(DOMESTIC) PROFILE AND CASE INFORMATION SHEET CLIENT NAME: LAST FIRST MIDDLE ADVERSE PARTY:____ LAST FIRST MIDDLE DATE OF FIRST CONTACT: DATE OPENED: CASE TYPE: (Circle All That Apply) **DIV** (Divorce); **SEP** (Separation); **DVI** (Dom. Violence); **ADO** (Adoption); **CS** (Child Support); CUS (Custody); **VIS** (Visitation); **CON** (Consult) CLASS TYPE: CNT (Contested); UNC (Uncontested); PST (Post Judgment); RJT (Rejected) CLIENT FILE NO.:_____ REFERRED BY: **SYNOPSIS** ____(2) _____ ASSIGNED TO: (1) _____ ___ (3)___ (PROCESSING (CASE MANAGER) (SECRETARY) (PARALEGAL) ATTORNEY) DATES: HEARING DATE (PRETRIAL CONFERENCE)______ TRIAL DATE _____ **FEE**: HOURLY RATE: RETAINER AMOUNT:_____ FEE AGREEMENT SIGNED:_____ **COUNSEL INFORMATION:** 1) (ATTY) 2) (TELEPHONE NO.)(FAX NO.) (OPPOSING COUNSEL) (ADDRESS)

(TELEPHONE NO.)(FAX NO.)

(TELEPHONE NO.)(FAX

3)

4)

(OTHER COUNSEL)

(OTHER COUNSEL) (ADDRESS)

(ADDRESS)

FAMILY INFORMATION WORKSHEET

A. Client

Type of Case	Date of first meeting			
Full name	Maiden name (if applicable)			
Address			(OK?)
County				
Mailing Address (if different from above)				
Telephone No. (Home)	(OK?)	(Work)	(OK?)_	
(Fax)		_(Pager/Beeper)		
(Cell)		_ (E-mail)		
Social Security No		Date of Birth		
Prior Residence	Length of Continuous Residence in Maryland			
Place of Birth		_Length of residence	(Current)	
Nationality:	Hispai	nic/Latino		
Educational Background - HS		College	Graduate Degree	
Military Service				
Criminal Record				
Name of Employer				
Address of Employer				
Job Title				
Length of Employment (when start)				
Pay Period (weekly, every two weeks, etc.) _				
Description of Employment Duties				
Work Days and Hours:				

Number of Exemptions Cl	aimed Number of I	Number of Exemptions Entitled To		
Gross Pay	Net Pay	Bonuses		
Deductions:				
Federal	FICA	State		
Retirement	Other			
Other sources of income,	whether taxable or non-taxable:			
Source	Period	Gross	Net	
Source	Period	Gross	Net	
Source	Period	Gross	Net	
Personal Gross Income for	r 2014			
Personal Gross Income for	r 2013			
Personal Gross Income for	r 2012			
Personal Gross Income for	r 2011			
Personal Gross Income for	r 2010			
Present Marriage:				
Date	Place (Town, County, State)	Type (I	Religious/Civil)	
Previous Marriage:				
Name	Date Ended		_ How	
Name	Date Ended		_ How	
Other Support Responsibil	lities (Other children - not of this marri	age/relationship)		
Name	Relationship	Birth	Nature	
Name	Relationship	Birth	Nature	

B. Spouse/Former Spouse (Adverse Party)

Full name	Maiden name (if applicable)		
Address			_
	Length of Residence		
Telephone No. (Home)	(Work)		
(Fax)	(Cell Phone)		
(Email)			
Social Security No	Date of Birth		
Prior Residence	Length of Continuous Resider	nce in Maryland	
Place of Birth			
Nationality:	Hispanic/Latino		_
Educational Background - HS	College	Graduate Degree	
Military Service			_
Criminal Record			_
Name of Employer			_
Address of Employer			_
Job Title			
Length of Employment (when start)			
Pay Period (weekly, every two weeks, etc	c.)		
Description of Employment Duties			
Work days and hours:			

umber of Exemptions Claimed Number of Exemptions Entitled To			
Gross Pay	Net Pay	Bonuses	
Deductions:			
Federal	FICA	State	
Retirement	Other		
Other sources of income, whether	er taxable or non-taxable:		
Source	Period	Gross	Net
Source	Period	Gross	Net
Source	Period	Gross	Net
Personal Gross Income for 2014	<u>. </u>		
Personal Gross Income for 2013	B		
Personal Gross Income for 2012	<u> </u>		
Personal Gross Income for 2011			
Personal Gross Income for 2010)		
Present Marriage:			
Date P	lace (Town, County, State)	Type (Rel	igious/Civil)
Previous Marriage:			
Name	Date Ended	How .	
Name	Date Ended	How	
Other Support Responsibilities (Other children - not of this marr	iage/relationship)	
Name	Relationship	Birth	Nature
Name	Relationship	Birth	Nature

C. <u>Children</u>

Children of the Marriage/Relationship:

Name			
	Birth	Health	Education
	Current School		Grade
	Day Care Location:		Cost
Name			
	Birth	Health	Education
	Current School		Grade
	Day Care Location:		Cost
Name			
	Birth	Health	Education
	Current School		Grade
	Day Care Location:		Cost
Name			
			Education
	Current School		Grade
	Day Care Location:		Cost
Currer	nt Pregnancy	Expe	cted Date of Birth
Childr	en's Residence (Current Cus	tody/Visitation – attach schedul	le if needed)
Prior S	Schools Attended		
Notes	(prior custody schedule, pare	enting schedule, etc)	

D. <u>Facts</u>

Other Attorney	Pre-Nup/Date	
Written Separation Agreement	Date	
Verbal Separation Agreement	Date	
Provisions (Provide copy if exists)		
Factual Background Causing Separation		

Grounds and alternatives		
Date of last sexual intercourse with spouse		
Date of Separation – last date last spent with spouse under same roof, had sexual relations, etc.		
Explain:		
Miscellaneous comments_		
Jurisdiction		
Venue		