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**DIVORCE INTAKE FORM**

Date: \_\_\_\_\_

Please complete this questionnaire as completely and accurately as you can. Where appropriate, provide documents, receipts and other supporting information separately. **All information that you provide will be held in strict confidence.**

**If you do not know an answer please write a question mark (?), if an answer does not apply to your case please write N/A. Please do not leave answers blank. Please write neatly.**

1. Personal Information:

- a. Name: \_\_\_\_\_
- b. Date of Birth: \_\_\_\_\_
- c. Place of Birth: \_\_\_\_\_
- d. Social Security Number: \_\_\_\_\_
- e. Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_
- f. Email address(es): \_\_\_\_\_
- g. May we communicate with you via email? (Please be sure that your email is secure and protected from your spouse): \_\_\_\_\_
- h. How do you prefer that we communicate with you? \_\_\_\_\_

2. Where are you living now?

- a. Address: \_\_\_\_\_
- b. City, State, Zip: \_\_\_\_\_
- c. May we send mail to you at this address? (Please be sure that your mail is secure and protected from your spouse): \_\_\_\_\_

3. What are your telephone numbers?

- a. Home: (     )     -

- b. Cell: (     )     -
- c. Work: (     )     -     ext
- d. Which number do you prefer that we contact you?

\_\_\_\_\_

**IMPORTANT:** How can we contact you at all times? (Relative or friend who can always contact you):

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

4. Please give the date and place of your marriage.

a. Date: \_\_\_\_\_

b. City, State: \_\_\_\_\_

c. Were you married in a religious or civil ceremony? \_\_\_\_\_

5. Please complete the following concerning your employment.

a. Name of Employer: \_\_\_\_\_

b. Length of Employment: \_\_\_\_\_

c. Job Title: \_\_\_\_\_

d. Street Address: \_\_\_\_\_

e. City, State & Zip: \_\_\_\_\_

f. Telephone Number: \_\_\_\_\_

g. Gross salary (monthly/annually): \$ \_\_\_\_\_/per \_\_\_\_\_

**IMPORTANT:** Please provide your last 3 paystubs, most recent W-2 and tax return.

6. Describe your education (schools attended, dates attended, degrees obtained):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Please give your spouse's 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. Driver's License Number: \_\_\_\_\_ State \_\_\_\_\_

8. Where is your spouse presently living and what is your spouse's telephone number?

- a. Address: \_\_\_\_\_
- b. City, State & Zip: \_\_\_\_\_
- c. Residence telephone number: \_\_\_\_\_

9. Complete the following concerning your spouse's employment.

- a. Name of Employer: \_\_\_\_\_
- b. Job Title: \_\_\_\_\_
- c. Street Address: \_\_\_\_\_
- d. City, State & Zip: \_\_\_\_\_
- e. Telephone number: \_\_\_\_\_
- f. Spouse's gross salary (monthly/annually): \$ \_\_\_\_\_ per \_\_\_\_\_
- g. Length of spouse's employment: \_\_\_\_\_

10. Describe your spouse's education (schools attended, dates attended, degrees obtained):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Are you and your spouse currently separated? \_\_\_\_\_

A. If yes, when did you separate? \_\_\_\_\_

B. If yes, briefly state why you separated:

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12. Please give the full name, date and place of birth, sex, Social Security Number, and **current** address of each child of this marriage. State with whom the child is currently living AND why the child is living with that person.

a. NAME: \_\_\_\_\_  
SEX: \_\_\_\_\_  
BIRTHDATE: \_\_\_\_\_  
BIRTHPLACE: \_\_\_\_\_  
SOCIAL SECURITY NUMBER: \_\_\_\_\_  
CURRENT ADDRESS: \_\_\_\_\_  
WITH WHOM IS THE CHILD CURRENTLY LIVING:

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b. NAME: \_\_\_\_\_  
SEX: \_\_\_\_\_  
BIRTHDATE: \_\_\_\_\_  
BIRTHPLACE: \_\_\_\_\_  
SOCIAL SECURITY NUMBER: \_\_\_\_\_  
CURRENT ADDRESS: \_\_\_\_\_  
WITH WHOM IS THE CHILD CURRENTLY LIVING:

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c. NAME: \_\_\_\_\_  
SEX: \_\_\_\_\_  
BIRTHDATE: \_\_\_\_\_  
BIRTHPLACE: \_\_\_\_\_  
SOCIAL SECURITY NUMBER: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

WITH WHOM IS THE CHILD CURRENTLY LIVING:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

d. NAME: \_\_\_\_\_

SEX: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_

BIRTHPLACE: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

WITH WHOM IS THE CHILD CURRENTLY LIVING:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do the children currently have health insurance? \_\_\_\_\_

A. If yes, who is paying for it? \_\_\_\_\_

13. Who is currently living in the family home? \_\_\_\_\_

Who is currently paying for the house? \_\_\_\_\_

Who would you prefer to live in the home and pay for it?

\_\_\_\_\_

14. Have you or your spouse seen any marriage counselors? \_\_\_\_\_

If so, give name, address and telephone number:

\_\_\_\_\_  
\_\_\_\_\_

15. What is your religious preference? \_\_\_\_\_

What is your spouse's religious preference? \_\_\_\_\_

What is the religious preference for the children? \_\_\_\_\_

16. Check as appropriate if your marital difficulties involve any of the following:

- Drugs/Alcohol [ ]
- Physical violence [ ]
- Sexual dysfunction [ ]
- Religion [ ]
- Sexual infidelity [ ]
- Financial disputes [ ]
- Other:

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17. Will there be a dispute over custody of the children? \_\_\_\_\_
- a. If not, who will have primary custody? \_\_\_\_\_
  - b. Should there be a geographical restriction on where the children will live?  
If so, please state the geographical area that the children's residence  
should be restricted to:

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18. List any property (other than furniture, clothing and toys) owned by the children.

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19. Have you or your spouse ever filed for a divorce? \_\_\_\_\_ If so, when and where?

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20. Does your spouse have an attorney? \_\_\_\_\_ If so, name and telephone number?

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21. Have you been married before? \_\_\_\_\_  
If so, how many times? \_\_\_\_\_

22. Do you have children from a previous marriage/relationship? \_\_\_\_\_  
If so, give full name, date and place of birth, sex, and current address of each child of your previous marriages/relationships.

a. NAME: \_\_\_\_\_  
SEX: \_\_\_\_\_  
BIRTHDATE: \_\_\_\_\_  
BIRTHPLACE: \_\_\_\_\_  
SOCIAL SECURITY NUMBER: \_\_\_\_\_  
Current Address \_\_\_\_\_

b. NAME: \_\_\_\_\_  
SEX: \_\_\_\_\_  
BIRTHDATE: \_\_\_\_\_  
BIRTHPLACE: \_\_\_\_\_  
SOCIAL SECURITY NUMBER: \_\_\_\_\_  
Current Address \_\_\_\_\_

c. NAME: \_\_\_\_\_  
SEX: \_\_\_\_\_  
BIRTHDATE: \_\_\_\_\_  
BIRTHPLACE: \_\_\_\_\_  
SOCIAL SECURITY NUMBER: \_\_\_\_\_  
Current Address \_\_\_\_\_

With whom do these children reside: \_\_\_\_\_

23. Do you pay/receive child support? \_\_\_\_\_

If so, how many much? \_\_\_\_\_

Do the children currently have health insurance? \_\_\_\_\_

A. If yes, who is paying for it? \_\_\_\_\_

24. Does your spouse have children from a previous marriage/relationship? \_\_\_\_\_

If so, give full name, date and place of birth, sex, and current address of each child of spouse's previous marriages/relationships.

a. NAME: \_\_\_\_\_  
SEX: \_\_\_\_\_  
BIRTHDATE: \_\_\_\_\_  
BIRTHPLACE: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

Current Address \_\_\_\_\_

b. NAME: \_\_\_\_\_

SEX: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_

BIRTHPLACE: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

Current Address \_\_\_\_\_

25. Does your spouse pay/receive child support? \_\_\_\_\_

If so, how much? \$ \_\_\_\_\_ per \_\_\_\_\_

Do the children currently have health insurance? \_\_\_\_\_

A. If yes, who is paying for it? \_\_\_\_\_

26. If a divorce is granted, should the wife's maiden or prior name be restored? \_\_\_\_\_

If so, what is the exact name to be used?

\_\_\_\_\_

**SUMMARY OF PROPERTY (Please provide any deeds, titles, appraisals, statements of account or other documents in your possession regarding your property)**

\*\*Note: a more detailed description of your property must be provided in a Sworn Inventory.

Real Estate (Home that you own)

1. Address: \_\_\_\_\_

Mortgage Company: \_\_\_\_\_

Estimated fair market value: \$ \_\_\_\_\_

Date purchased: \_\_\_\_\_

Current mortgage balance: \$ \_\_\_\_\_

Monthly payments: \$ \_\_\_\_\_

Legal description of the property:

\_\_\_\_\_

\_\_\_\_\_

2. Address: \_\_\_\_\_

Mortgage Company: \_\_\_\_\_



Estimated fair market value: \$ \_\_\_\_\_

Date purchased: \_\_\_\_\_

Current mortgage balance: \$ \_\_\_\_\_

Monthly payments: \$ \_\_\_\_\_

Legal description of the property:

\_\_\_\_\_  
\_\_\_\_\_

3. Address: \_\_\_\_\_

Mortgage Company: \_\_\_\_\_

Estimated fair market value: \$ \_\_\_\_\_

Date purchased: \_\_\_\_\_

Current mortgage balance: \$ \_\_\_\_\_

Monthly payments: \$ \_\_\_\_\_

Legal description of the property:

\_\_\_\_\_  
\_\_\_\_\_

\*\*Attach additional sheets, if necessary.

Motor Vehicles, Boats, Airplanes, Cycles, Trailers:

1. Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Who drives? \_\_\_\_\_ Vehicle Identification Number: \_\_\_\_\_

Mortgage with: \_\_\_\_\_ Account Number: \_\_\_\_\_

Amount owed: \$ \_\_\_\_\_ Payment amount: \$ \_\_\_\_\_

Present marked value: \$ \_\_\_\_\_ How determined? \_\_\_\_\_

2. Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Who drives? \_\_\_\_\_ Vehicle Identification Number: \_\_\_\_\_

Mortgage with: \_\_\_\_\_ Account Number: \_\_\_\_\_

Amount owed: \$ \_\_\_\_\_ Payment amount: \$ \_\_\_\_\_

Present marked value: \$ \_\_\_\_\_ How determined? \_\_\_\_\_

3. Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Who drives? \_\_\_\_\_ Vehicle Identification Number: \_\_\_\_\_

Mortgage with: \_\_\_\_\_ Account Number: \_\_\_\_\_

Amount owed: \$ \_\_\_\_\_ Payment amount: \$ \_\_\_\_\_

Present marked value: \$ \_\_\_\_\_ How determined? \_\_\_\_\_

4. Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Who drives? \_\_\_\_\_ Vehicle Identification Number: \_\_\_\_\_

Mortgage with: \_\_\_\_\_ Account Number: \_\_\_\_\_

Amount owed: \$ \_\_\_\_\_ Payment amount: \$ \_\_\_\_\_

Present marked value: \$ \_\_\_\_\_ How determined? \_\_\_\_\_

Bank Accounts, Savings Accounts, C.D.'s, Credit Union, Savings Bonds:

1. Name of Institution: \_\_\_\_\_

Type of account (checking, savings, etc.): \_\_\_\_\_

Account Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Amount currently in account: \$ \_\_\_\_\_

Names on account: \_\_\_\_\_

2. Name of Institution: \_\_\_\_\_

Type of account (checking, savings, etc.): \_\_\_\_\_

Account Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Amount currently in account: \$ \_\_\_\_\_

Names on account: \_\_\_\_\_

3. Name of Institution: \_\_\_\_\_

Type of account (checking, savings, etc.): \_\_\_\_\_

Account Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Amount currently in account: \$ \_\_\_\_\_

Names on account: \_\_\_\_\_

4. Name of Institution: \_\_\_\_\_

Type of account (checking, savings, etc.): \_\_\_\_\_

Account Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Amount currently in account: \$ \_\_\_\_\_

Names on account: \_\_\_\_\_

5. Name of Institution: \_\_\_\_\_

Type of account (checking, savings, etc.): \_\_\_\_\_

Account Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

Amount currently in account: \$ \_\_\_\_\_

Names on account: \_\_\_\_\_

Life Insurance:

1. Name of company: \_\_\_\_\_

Insuring Life of: \_\_\_\_\_

Type of policy (term, whole life, etc.): \_\_\_\_\_ Cash value: \$ \_\_\_\_\_

2. Name of company: \_\_\_\_\_

Insuring Life of: \_\_\_\_\_

Type of policy (term, whole life, etc.): \_\_\_\_\_ Cash value: \$ \_\_\_\_\_

3. Name of company: \_\_\_\_\_

Insuring Life of: \_\_\_\_\_

Type of policy (term, whole life, etc.): \_\_\_\_\_ Cash value: \$ \_\_\_\_\_

Stocks, Mutual Funds, Bonds, Securities:

1. Name of Investment: \_\_\_\_\_

Number of shares owned: \_\_\_\_\_ Present value: \$ \_\_\_\_\_

2. Name of Investment: \_\_\_\_\_

Number of shares owned: \_\_\_\_\_ Present value: \$ \_\_\_\_\_

3. Name of Investment: \_\_\_\_\_

Number of shares owned: \_\_\_\_\_ Present value: \$ \_\_\_\_\_

4. Name of Investment: \_\_\_\_\_

Number of shares owned: \_\_\_\_\_ Present value: \$ \_\_\_\_\_

5. Name of Investment: \_\_\_\_\_  
Number of shares owned: \_\_\_\_\_ Present value: \$ \_\_\_\_\_

\*\*Attach additional sheets, if necessary

Retirement, Pensions, Other Company Benefits:

1. Do you participate in any retirement plan? \_\_\_\_\_  
Name of the plan: \_\_\_\_\_  
Address of plan: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Beneficiary: \_\_\_\_\_  
Current value of retirement account: \$ \_\_\_\_\_  
Is any portion of the plan your separate property? \_\_\_\_\_ Date plan started: \_\_\_\_\_
  
2. Does your spouse participate in any retirement plan? \_\_\_\_\_  
Name of the plan: \_\_\_\_\_  
Address of plan: \_\_\_\_\_  
Account Number: \_\_\_\_\_ Beneficiary: \_\_\_\_\_  
Current value of retirement account: \$ \_\_\_\_\_  
Is any portion of the plan your separate property? \_\_\_\_\_ Date plan started: \_\_\_\_\_

Other

1. Does anyone owe you or your spouse any money? \_\_\_\_\_  
If so, how much \$ \_\_\_\_\_  
Owed by whom? \_\_\_\_\_
2. Are you or your spouse involved in any lawsuits? \_\_\_\_\_  
If so, describe: \_\_\_\_\_
3. Do you own any livestock or mineral interests? \_\_\_\_\_  
If so, describe: \_\_\_\_\_
4. Do you belong to any clubs with an equity interest? \_\_\_\_\_  
If so, describe: \_\_\_\_\_

Debts: (Other than house and/or automobiles. For example, credit card debt or personal loans)

1. Name of creditor: \_\_\_\_\_  
Account No. \_\_\_\_\_ Amount owed: \$ \_\_\_\_\_ Min payment: \$ \_\_\_\_\_

2. Name of creditor: \_\_\_\_\_  
 Account No. \_\_\_\_\_ Amount owed: \$ \_\_\_\_\_ Min payment: \$ \_\_\_\_\_
3. Name of creditor: \_\_\_\_\_  
 Account No. \_\_\_\_\_ Amount owed: \$ \_\_\_\_\_ Min payment: \$ \_\_\_\_\_
4. Name of creditor: \_\_\_\_\_  
 Account No. \_\_\_\_\_ Amount owed: \$ \_\_\_\_\_ Min payment: \$ \_\_\_\_\_

Income Tax:

Have you filed for all previous years? \_\_\_\_\_ Joint or separate? \_\_\_\_\_  
 Prepared by whom? \_\_\_\_\_  
 Refund received/expected? \_\_\_\_\_ If so, how much? \$ \_\_\_\_\_

Separate Property:

Do you own any separate property (owned before marriage or received during marriage by gift or inheritance)? If so, detail your separate property:

1. Description: \_\_\_\_\_  
 How acquired? \_\_\_\_\_ Date acquired? \_\_\_\_\_
2. Description: \_\_\_\_\_  
 How acquired? \_\_\_\_\_ Date acquired? \_\_\_\_\_
3. Description: \_\_\_\_\_  
 How acquired? \_\_\_\_\_ Date acquired? \_\_\_\_\_

Does your spouse own any separate property? If so, detail the separate property:

1. Description: \_\_\_\_\_  
 How acquired? \_\_\_\_\_ Date acquired? \_\_\_\_\_
2. Description: \_\_\_\_\_  
 How acquired? \_\_\_\_\_ Date acquired? \_\_\_\_\_
3. Description: \_\_\_\_\_  
 How acquired? \_\_\_\_\_ Date acquired? \_\_\_\_\_

\*\*Attach additional sheets, if necessary

