

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



**CUSTODY MODIFICATION, CHILD SUPPORT, LEGITIMATION, CONTEMPT**

DATE: \_\_\_\_\_

**Plaintiff:**

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 #: \_\_\_\_\_

**Defendant:**

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:** \_\_\_\_\_ **Year:** \_\_\_\_\_

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: \$ \_\_\_\_\_ Weekly/Monthly 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