# Lori A. Spearman

Attorney at Law | Family/Collabortive -

420 N. Carroll Avenue, Suite 160 | Southlake, Texas 76092 | O: 817-416-2711 CLIENT INFORMATION www.spearmanlawoffice.com (DIVORCE) / (ANNULMENT)

\* ALL INFORMATION IS NECESSARY. PLEASE READ CAREFULLY AND FILL OUT ALL PAGES COMPLETELY.

TODAY'S DATE:		REFERRED BY:
CLIENT INFORMATION:		SPOUSE INFORMATION:
NAME:		NAME:
RACE OR COLOR:	MANAGEMENT AND THE STATE OF THE	RACE OR COLOR:
PHYSICAL ADDRESS:		PHYSICAL ADDRESS:
CITY, STATE, ZIP:	***************************************	CITY, STATE, ZIP:
COUNTY: HOW LOI	NG:	COUNTY:HOW LONG:
MAILING ADDRESS:	MANAGEMENT OF THE PROPERTY OF	MAILING ADDRESS:
CITY, STATE, ZIP:	минични	CITY, STATE, ZIP:
HOME PHONE: ()		HOME PHONE: ()
WORK PHONE: ()	MAAAAAAAAA	WORK PHONE: ()
CELL PHONE: ()		EMPLOYMENT:
E-MAIL ADDRESS	2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	BUSINESS ADDRESS:
EMPLOYMENT:		CITY, STATE, ZIP:
BUSINESS ADDRESS:		GROSS INCOME:PER:
CITY, STATE, ZIP:	MANUTURE TITLE	TAKE HOME INCOME: PER:
GROSS INCOME:	PER:	PAID EVERY:
TAKE HOME INCOME:	PER:	DL#: STATE:
PAID EVERY:		SS#:
DL#:STATE	** * * * * * * * * * * * * * * * * * *	AGE: DATE OF BIRTH:
SS#:		CITY, STATE OF BIRTH:
AGE: DATE OF BIRTH:		VEHICLE:
CITY, STATE OF BIRTH:		DEBT TO:
VEHICLE:		SECOND VEHICLE:
DERT TO:		DEBT TO:

**CLIENT INFORMATION (DIVORCE)** 

### INFORMATION REGARDING THE MARRIAGE

DATE OF MARRIAGE	*		DATE O	F SEPARATION:			
CITY, COUNTY AND	STATE MARRIED IN:	***************************************	***************************************				
HAVE YOU OR YOUR	R SPOUSE EVER FILED	FOR A DIVOR	CE FOR THIS MARRIA	GE BEFORE?			
IF YES, WHEN? WHERE?							
WHERE SHOULD TH	E OTHER PARTY BE SI	ERVED WITH N	IOTICE AND WHAT TI	ME OF DAY IS BEST? (IF APPLICABLE)			
MARITAL DIFFICE	JLTIES INVOLVING:	(CHECK AN)	THAT APPLY)				
DRUGS/A	LCOHOL		PHYSIC	_PHYSICAL VIOLENCE			
SEXUAL D	DISAPPOINTMENT		RELIGI	ON			
SEXUAL I	NFIDELITY		INCOMP	PATIBILITY			
FINANCIA	AL DISPUTES		OTHER				
CHILDREN ADOPT	TED OR BORN BY PA	RTIES OF TH	IS MARRIAGE:				
NAME	<u>SS#</u>	SEX	DATE OF BIRTH	CITY, COUNTY, STATE OF BIRTH			
1.							
2.			~~~				
3.							
4.							
5.	***						
6.							
CHILDREN RESIDE V	VITH:						
WILL THERE BE A DI	SPUTE OVER CUSTOD	Y OF THE CHI	LDREN?				
IF NOT, CUSTODY W	TILL BE WITH WHOM?		***************************************				
DO THE CHILDREN C	OWN ANY PROPERTY?						
IS FEMALE PREGNAN	JT?		MATTER PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERT				
ANY CHILDREN NOT	CONCEIVED OF THIS	MARRIAGE? _					
MAIDEN NAME:		***************************************	RESTOR	RE MAIDEN NAME?			
FORMER NAME:			RESTOR	RE FORMER NAME?			
				SPOUSE?			
TE SO HO	W MANY TIMES?						

#### ASSET AND DEBT INFORMATION

LIST ALL COMMUNITY PROPERTY:	
1.	6
2	7
3	8
4	9
5	10.
LIST ALL COMMUNITY DEBT:	
1.	5
2	6
3	7
4	8
PLEASE MARK THE ANY OF THE FOLLOWING THAT YOU O	R YOUR SPOUSE HAS INTEREST IN:
CLIENT'S SEPARATE PROPERTY: (PROPERTY OWNED PRIOR TO THE MARRIAGE, INHERITED PROPERTY OR GIVEN TO THE MARRIAGE, INHERITED PROPERTY OR BY GIFT)	SPOUSE'S SEPARATE PROPERTY: (PROPERTY OWNED PRIOR TO THE MARRIAGE, INHERITED PROPERTY OR GIVEN TO THE MARRIAGE, INHERITED PROPERTY OR BY GIFT)
REAL ESTATE  IF SO, NO. OF PIECES OF PROPERTY:	REAL ESTATE  IF SO, NO. OF PIECES OF PROPERTY:
STOCKS, BONDS AND/OR SECURITIES	STOCKS, BONDS, AND/OR SECURITIES
IRA'S	IRA'S
CD'S	CD'S
RETIREMENT, ETC.	RETIREMENT, ETC.
OWN OR OPERATE A BUSINESS IF SO,	OWN OR OPERATE A BUSINESS IF SO,
NAME OF BUSINESS:	NAME OF BUSINESS:
S IT A CORPORATION, SOLE PROPRIETORSHIP, OR	IS IT A CORPORATION, SOLE PROPRIETORSHIP OR
PARTNERSHIP:	PARTNERSHIP:
OTHER SEPARATE PROPERTY:	
	OTHER SEPARATE PROPERTY:
2	1
3	2
f	3
	4
The supplied of the supplied o	ξ

CLIENT INFORMATION (DIVORCE)

SHOULD YOU BE REIMBURSED?\_\_\_\_\_

#### POSSIBLE TORT ACTIONS:

DURIN	G THE DURATION OF YOUR MARRIAGE RELATION	SHIP, H	AS YOUR SPOUSE EVE	₹:			
1.	COMMITTED ASSAULT OR BATTERY ON YOU O	R ANY C	HILD(REN)?				
2.	PUBLICLY DEFAMED YOUR CHARACTER:	***************************************					
3.	FALSELY IMPRISONED YOU OR YOUR CHILD(RI	EN)			***************************************		
4.	SUBJECTED YOU OR YOUR CHILD(REN) TO DU	RESS?					
5.	INVADED YOUR OR YOUR CHILD(REN)'S PRIVA	CY?			······ Promise		
6.	BREACHED A FIDUCIARY DUTY TO YOU OR YO	UR CHIL	D(REN)?	an Amada A			
7.	BREACHED A CONTRACTUAL DUTY TO YOU OF	YOUR (	CHILD(REN)?		_		
8.	FORGED YOUR NAME OR YOUR CHILD(REN)'S N	VAME TO	ANY INSTRUMENT?_	TRAPPARATE MANAGEMENT OF THE PROPERTY OF THE P	va		
9.	CONVERTED ANY PROPERTY OF YOURS OR YOU	JR CHIL	D(REN)'S?	80000000000000000000000000000000000000	•••••		
10.	TRANSFERRED ANY COMMUNITY PROPERTY W	ITHOUT	YOUR KNOWLEDGE:_				
11.	INTENTIONALLY INFLICTED EMOTIONAL DISTR	ESS ON	YOU?				
12.	NEGLIGENTLY INFLICTED DISTRESS ON YOU?_		devices and substitute and the s				
GENER/	AL INFORMATION:						
WHAT I	HAT IS YOUR RELIGIOUS PREFERENCE?						
	S Your spouse's religious preference?						
	OR YOUR SPOUSE HAVE A PREMARITAL OR POST						
	OUR SPOUSE CURRENTLY HAVE AN ATTORNEY? _						
	INFORMATION REGARDINAPPLICABLE)	<b>V</b> G	PREVIOUS	MARRIAGES	(IF		
CLIENT	T INFORMATION:	SPOL	ISE INFORMATION	l:			
NAME O	E OF PREVIOUS SPOUSE:		NAME OF PREVIOUS SPOUSE:				
	SS:ADDRESS						
CITY, ST	TATE, ZIP: CITY, STATE, ZIP:						
HOME PI	HONE: () HOME PHONE: ()						
WORK PI	PHONE: ()						
DATE OF	F MARRIAGE: DATE OF MARRIAGE:						
DATE DI	IVORCE WAS FINAL: DATE DIVORCE WAS FINAL:						
CAUSE N	E NO. OF DIVORCE: (IF KNOWN) CAUSE NO. OF DIVORCE: (IF KNOWN)						
DO YOU	OR YOUR SPOUSE HAVE CHILDREN OF A PREV	TOUS M	ARRIAGE UNDER 18 Y	EARS OF AGE?			
	IF SO, COMPLETE THE FOLLOWING:						

NAME	SS#	<u>SEX</u>	DATE OF BIRTH	CITY, COUNTY, STATE OF BIRTH
1.				
2.				
3				
WITH WHOM DO THESE CHIL	DREN RESIDE?		***************************************	
DO YOU PAY OR RECEIVE CH	ILD SUPPORT?	DOES	YOUR SPOUSE? _	IF SO, HOW MUCH A MONTH
PER CHILD?				
HAVE YOU OR YOUR SPOUSE	HAD ANY INVOLVEMEN	IT WITH THE	OFFICE OF THE AT	TORNEY GENERAL, CHILD SUPPORT
DIVISION?				
CONSULTATION F	EE AGREEMEN	<i>V7</i> :		
				THE INITIAL CONSULTATION,
REGARDLESS OF MY	A DECISION TO	ENGAGE	THE SERVICE	S OF THIS LAW OFFICE.
			SIGNATUR	<b>-</b>
			***************************************	
			PRINTED	NAME
			DATE	

#### EXHIBIT "A"

# REQUIRED HEALTH INSURANCE INFORMATION PURSUANT TO TFC §154.181(B)

Pursuant to Texas Family Code §154.181(B), the parties submit the following information regarding health insurance for the minor child(ren) the subject of this suit:

	Private health insurance is in effect for	the r	minor c	:hild(rei	า):			
Identi	ty of Health Insurance Company:	***************************************	A A A A A A A A A A A A A A A A A A A	***************************************				
Policy	Number		<b>1</b> 11111111111111111111111111111111111		AND THE PERSON NAMED OF TH		ALLE MAN TO THE PARTY OF THE PA	
	of parent responsible for ent of premium			wykonia kanana kana		A CONTRACTOR OF THE CONTRACTOR		
	erage available through a c's employment?			Yes		□ No	)	
Cost o	f premium? \$	·		·····	_ per	week	month	year
	Private health insurance is not in effect	t for t	he min	or child	l(ren):			
assista	e) the child(ren) receiving medical ance under Chapter 32, Human rces Code?			Yes		□ No	)	
benefi	e) the child(ren) receiving health ts coverage under state child plan under Chapter 62, Health and Safety Code?			Yes		□ No	)	
Cost o	f premium? \$	***************************************	Van de la constant de		_ per	week	month	year
health that pa month	either parent have access to private insurance at a reasonable cost to arent, reasonable defined as a premium not to exceed ten percent (10%) of rent's net income per month?		Yes			lo		

## INFORMATION FOR SERVICE OF PROCESS INSTRUCTIONS

Please complete the following items respecting the opposing party (i.e. spouse, ex-spouse, etc.) If you have a picture of this individual, please leave it with our office. We cannot guarantee the return of photos. The following information will only be used in the event that it is necessary for the process server to serve the papers to your opponent. Please complete this information even though you do not wish to have papers served at this time. Unless the attorney has indicated otherwise, <u>DO NOT TELL OUR OPPONENT THAT HE OR SHE IS ABOUT TO BE SERVED</u>. Failure to comply with these instructions may result in the attorney and process server being unable to rapidly and effectively protect you and your rights. It further may cost you additional service fees and attorney's fees.

FULL NAME:		HIS/HER AGE:
NICKNAMES:		
PLACE OF EMPLOYMENT:	P(	OSITION:
ADDRESS:	<b>PAGE 1</b>	
DAYS AND HOURS WORKED:		
PLACE OF RESIDENCE:		
VEHICLE DRIVEN: MAKE	MOD	DEL
LICENSE NUMBER :	TOP COLOR	BODY COLOR
DESCRIPTION: HEIGHT	WEIGH	T
HAIR COLOR:	HAIR LENGTH:	EYES:
BUILD: SLIM, MEDIUM, HEAV	(circle one)	
OTHER: List any other physic	al characteristics, identifyin	g marks, favorite locations that
may help us locate your oppon	ent for service. Please note	anything unusual regarding the
vehicle driven by the person to	be served (tinted windows	s, bumper sticker, radio/cellular
ohone antenna, body damage,	etc.:	
Will this individua	I evade service of process?	yes no
Do you consider this person to	be potentially dangerous to	this process server?
yes no		
Telephone number where we r	may reach you for further in	formation:

#### PRE-INTERVIEW CONSIDERATIONS

Once you begin talking with the attorney, the attorney-client privilege is established. All matters discussed with the attorney are strictly confidential and cannot be disclosed, with some exceptions explained below. Prior to establishing the attorney-client relationship, please be aware of the following:

- 1. Attorneys are prohibited by the State Bar Disciplinary Rules from aiding a client in carrying out a criminal or fraudulent act, and an attorney should withdraw from representation of a client if the client persists in a course of action involving the lawyer's services that the lawyer reasonably believes may be criminal or fraudulent.
- 2. Fraudulent acts may include the transfer of assets or the hiding or concealing of assets to deprive the other spouse of those assets.
- 3. The most common criminal acts which occur in the marriage and divorce context are:
  - a. Wiretapping
  - b. Eavesdropping
  - c. Spousal or child abuse

Wiretapping is illegal in Texas unless the person doing the recording is a party to the conversation. So, recording the other parent and a child is illegal, as well as, recording the other spouse and a boy or a girlfriend. Eavesdropping includes listening to conversations not over the phone and recording by audio or video means the activities of a person in a situation where the person has a reasonable expectation of privacy. These are criminal offenses both state and federal. In addition, any evidence illegally obtained will not be allowed into a trial of your case.

Please do not tell us of any illegal or fraudulent activity in which you have engaged. The attorney cannot fail to disclose to the Court or to the other side this type of knowledge, if properly requested during the discovery process.

Signature	Date