currently receiving or paying ma	intenance?	_	
If Was to as France Whom?			E.,
If Yes, to or From Whom?  1		Amount	Frequency
2			
C. What is the state of your health?			
D. Williadia dia atau C			
D. What is the state of your spouse's health?_			
E. What is your preference for custody:	Wife	Husband	Joint