

JOHNNY W. THOMAS, LAW OFFICE, P.C.
FAMILY INTERVIEW SHEET

Petitioner's Name: _____ **Age:** _____

Address: _____

City, State & Zip: _____

Home # _____ **Wk#** _____ **Date of Birth:** / / .

Maiden Name: _____

Social Security Number: _____ **Driver's Lic.#** _____

Birthplace: _____

Employer: _____

Employer Address: _____

Bexar County Resident? Y / N **How Many Years:** _____ **Race:** _____ **Sex:** _____

Respondent's Name: _____ **Age:** _____

Address: _____

City, State & Zip: _____

Home # _____ **Wk#** _____ **Date of Birth:** / / .

Maiden Name: _____

Social Security Number: _____ **Driver's Lic.#** _____

Birthplace: _____

Employer: _____

Employer Address: _____

Bexar County Resident? Y / N **How Many Years:** _____ **Race:** _____ **Sex:** _____

Date of Marriage: _____ **Place of Marriage:** _____

Date Separated: _____

Community Property:

To Wife: _____

To Husband: _____

Automobiles: _____ **Vin #** _____

Automobiles: _____ **Vin #** _____

Real Estate: _____

Mortgage Co: _____ **Value:** _____ **Balance:** _____

Division Agreed By Parties: Y / N _____ **Other Agreements:** _____

Children Residing with Petitioner: _____ **With Respondent:** _____

Child(ren) Name: _____ **Sex:** _____ **DOB:** / / .

Place of Birth: _____ **SSN #** _____

Child(ren) Name: _____ **Sex:** _____ **DOB:** / / .

Place of Birth: _____ **SSN #** _____

Child(ren) Name: _____ **Sex:** _____ **DOB:** / / .

Place of Birth: _____ **SSN #** _____

Child Support: _____ **Change to Maiden Name: Y / N** _____

Petitioner's Income: Weekly/Monthly: _____ **Amount:** _____

Respondent's Income: Weekly/Monthly: _____ **Amount:** _____

Pensions/Retirement/Savings/Checking, etc: _____

Will Respondent Sign Waiver: Y / N _____ **Is Respondent Military: Y / N** _____

If So, What Branch: _____

Place Respondent Should Be Served: _____