

CAVEDA

LAW FIRM, P.A.

Marital & Family Law
Personal Injury & Wrongful Death

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CONFIDENTIAL QUESTIONNAIRE—MODIFICATION ACTIONS
(After a Final Judgment of Dissolution of Marriage or Paternity has been entered)

Please complete this questionnaire. If you will spend the time to complete all items, you will give us the background information necessary to begin to understand the complexity of the personal aspects of your case. All information will be held in strict confidence.

I. Your Personal Information:

- a) Name (first, middle & last) _____
- b) Date of birth _____ Place of Birth _____
- c) Social Security Number _____
- d) Current address _____

Do you wish to have your mail from this office sent to a different address? If so, please list the address:

- _____
- _____
- e) Telephone numbers where we may reach you: Home _____
- Office _____
- Cell _____

- f) If you wish to correspond via e-mail, please give your e-mail address: _____

Attorney Notes: _____

Residency Information:

a) How long have you lived in the State of Florida? _____

b) Please list other residential addresses during the past five (5) years and the dates you resided at that residence.

Attorney Notes: _____

Education:

a) Highest degree of education _____

Attorney Notes: _____

Employment:

a) Employer _____

b) Address _____

c) What is your job title _____

d) Gross salary (annual) _____

e) Other sources of income (explain) _____

f) Average monthly income from other sources _____

Attorney Notes: _____

II. Information on Other Party

- a) Name (first, middle, last) _____
- b) Maiden/Former Name _____
- c) Current address _____

- d) Date of birth _____ Place of Birth _____
- e) Social Security Number _____
- f) Telephone numbers: Home _____
Cell _____ Office _____

Attorney Notes: _____

Residency Information:

- a) How long has he/she lived in the State of Florida? _____
- b) Please list other residential addresses during the past five (5) years and the dates resided at that residence.

Attorney Notes: _____

Education:

- a) Highest degree of education _____

Attorney Notes: _____

Employment:

- a) Employer _____
- b) Address _____

- c) What is his/her job title _____
- d) Gross salary (annual) _____
- e) Other sources of income (explain) _____
- f) Average monthly income from other sources _____

Attorney Notes: _____

III. Relationship and Separation

- a) Nature of Relationship (e.g., ex-spouse; boyfriend/girlfriend; lived together; extramarital affair, etc.)

- b) If lived together, for how long? _____
- c) Give an approximate date of separation _____
- d) Have there been prior separations? _____
- e) If so, how many? Please state approximately when and how long? _____
- f) Has he/she ever been charged with a crime? _____
Have you been charged with a crime? _____
- g) Have there been prior court proceedings between you and him/her? _____ If so, please bring
copies of all related documents. Who was your previous attorney? _____
- h) How long have you and he/she been having difficulties? _____
- i) Have you and/or he/she tried counseling? _____ If so, who went, for how long and to
whom? _____
- j) Do you want counseling for yourself, for him/her, or for both of you? _____
- k) Do you want a reconciliation? _____

Attorney Notes: _____

IV. Children

- a) How many children were born of this relationship? _____
- b) Please give full name, date of birth, place of birth, and sex of each child. If there are any children by a previous marriage or relationship, please indicate.

<u>Name and Social Security Number</u>	<u>Sex</u>	<u>Date of Birth</u>	<u>Place of Birth</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- c) Where are the children living at this time? _____

- d) List all residence addresses for the children during the past five (5) years; dates they lived at that residence; and with whom they resided.

<u>Address</u>	<u>Dates at that address</u>	<u>With whom they resided</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Attorney Notes: _____

V. Modification Issue

- _____ a) What aspect(s) of your prior court order are you wanting to change or modify?
 - ___1. Child Support
 - ___2. Child Custody/Visitation
 - _____ 3. Alimony
 - ___4. Other (explain) _____

Attorney Notes: _____

VI. Miscellaneous

a) Were you referred to this office by someone? _____ If so, who referred you?

b) Were you referred to an individual lawyer or to the firm generally? _____

Attorney Notes: _____

I represent that the foregoing information is true and correct to the best of my knowledge.

DATE: _____

CLIENT SIGNATURE

The cost of the first initial consultation is \$100.00 for up to one hour. Please indicate below the method of payment for the consultation.

_____ **Cash/Money Order**

_____ **Visa/MasterCard/American Express/Discover: Card No.:** _____

Expiration Date: _____