

Atkins Law Firm, P.A.
Intake Form

Date: _____

Client Information	Spouse Information
<p>_____ Full Legal Name</p> <p>_____ Your Physical Address</p> <p>_____ Physical Address: City, State Zip Code</p> <p>_____ Mailing Address [] Same as Physical</p> <p>_____ Mailing Address: City, State Zip Code</p> <p>_____ Home Telephone Number</p> <p>_____ Mobile Telephone Number</p> <p>_____ Work Telephone Number</p> <p>_____ E-mail Address</p> <p>Okay to Contact via E-mail: [] Yes [] No</p> <p>_____ Employer/Occupation</p>	<p>_____ Spouse's Full Legal Name</p> <p>_____ Your Physical Address</p> <p>_____ Physical Address: City, State Zip Code</p> <p>_____ Mailing Address [] Same as Physical</p> <p>_____ Mailing Address: City, State Zip Code</p> <p>Description of Spouse (height, weight, identifying marks, etc.):</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: center;">Children</p> <p>Name/Birth Date: _____</p> <p>Name/Birth Date: _____</p> <p>Name/Birth Date: _____</p>

Marriage Information

Date of Marriage: _____

Date of Separation: _____

County, State of Marriage: _____

County, State Last Resided
as Husband and Wife: _____

How did you hear about us?

<u>Husband</u>	<u>Wife</u>
<p>Date of Birth: _____</p> <p>Soc. Sec. No.: _____</p> <p>State of Birth: _____</p> <p>Ethnicity: _____</p> <p>Number of this Marriage: _____</p>	<p>Date of Birth: _____</p> <p>Soc. Sec. No.: _____</p> <p>State of Birth: _____</p> <p>Ethnicity: _____</p> <p>Number of this Marriage: _____</p> <p>Maiden Name: _____</p>