



The Law Firm

Calhoun Law, P.C.

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LINCOLNTON OFFICE
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PERSONAL INFORMATION

1. Please provide the following personal information:

Full name: _____
Address: _____ County: _____
City _____ State: _____ Zip Code _____
SSN: _____ Driver's license number: _____
Maiden Name: _____
Home Phone: _____ Cellular: _____
Work Phone: _____ Email address: _____

2. How did you learn about our office?

Letter _____ Internet _____ State Bar Referral Services _____
Previous Client _____ Referred by: _____

3. Do you have an account with any of the following social media websites?

Facebook _____ Twitter _____ Other (specify) _____

4. If you moved out of the marital home and currently reside in new address, please state:

Address: _____
City: _____ County: _____ State: _____ Zip: _____
Home phone: _____ Mobile phone: _____
Work Phone: _____ E-mail address: _____

5. At what address do you wish to receive mail from this office?

How would you like your documents sent to you? U.S. Mail _____ or E-mail _____

6. How do you prefer that we contact you? Home _____ Work _____

List an emergency number of someone who can always reach you:

Name: _____ Telephone: _____

7. Have you consulted or retained any other attorney on this matter before coming to this office?

_____ If so, please state who and when: _____

EMPLOYMENT INFORMATION

8. Your Employer: _____
Job title: _____
Address: _____
City, state, and zip code: _____
Telephone number: _____
Gross salary per month: \$ _____ Length of employment: _____
Education: _____

SPOUSE'S INFORMATION

9. Please give your spouse's full name, date and place of birth, and SSN.
Full name: _____
Birth date: _____ City and State where born: _____
SSN: _____ Driver's license number: _____

10. Where is your spouse living now, and what is his or her contact information?
Address: _____
City: _____ County: _____ State: _____ Zip: _____
Home phone: _____ Work phone: _____
Mobile phone: _____

11. Please complete the following information concerning your spouse's employment.
Employer: _____
Job title: _____
Address: _____
City: _____ County: _____ State: _____ Zip: _____
Telephone number: _____
Gross salary per month \$ _____ Length of employment: _____
Education: _____

CHILD(REN)'S INFORMATION

12. How many children do you have with your spouse: _____
Are you (or your spouse) pregnant this time? No _____ Yes _____

13. Please give the full name, date and place of birth, sex, and SSN of each child born during the marriage:

- Name: _____
Sex: _____ Date of birth: _____ Age: _____ SSN: _____
Place of birth: _____
- Name: _____
Sex: _____ Date of birth: _____ Age: _____ SSN: _____
Place of birth: _____
- Name: _____
Sex: _____ Date of birth: _____ Age: _____ SSN: _____
Place of birth: _____
- Name: _____
Sex: _____ Date of birth: _____ Age: _____ SSN: _____

IS THERE ANY AGREEMENT OR PRIOR COURT ORDER THAT GOVERNS THE ISSUES OF CHILD SUPPORT & VISITATION REGARDING YOUR CHILD(REN):

NO _____ YES _____ CAUSE NO. _____

COUNTY: _____

Will there be a dispute over the children? _____

If not, with whom will the children live? _____

Where and with whom are the children currently living now? _____

MARRIAGE AND SEPARATION INFORMATION

1. Please give the date and place of your marriage: Date: _____
Place: _____
2. Are you currently separated from your spouse? No _____ If Yes, please state the date of separation: _____
3. Please indicate the main reasons for the breakup of the marriage relationship and the grounds for the suit.
_____ drugs/alcohol _____ sexual disappointment _____ infidelity
_____ financial dispute _____ physical violence _____ religion
_____ other: _____

JURISDICTION

4. How long have you lived in North Carolina? _____
5. What county are you filing this suit in? _____
6. Have you or your spouse ever filed for divorce? _____
If so, when and where? _____
Is this case still pending and active: Yes _____ No. _____
7. Does your spouse have an attorney? _____

CHILDREN OF PAST RELATIONSHIP

8. Do you or your (ex-) spouse have any other children from another relationship for whom a duty support is owed? _____
9. Please give the full name, date and place of birth, sex, and SSN of each such child:
 - a. Name: _____
Sex: _____ Date of birth: _____
Age: _____ Place of birth: _____ SSN: _____
 - b. Name: _____
Sex: _____ Date of birth: _____
Age: _____ Place of birth: _____ SSN: _____
10. Do you pay/ receive child support? _____
If so, how much? \$ _____ per _____
11. Does your spouse or ex- spouse pay/ receive child support? _____
If so, how much? \$ _____ per _____

NAME CHANGE PROVISION

1. If a divorce is granted, should the wife's maiden name be restored? No _____
2. If yes, what is the Full Name that should be used? _____
3. If the parent-child relationship is established, should the child(ren) last name be changed?

ASSETS

ASSETS

Please list ALL ASSETS owned by you or your spouse - Note whether this asset was owned before marriage or obtained after you separated from your spouse.

REAL PROPERTY:

PENSION/RETIREMENT:

STOCKS, BONDS, & INTANGIBLES:

BUSINESSES:

BANK ACCOUNTS:

LIFE INSURANCE:

OTHER:

DEBTS

DEBTS

Please list ALL DEBTS held by you or your spouse - Note whether this debt was owned before marriage or incurred after you separated from your spouse. (please include the nature/purpose of debt, account number, name of creditor, balance due as of separation date, and monthly payment)

UNSECURED LOANS/NOTES/EQUITY LIENS:

CREDIT CARDS:

MORTGAGES, ETC.:

OTHER: