

PLEASE FILL OUT, PRINT AND BRING THE DAY OF YOUR CONSULTATION ALONG WITH \$100.00 CONSULTATION FEE.

CHRISTINA R.
Jenkins
L.L.C.
ATTORNEY AT LAW

CUSTODY MODIFICATION, CHILD SUPPORT, LEGITIMATION

DATE: _____

FATHER:

Full Name: _____

Address: _____ Phone #: _____

City/State/Zip: _____ County: _____

Current Spouses Name _____

E-Mail Address _____

Referred By: _____

Age _____ Birthdate _____ Race _____ S/S #: _____

Birthplace: _____ # Of Previous Marriages: _____

Parents' Names: _____

Address _____

City/State/Zip: _____ Phone #: _____

MOTHER:

Full Name: _____ (Maiden) _____

Address: _____ Phone #: _____

City/State/Zip: _____ County: _____

Current Spouses Name _____

E-Mail Address _____

Age _____ Birthdate _____ Race _____ S/S #: _____

Birthplace: _____ #Of Previous Marriages: _____

Parents' Names: _____

Address _____

City/State/Zip: _____ Phone #: _____

_____ Consultation Fee Paid
_____ Retained

_____ Copy of Driver's License
_____ Clio

HAVE YOU BEEN A RESIDENT OF GEORGIA FOR MORE THAN SIX MONTHS? YES NO

CHILDREN

<u>Names Of Children</u>	<u>Birth/Adopted</u>	<u>Sex</u>	<u>Age</u>	<u>Birthdate</u>	<u>Who Has Custody</u>	<u>Who Wants Custody</u>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

County of Divorce/Modification last held in: _____

Do You/Your Spouse Have Any Children By A Previous Marriage? _____

Yes/ No How Many _____

Do You/Your Spouse Receive Child Support For These Children?

Yes /No Amt: \$ _____ Ages Of Children _____

FATHER:

Employer: _____

Address: _____

City/State/Zip: _____ Phone #: _____

Occupation: _____ Length Of Employment _____

Prior Employment: _____

Gross Salary: Weekly/Monthly Yearly \$ _____

Net Salary: Weekly/Monthly Yearly \$ _____

Investment Income _____ \$ _____

Other Income _____ \$ _____

Total Income _____ \$ _____

Education Of Father _____

MOTHER:

Employer: _____

Address: _____

City/State/Zip: _____ Phone #: _____

Occupation: _____ Length Of Employment _____

Prior Employment: _____

Gross Salary: Weekly/Monthly Yearly \$ _____

Net Salary: Weekly/Monthly Yearly \$ _____

Investment Income _____ \$ _____

Other Income _____ \$ _____

Total Income _____ \$ _____

Education Of Mother _____

_____ Consultation Fee Paid
_____ Retained

_____ Copy of Driver's License
_____ Clio