

SMITH MIHAS, PLLC
Client Interview Form

Date _____

Referred by: _____

Attorney: _____

Retainer: _____

Client

Spouse

Full name _____

Full name _____

Birth date _____

Birth date _____

Age _____

Age _____

Birth place _____

Birth place _____

Address _____

Address _____

City, State _____

City, State _____

Work phone _____

Work phone _____

Home phone _____

Home phone _____

Cell phone _____

Cell phone _____

Pager _____

Pager _____

E-mail address _____

E-mail address _____

Fax _____

Fax _____

Social Security no. _____

Social Security no. _____

Driver's License no. _____

Driver's License no. _____

State _____

State _____

Occupational License no(s). _____

Occupational License no(s). _____

Armed Forces status _____

Armed Forces status _____

Next of kin _____

Next of kin _____

Relation _____

Relation _____

Address _____

Address _____

MARRIAGE

Place _____
City/Village/Twp. County State/Foreign country

Date of marriage _____ Date of separation _____

Lived in Michigan 180 days? _____ County 10 days? _____

No. of previous marriages: yours _____ spouse _____

How terminated: yours _____ spouse _____

Maiden name _____

Name before this marriage _____

Does wife desire name change?

_____ Yes To what? _____

_____ No

Is there a prenuptial or postnuptial agreement?

_____ Yes Please attach a copy of the agreement.

_____ No

Is Wife Pregnant?

_____ Yes When is birth expected?

_____ No

PRIOR LITIGATION

Has either spouse previously filed for divorce, custody, etc., in this county or elsewhere?

_____ Yes Indicate when and where filed, status of case, case number, and name of judge. _____

_____ No

Has there been any previous domestic relations case filed in this county involving you and/or your spouse or any other family member?

_____ Yes Indicate when and where filed, status of case, case number, and name of judge. _____

_____ No

Does anyone else claim custody over children of you or your spouse?

_____ Yes Indicate when and where filed, status of case, case number, and name of judge. _____

_____ No

Is there an order/judgment for continuing jurisdiction over children of you or your spouse for any other reason?

_____ Yes Indicate when and where filed, status of case, case number, and name of judge. _____

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_____ No

Is there presently on file a case where one of the parties is currently paying support for another child not of this marriage?

_____ Yes Indicate when and where filed, status of case, case number, and name of judge. _____

_____ No

FAMILY HEALTH AND SOCIAL ISSUES

Do you, your spouse, or your children have

- any serious physical or mental disability, disorder, handicap or incurable disease?

_____ Yes Please explain. _____

_____ No

- any problems with substance abuse (drugs, alcohol)?

_____ Yes What type of drugs? _____

What treatment and by whom? _____

When? _____

Place of treatment _____

_____ No

Any particular interest in another person by either party

_____ Any problems with debts _____ Gambling _____

_____ Any marriage counseling _____

_____ Personal counseling (yours/spouse's) _____

_____ Would you begin or continue counseling? _____

_____ Would you sign a waiver of confidentiality so that we may have access to your records?

_____ Yes _____ No

_____ Attitudes (yours/spouse's) toward reconciliation _____

Are you or your spouse receiving ADC?

_____ Yes Caseworker _____ Case no. _____

_____ No

PHYSICAL INJUNCTION INFORMATION

What physical abuse, if any, has occurred and on what dates?

_____ Has either spouse ever been arrested, convicted, imprisoned, or placed on probation?

_____ Y/N Explain.

Physical Description of Client:

Race _____ Height _____ Weight _____ Eye color _____ Hair color _____
Glasses: _____ Y/N Worn all the time? _____ Yes _____ No
Mustache/beard _____ Y/N Color _____
Distinguishing scars or tattoos _____
Any current restraining orders? _____

Physical Description of Spouse:

Race _____ Height _____ Weight _____ Eye color _____ Hair color _____
Glasses: _____ Y/N Worn all the time? _____ Yes _____ NO
Mustache/beard _____ Y/N Color _____
Distinguishing scars or tattoos _____
Any current restraining orders? _____
Is carrying a weapon a condition of his/her employment? _____ Y/N

EMPLOYMENT

<i>Client</i>	<i>Spouse</i>
Employer _____	Employer _____
Address _____	Address _____
_____	_____
Date of hire _____	Date of hire _____
Occupation _____	Occupation _____
Weekly gross pay _____	Weekly gross pay _____
Weekly take home _____	Weekly take home _____

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Pension _____	Pension _____
Early retirement benefits _____	Early retirement benefits _____
Signing bonus or any special payment _____	Signing bonus or any special payment _____
Profit-sharing _____	Profit-sharing _____
Recognition or other awards _____	Recognition or other awards _____
Income last year _____	Income last year _____

Please attach a copy of your last three pay stubs. Indicate if any deductions are mandatory (other than taxes), for example, union dues, pension, etc. Please attach the last two income tax returns (personal and business) with their schedules and W-2 forms.

Previous Employer _____	Previous Employer _____
Address _____	Address _____
_____	_____
Annual Income _____	Annual Income _____

Other income sources (pension, retirement, public assistance or ADC, veterans' benefits, Social Security, annuity funds):

1. Type (wage/dividend) _____
Gross per year _____ In whose name _____
2. Type (wage/dividend) _____
Gross per year _____ In whose name _____
3. Type (wage/dividend) _____
Gross per year _____ In whose name _____

EDUCATION

<i>Client</i>	<i>Spouse</i>
Highest degree obtained _____	Highest degree obtained _____
High school _____	High school _____
Date of diploma or GED _____	Date of diploma or GED _____
Univ./College _____	Univ./College _____
Degree _____	Degree _____
Date obtained _____	Date obtained _____

Univ./College _____ Univ./College _____
Degree _____ Degree _____
Date obtained _____ Date obtained _____

Client Additional Training _____ Souse Additional Training _____

Did either spouse contribute to the education of the other?
____ Yes Describe. _____
____ No

ASSETS
(Attach additional sheets if necessary.)
A. Real property

Resident address _____
Date purchased _____ Purchase price _____
Mortgage co. _____ Account no. _____ In whose name _____
Monthly payments _____ Balance due _____
Paid by _____ Husband _____ Wife _____ Both _____
Land contract _____ In whose name _____
Home equity loan _____ Account no. _____ In whose name _____
Amount of property taxes _____ Are they included in monthly payment? _____

Additional real estate
Address _____

Date purchased _____ Purchase price _____
Mortgage co. _____ Account no. _____ In whose name _____
Monthly payments _____ Balance due _____
Paid by _____ Husband _____ Wife _____ Both _____
Land contract _____ In whose name _____
Home equity loan _____ Account no. _____ In whose name _____
Amount of property taxes _____ Are they included in monthly payment? _____

Attach copies of deeds or land contracts.

B. Vehicles (car, boat, trailer, motorcycle, snowmobile, etc.)

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1. Year/make _____
Vehicle identification number _____
In whose name _____ Possession _____
Purchase price _____ Monthly payments _____
Lien holder _____ Balance due _____
2. Year/make _____
Vehicle identification number _____
In whose name _____ Possession _____
Purchase price _____ Monthly payments _____
Lien holder _____ Balance due _____
3. Year/make _____
Vehicle identification number _____
In whose name _____ Possession _____
Purchase price _____ Monthly payments _____
Lien holder _____ Balance due _____
4. Year/make _____
Vehicle identification number _____
In whose name _____ Possession _____
Purchase price _____ Monthly payments _____
Lien holder _____ Balance due _____
5. Year/make _____
Vehicle identification number _____
In whose name _____ Possession _____
Purchase price _____ Monthly payments _____
Lien holder _____ Balance due _____

C. Bank accounts or credit union accounts

1. Name of bank and branch _____
Account number _____
Type of account (savings, checking, money market) _____
Signatories _____
Source of monies _____ Balance _____
2. Name of bank and branch _____
Account number _____
Type of account (savings, checking, money market) _____
Signatories _____
Source of monies _____ Balance _____
3. Name of bank and branch _____
Account number _____

Type of account (savings, checking, money market) _____
Signatories _____
Source of monies _____ Balance _____

D. Individual retirement accounts

1. Financial institution

Account number _____ Balance _____ In whose name _____

2. Financial institution

Account number _____ Balance _____ In whose name _____

E. Retirement plans, pensions, Keoghs, 401(k) plans, profit-sharing plans, stock bonus or option plans, etc. (attach copies of plan descriptions and annual reports for each)

1. Employer or financial institution

Name and type of plan _____ Vested _____

Value _____ Account no. _____ In whose name _____

2. Employer or financial institution

Name and type of plan _____ Vested _____

Value _____ Account no. _____ In whose name _____

3. Employer or financial institution

Name and type of plan _____ Vested _____

Value _____ Account no. _____ In whose name _____

F. Corporate stocks, bonds, notes, securities, bills, brokerage accounts

1. Name of broker and firm holding investments

Type of investment _____

Account no. _____ In whose name _____

Type of account (savings, checking, money market) _____

Purchase price _____ Current value _____

What was source of stock or funds to purchase? _____

2. Name of broker and firm holding investments

Type of investment _____

Account no. _____ In whose name _____

Type of account (savings, checking, money market) _____

Purchase price _____ Current value _____

What was source of stock or funds to purchase? _____

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G. Patents, inventions, copyrights, etc.

H. Life insurance

<i>Client</i>	<i>Spouse</i>
Name of insurer _____	Name of insurer _____
Name of insured _____	Name of insured _____
Name of beneficiary _____	Name of beneficiary _____
Type of insurance (term, whole life, etc.) _____	Type of insurance (term, whole life, etc.) _____
Policy no. _____	Policy no. _____
Amount of policy _____	Amount of policy _____
Cash surrender value _____	Cash surrender value _____
Loans against policy _____	Loans against policy _____

I. Business interests (corporations, partnerships, sole proprietorships, etc.)

Name and type of business interest _____
Type of ownership interest _____
Value of interest _____ Initial investment and when _____
Additional amounts invested and when _____

J. Community property (property acquired with your spouse)

Have you ever lived in a state that has a community property law (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, or Wisconsin)?

_____ Yes Provide details and the status of assets brought into this state.

_____ No

K. Miscellaneous assets

Jewelry

_____ Value _____

Art work _____
_____ Value _____
Antiques _____
_____ Value _____
Coin and other collections

_____ Value _____
Inheritance

_____ Value _____
Annuities

_____ Value _____
Safe deposit box _____ Location _____
Accounts receivable

L. Gifts

Have you or your spouse made any substantial gifts in the past or placed property in joint names with anyone other than the spouse?

_____ Yes Provide details.

_____ No

M. Trust beneficiaries

Are you or your spouse the beneficiary under any trust?

_____ Yes Provide details.

_____ No

N. Assets held at time of marriage

O. Are you aware of assets being given away, sold, or hidden from you?

_____ Yes Briefly explain.

_____ No

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LIABILITIES

Please indicate with an asterisk any accounts that you have reason to believe are delinquent.

Indebtedness (i.e., credit cards, educational loans, personal loans, etc.)

- 1. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____
Is the account current? ____ Yes ____ No Present balance due _____
Monthly payment _____ Named borrowers _____
Who will pay until the divorce judgment? _____
- 2. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____
Is the account current? ____ Yes ____ No Present balance due _____
Monthly payment _____ Named borrowers _____
Who will pay until the divorce judgment? _____
- 3. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____
Is the account current? ____ Yes ____ No Present balance due _____
Monthly payment _____ Named borrowers _____
Who will pay until the divorce judgment? _____
- 4. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____
Is the account current? ____ Yes ____ No Present balance due _____
Monthly payment _____ Named borrowers _____
Who will pay until the divorce judgment? _____
- 5. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____
Is the account current? ____ Yes ____ No Present balance due _____
Monthly payment _____ Named borrowers _____
Who will pay until the divorce judgment? _____
- 6. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____
Is the account current? ____ Yes ____ No Present balance due _____
Monthly payment _____ Named borrowers _____
Who will pay until the divorce judgment? _____

Delinquent indebtedness

Mortgage _____	How much? _____	How long overdue? _____
Property _____	How much? _____	How long overdue? _____
Income taxes _____	How much? _____	How long overdue? _____
Vehicle Loan _____	How much? _____	How long overdue? _____
Other _____	How much? _____	How long overdue? _____

Business debts

What kind? _____ How much? _____ How long overdue? _____

Other obligations (for example, spousal support to a former spouse)

Is anyone other than the spouse and identified children financially dependent on you?

_____ Yes Give details. _____

_____ No

On your spouse?

_____ Yes Give details. _____

_____ No

RELIEF TO BE REQUESTED

_____ Divorce

_____ Separate maintenance

_____ Annulment

_____ Custody of children _____

_____ Parenting time rights _____

_____ Child support payments _____

_____ Spousal support _____

_____ Spouse to vacate home _____

_____ Contribution to your attorney fees _____

_____ Restoration of former name _____

_____ Procurement of \$ _____ in life insurance to secure child support

_____ Property division

_____ Property injunction

_____ Domestic abuse injunction

_____ Health insurance for children or yourself _____

_____ Home utility payments _____

_____ Home insurance (Plaintiff/Defendant) _____

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Mortgage payments _____
 Debts _____
 Other _____
 Attorney fee arrangement _____

The items checked below are needed to complete your divorce case file. Please collect the items that have been checked and bring in copies or originals to the paralegal as soon as possible.

<i>Items needed</i>	<i>Date given to paralegal</i>
<input type="checkbox"/> Tax returns with schedules and W-2s—last two years	_____
<input type="checkbox"/> Paycheck stubs—last two months	_____
<input type="checkbox"/> You	
<input type="checkbox"/> Your spouse	
<input type="checkbox"/> Mortgage statement	_____
Document showing legal description	
<input type="checkbox"/> Marital home	_____
<input type="checkbox"/> Vacation property	_____
<input type="checkbox"/> Income property	_____
<input type="checkbox"/> Pension or retirement account statement	_____
<input type="checkbox"/> You	
<input type="checkbox"/> Your spouse	
<input type="checkbox"/> Car titles	_____
<input type="checkbox"/> You	
<input type="checkbox"/> Your spouse	
<input type="checkbox"/> Life insurance cash value statement	_____
<input type="checkbox"/> Savings account statements	_____
<input type="checkbox"/> Investment account balance statements	_____
<input type="checkbox"/> Appraisal for _____	_____
<input type="checkbox"/> Appraisal for _____	_____
<input type="checkbox"/> Prenuptial or postnuptial agreement	_____
_____	_____
_____	_____
_____	_____