THE LAW OFFICES OF RONALD L. BELL & ASSOCIATES, P.C.

1113 SOUTH MILWAUKEE AVE, SUITE 204 LIBERTYVILLE, IL 60048

Telephone: (847) 495-6000

Facsimile: (847) 495-6001

Email: ronaldbelllaw@gmail.com Website: www.bestlakecountylawver.com

TODAY'S DA	TE:	
	YOUR INFORMATION	
NAME:		
ADDRESS:		
HOME PHONE:		
MOBILE PHONE:		
OFFICE PHONE:		
MAIDEN NAME:		
(if applicable)		
E-MAIL ADDRESS:		
DATE OF BIRTH:		AGE:
SSN:		
CITY/STATE OF BIRTH OR COUNTRY IF NOT USA:		
	OPPOSING PARTY INFORMATION	
NAME:		
ADDRESS:		
HOME PHONE:		
MOBILE PHONE:		
OFFICE PHONE:		
MAIDEN NAME:		
(if applicable)		
E-MAIL ADDRESS:		
DATE OF BIRTH:		AGE:
SSN:		
CITY/STATE OF BIRTH OR COUNTRY IF NOT USA:		

CHILDREN

FULL NAME	DATE OF BIRTH	AGE	PRIMARY POSSESSION

MARRIAGE INFORMATION

DAT	DATE OF MARRIAGE:						
LOC	ATION OF MARRIAGE: (C	CITY / COUNTY / ST	ГАТЕ)				
EXIS	TING COURT DATE & INI	FO:					
DAT	E:		TIME:				
COU	RTHOUSE:		ROOM:				
OPP	OSING PARTY ATTORNE	Y (IF KNOWN):					
		EMPL	OYMENT	INFORMATIO)N		
		YOUR EMP	LOYMENT	INFORMATION			
	ITION:						
EMP	PLOYER'S NAME						
ADD	RESS:						
РНО	NE:						
GRO	SS ANNUAL INCOME:	\$					
401	<u></u>	\$					
PEN:	SION:	\$					
IRA:		\$					
		OPPOSING	PARTY EM	PLOYMENT INF	ORMATI	ON	
	ITION:						
EMP	LOYER'S NAME						
ADD	RESS:						
PHO	NE:						
GRO	SS ANNUAL INCOME:	\$					
401H	<:	\$					
PEN:	SION:	\$					
IRA:		\$					
<u>REAL ESTATE</u>							
Do y	ou own real estate?						
Addr	ess:						
Current mortgage payoff:		\$					
Mort	tgage Company:						
			<u>AUTON</u>	<u>10BILES</u>			
		YEAR		MAKE		MODEL	
	YOUR INFO						
	SPOUSE/PARTNER						

BELOW:					
HOW WERE YOU REF	ERRED TO US: YE	LLOW PAGES	/ INTERNET / FI	RIEND / OTHER	