

INITIAL CLIENT INTAKE SHEET

Paternity

Paternity cases can be an emotionally draining and legally complicated process. In the course of representing you, I will need to know virtually everything about your relationships with your family and your financial situation. I realize discussing these matters and providing the information I request will be difficult. Nevertheless, I must ask for it. The personal information will enable me to represent your best interests in court. The court will require most of the financial data to divide your marital property and determine support levels. If you do not understand what information is required, or have specific questions about the form, please complete what you can, then call me and ask all your questions at once.

CLIENT FULL NAME:	SSN:
Address:	DOB:
County:	<u>Place of Birth</u>
Length at Address:	City:
Mailing Address: <input type="checkbox"/> Same as above	State:
	County:
	Occupation:
	Employer:
	<u>Income</u>
	Hourly ____ Rate Per Hour: ____ No. Hours/Wk ____
	Salary ____ Monthly Salary _____
Length of Residence in State:	Second Occupation:
Length of Residence in County:	Second Employer Name:
	<u>Second Income</u>
	Hourly ____ Rate Per Hour: ____ No. Hours/Wk ____
<u>Telephone</u>	Salary ____ Monthly Salary _____
HOME:	
WORK:	
CELL:	Government Support:

FAX:
 PAGER:
 E-MAIL:

OTHER PARENT'S FULL NAME:

SSN:

Address:

DOB:

County:

Place of Birth

City:

Length at Address:

State:

County:

Mailing Address: Same as above

Occupation:

Employer:

Income

Hourly ____ Rate Per Hour: ____ No. Hours/Wk ____

Salary ____ Monthly Salary _____

Length of Residence in State:

Second Occupation:

Second Employer:

Length of Residence in County:

Second Income

Hourly ____ Rate Per Hour: ____ No. Hours/Wk ____

Salary ____ Monthly Salary _____

Telephone

HOME:

WORK:

CELL:

FAX:

PAGER:

E-MAIL:

<i>CHILDREN(S) NAME(S)</i>	<i>DATE OF BIRTH</i>	<i>SSN:</i>	<i>RESIDING WITH:</i>	<i>PLACE OF BIRTH</i>

Is mother currently pregnant? _____ Due Date: _____
 List the name and address of all possible fathers, if not already listed: _____

Any other proceedings regarding custody of any of these children, if so please list case number and county and state of said action?

Do you anticipate a dispute about child custody or the parenting plan? If so, please explain: _____

List the addresses where the children have lived for the past 5 years and with whom they have lived:

ADDRESS	DATES	LIVED WITH

Does either party have any other children? If so list below:

<i>CHILDREN(S) NAME(S)</i>	<i>DATE OF BIRTH</i>	<i>NAME OF PARENTS</i>	<i>RESIDING WITH:</i>	<i>CHILD SUPPORT PAID OR RECEIVED</i>

Does the other party have an attorney? _____
 Who is the attorney? _____ Phone number: _____
 Address: _____

STATEMENT OF INCOME AND EXPENSES OF

With monthly income as follows

A. Wage Earner	<u>PETITIONER</u>	<u>RESPONDENT</u>
1. Gross Income	_____	_____
2. Other Income	_____	_____
3. Subtotal Gross Income	\$ _____	\$ _____
Withholding		
4. Federal Income Tax	_____	_____
5. Social Security	_____	_____
6. Medicare	_____	_____
7. Kansas Withholding	_____	_____
8. Subtotal deductions	\$ _____	\$ _____
9. Net Income	\$ _____	\$ _____

B. Self-Employed	<u>PETITIONER</u>	<u>RESPONDENT</u>
1. Gross Income from Self-Employment	N/A _____	N/A _____
2. Other Income	_____	_____
3. Subtotal Gross Income	_____	_____
4. Reasonable Business Expenses (Itemize on attached exhibit)	_____	_____
5. Self-Employment Tax	_____	_____
6. Estimated Tax Payments (Claiming ____ Exemptions)	_____	_____
7. Federal Income Tax	_____	_____
8. Kansas Withholding	_____	_____
9. Subtotal Deductions	_____	_____
10. Net Income (Line B.3. minus Line B.9.)	_____	_____

Pay Period _____
Petitioner
Respondent

11. The monthly expenses of each party are: (Please indicate with an asterisk all figures which are estimates rather than actual figures taken from records.)

A.

ITEM

Petitioner (Actual or estimated) Respondent (actual or estimated)

1.	Rent (if applicable)	_____	_____
2..	Food	_____	_____
3.	Utilities		
	Trash Service	_____	_____
	Newspaper	_____	_____
	Telephone	_____	_____
	Gas	_____	_____
	Water	_____	_____
	Lights	_____	_____
	Other Cable	_____	_____
4.	Insurance		
	Life	_____	_____
	Health	_____	_____
	Car	_____	_____
	House/rental	_____	_____
	Other	_____	_____
5.	Medical and Dental	_____	_____
6.	Prescription Drugs	_____	_____
7.	Child care (work related)	_____	_____
8.	Child care (non-work related)	_____	_____
9.	Clothing	_____	_____
10.	School expenses	_____	_____
11.	Hair cuts and beauty	_____	_____
12.	Car repair	_____	_____
13.	Gas and oil	_____	_____
14.	Personal Property Tax	_____	_____
15.	Miscellaneous (Specify)		
	_____	_____	_____
	_____	_____	_____
16.	Debt payments (specify)		
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

TOTAL

\$ _____ \$ _____

* Show house payments, mortgage payments, etc., in Section 11B.

B. Monthly payments to banks, loan companies or on credit accounts (Indicate actual or estimate, use asterisk for secured), DO NOT LIST ANY PAYMENTS INCLUDED IN PART 10.A. ABOVE; indicate party responsible for debt after divorce:

Responsibility Creditor Respondent	When incurred	Payment Amt.	Last payment made	Balance	Petitioner	Respondent
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
				Subtotal	\$ _____	\$ _____
				TOTAL	_____	_____

C Total Living Expenses

1. Total funds available to Petitioner and Respondent (from No. 9.)

2. Total needed (from No. 11A & B .)

3. Net balance

4. Projected child support

Petitioner (Actual or estimated)	Respondent (actual or estimated)
_____	_____
_____	_____
\$ _____	\$ _____
_____	_____

D. Payments or contributions received, or paid, for support of others. Specify source and amount.

Source	Petitioner	Respondent
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

12. How much does the party who provides health care pay for family coverage:

_____ per _____ pay period

How much does it (or would it) cost the provider to furnish health insurance only on the provider:

_____ per _____ pay period

FURNISH THE FOLLOWING INFORMATION IF APPLICABLE.

13. Income and financial resources of children.

Income/resources	Amount
_____	_____
_____	_____
_____	_____
_____	_____

14. Child support adjustments requested.

	Petitioner	Respondent
Long Distance Visitation Costs	_____	_____
Visitation Adjustment	_____	_____
Income Tax Considerations	_____	_____
Special Needs	_____	_____
Agreement Past Minority	_____	_____
Overall Financial Condition	_____	_____

DOCUMENTATION TO BE PROVIDED TO ATTORNEY

1. Last three paycheck stubs.
2. Income tax returns for the past three (3) years. Please include the W-2 form for last year if the income tax return is not yet completed for last year's taxes.
3. A statement showing how premiums for health insurance are paid. Include information on how much it costs for the primary insured alone to be covered, and the additional costs to cover the spouse, and minor child or children, if applicable.

CUSTODY AND PARENTING PLAN

The terms describing custodial arrangements can be confusing at times and they have changed significantly over the past few years. Legal custody refers to the right to make major life decisions regarding the care and upbringing of the minor child or children, it does not denote where the child lives the majority of the time or minor decisions that are made in a child's life on a daily basis. Unless the parties agree or unless there are extreme circumstances (drug use or physical abuse), it is rare that a court will award sole legal custody. Courts tend to award parents joint legal custody of the child or children.

Then there is something called residential custody. Under this heading we discuss where the child actually lives. Although it is not required that it actually be designated as such, residential custody refers to the parent the child or children live with the majority of the time. When one person has residential custody, the other person then has specific "parenting time" with the child or children. This is the normal arrangement.

However, there are also other types of residential custody. There can be a shared custody arrangement in which the child or children live in basically two homes spending approximately 50% of the time in dad's house and 50% of the time in mom's house. There is also a custodial arrangement in which one child lives with one parent and the other child lives with the other parent. This is called a split custody arrangement and it is rarely, if ever, ordered by the court unless the parents believe that it is the best custodial arrangement for the children.

There is one other thing you want to keep in mind is that regardless of the custodial arrangement, no custodial arrangement gives you the right to dictate how the other person cares for the child or children when they are with that person. A consequence of no longer living with or being married to the other parent is that you no longer have any say in that individual's parenting style. Learning this now can save you a lot of heartache in the long run.

Now I would like to know what custodial arrangement and parenting plan that you believe would be in your child or your children's best interest. Please keep in mind that this had to do with the child(ren) and not just your desires.

Do you believe a joint or sole legal custodial arrangement would be in the best interest of your child(ren) and why? _____

What do you believe would be the best parenting time schedule for the children? Below list what parenting time you believe the other parent should have. A lot of time it is best to be specific regarding times in the court documents but more flexible in practice, that way if conflicts do arise you can always fall back on the specificity of the court orders.

Parenting time for Mother Father:

Weekdays: From _____ at ____m. to _____
_____ at ____m. starting on the _____ day of _____, 200__.

Weekends: Every _____ weekend from _____
_____ at ____m. to _____ at ____m. starting on the _____ day of _____, 200__.

Holidays:

First half of winter School Break governed by the calendar of Unified School District No. _____ located in _____ from _____

at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

Spring Break governed by the calendar of Unified School District No. _____ located in _____ from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

Easter from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

Memorial Day from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

Summer Break governed by the calendar of Unified School District No. _____ located in _____ from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

4th of July from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

Labor Day from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

Thanksgiving Day from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

Christmas Eve from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

Christmas Day from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

New Years Eve from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

New Years Day from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__.

Mother and Father's Day each year with the respective parent from _____ at _____.m. to _____ at _____.m.

Child(ren) Birthday from _____ at _____.m. to _____ at _____.m. during even years odd years, starting 200__. Or ____ is to be celebrated with the respective parent during his or her normally scheduled parenting time.

Other _____

Vacation – ex. Each parent to be allowed up to consecutive weeks each year to take the child(ren) on a family vacation. This time is to be scheduled when school is not in session and so as not to interfere with any holiday time. Each parent must give the other parent at least one months notice in writing prior with an itinerary of the trip and emergency contact numbers, prior to exercising this time. Now list what you would like to list as a vacation schedule.

Parenting Time for Mother Father

- This parent shall have all weekdays and weekends not specifically set forth above.
- This parent shall have all holidays not specified above.
- Other _____

Priorities

- Holidays and special days specified above will have precedence over weekday and weekend visitation.
- Holidays have priority over other special occasions.
- There shall be no adjustment for “missed” weekends or weekdays due to interruption by specified holidays and special days. The parties are encouraged to compensate for missed weekends so that a parent will not go more than two weekends without having weekend parenting time.
- Other _____

BELOW ARE OPTIONAL PROVISIONS THAT CAN BE ADDED TO A PARENTING PLAN
CHECK THE PROVISION(S) YOU BELIEVE WOULD BE HELPFUL.

Transportation and transportation costs. Responsibility for transportation and transportation costs, as it relates to parenting time, shall be as follows:

- Transportation arrangements and costs shall be the sole responsibility of:
 - Mother Father
- Transportation arrangements and costs shall be:
 - Shared Equally
- Other _____

Exchange Point: The exchange point for the child(ren) shall be:

- The home of the Mother Father Other: _____

- Notice of Intent to exercise or not to exercise parenting time:**
 - The Mother/Father parent shall notify the other parent _____ days in advance of intent to exercise scheduled parenting time. If notification is not given, the subject parenting time will be considered waived.
 - Except for extreme and exceptional circumstances a parent is not required to wait for the other parent more than _____ minutes before the parenting time is considered waived.
 - Other: _____

- Telephone and Mail Contact Between Parent and Child(ren)**
 - Telephone Contact.** Each parent is allowed reasonable telephone access to their child(ren) at reasonable hours without interference from the other parent. Telephone contact with a child(ren) should not be used as an opportunity by either parent to discuss issues not related to the child(ren) with the other parent. When telephone contact is attempted to be made with the child(ren), the child(ren) should either have direct access to the telephone or the telephone should be given directly to the child(ren) with a minimum of conversation between the parents unless necessary for discussion of matters related to that contact. Any parent shall not refuse to answer the phone, turn off the phone or put call block on the line in order to deny the other parent telephone contact with the child(ren). Each parent shall supply the other parent with current telephone numbers, where the child(ren) may be found or is/are staying.
 - Mail & Email Contact.** Each parent with whom the child(ren) is not then living should have unlimited ability to contact each toher by use of either regular United States mail or electronic mail, if such an account is available. The parent seeking mail contact must provide self-addressed stamped envelopes for the child(ren) to use. If available, current e-mail addresses where the child(ren) may be contacted shall be supplied to both parents by each parent. Where possible, reasonable computer access shall be allowed.

Right of First Refusal – If at any point in time it becomes necessary to leave the child(ren) in the care of someone besides the parent or natural guardian referred to in this parenting plan for more than _____ hours or days, each party must give the other party the right to exercise parenting time with the child before contacting another individual or agency to care for the child(ren). This provision ___ does not ___ does include normal childcare while one party is at work.

- Other Considerations and Agreements:**

