DOMESTIC CLIENT QUESTIONNAIRE-POTENTIAL CHILD CUSTODY CASE (PLEASE COMPLETE ONLY SECTION 1 OF THIS FORM PRIOR TO YOUR APPOINTMENT WITH MR. DISBROW)

(PLEASE COMPLETE ONLY SECTION I OF THIS FORM PRIOR TO YOUR APPOINTMENT WITH MR. DISBROW)
SECTION I

Today's Date:	Opposing Counsel, if any:				
Your full name(First, middle	, last name)				
Mailing Address:					
	te, zip code)				
Phone Number:	<u> </u>	Work		Cell	
Fax		Email address			
Drivers License # / State: Social Security #:		ty #:	Date of Birth:		
Full Name of Children's I Full Name of Children's I Mailing address of biologi	children: ENCY MATTER due to negle Biological Mother: Cal mother: cal father: Date/s of Birth:				
Biological mother and fat If married, please provide Date of Marriage:					
Date of Separation: Date divorce completed a Is there a current child cu	Divoid nd location (county & state) astody order in effect for the ve question is YES, did you	orce complete?): children?	County / State YES S	e	
	ve question is NO, what cou	anty and state wa	s the order is	sued in?	

SECTION II

Name of all attorneys involved in prior or current court proceeding:
Current matters that need to be addressed in this new proceeding or issues requiring this new court action:
List all addresses where the children have resided and the persons with whom they have resided during the last five (5) years:
Please state your current earnings and the current earnings of the other parent responsible for the children:
Please list other information that might be pertinent to with your case(i.e.: visitation, child support, medical insurance, dental insurance, post-separation support or alimony):