

POST DECREE FACT SHEET

DATE OF INTERVIEW: _____

CLIENT'S INFORMATION:

Name: _____

S.S. #: _____ Driver's License # _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: **Home:** (____) _____ **Work:** (____) _____

Cell: (____) _____ **Fax:** (____) _____

E-Mail: _____

Referred By: _____

Birth Date: _____ Age: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Gross Salary: _____ Previous Year's Total Gross Income: _____

Bonus / Commission / Overtime: _____

Profit / Pension Plan(s) (list names & balance(s)): _____

Other Sources of Income: _____

ADVERSE PARTY INFORMATION:

Name: _____

S.S. #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____

Birth Date: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Gross Salary: _____ Previous Year's Total Gross Income: _____

Bonus / Commission / Overtime: _____

Profit / Pension Plan(s) (list names & balance(s)): _____

Other Sources of Income: _____

CHILDREN:

Name **Age** **Birth Date** **In the Custody of**

REAL ESTATE:

Address: _____

Occupied By: _____

Purchase Price: _____ Date of Purchase: _____

Fair Market Value: _____ Mortgage Balance: _____

Monthly Payments: _____ Name of Bank: _____

AUTOMOBILES:

Make: _____ Year: _____ Model: _____

Lienholder: _____

Balance Owed: _____ Monthly Payment: _____

BANK ACCOUNTS:

Name of Bank: _____

Address: _____ Type of Account: _____

Balance: _____ Source: _____

Name(s) on account: _____

OTHER ASSETS / PENDING LAWSUITS: _____
