



**WHISENANT & ASSOCIATES**  
ATTORNEYS AT LAW  
A TEXAS REGISTERED LIMITED LIABILITY PARTNERSHIP

COMPASS BANK BUILDING  
25211 GROGAN'S MILL RD., SUITE 240  
THE WOODLANDS, TEXAS 77380

TELEPHONE (281) 681-8889  
FACSIMILE (281) 681-8882

thad@jtwlawoffice.com

**CLIENT INFORMATION FORM**

DATE: \_\_\_\_\_  
FILE NO.: \_\_\_\_\_

CLIENT'S NAME: \_\_\_\_\_  
RESIDENCE ADDRESS: \_\_\_\_\_  
RESIDENCE PHONE: \_\_\_\_\_  
BUSINESS NAME & ADDRESS: \_\_\_\_\_  
BUSINESS PHONE: \_\_\_\_\_  
FACSIMILE NUMBER: \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
MOBILE NUMBER: \_\_\_\_\_  
DATE OF BIRTH: \_\_\_\_\_  
PLACE OF BIRTH: \_\_\_\_\_  
RACE: \_\_\_\_\_  
SOCIAL SECURITY NO.: \_\_\_\_\_  
DRIVER'S LICENSE NO.: \_\_\_\_\_  
DATE AND PLACE OF MARRIAGE: \_\_\_\_\_  
DATE OF SEPARATION: \_\_\_\_\_  
MILITARY STATUS: \_\_\_\_\_  
COUNTY YOU HAVE RESIDED IN PAST 6 MONTHS: \_\_\_\_\_

SPOUSE'S NAME: \_\_\_\_\_  
RESIDENCE ADDRESS: \_\_\_\_\_  
RESIDENCE PHONE: \_\_\_\_\_  
BUSINESS ADDRESS: \_\_\_\_\_  
BUSINESS PHONE: \_\_\_\_\_  
FACSIMILE NUMBER: \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_  
MOBILE NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_  
PLACE OF BIRTH: \_\_\_\_\_  
RACE: \_\_\_\_\_  
SOCIAL SECURITY NO.: \_\_\_\_\_  
DRIVER'S LICENSE NO.: \_\_\_\_\_  
MILITARY STATUS: \_\_\_\_\_

CHILD(REN)

FULL NAME, DATE OF BIRTH, SOCIAL SECURITY #, SEX, & BIRTHPLACE

(1) \_\_\_\_\_  
(2) \_\_\_\_\_  
(3) \_\_\_\_\_  
(4) \_\_\_\_\_

ARE CHILDREN LIVING WITH MOTHER OR FATHER? \_\_\_\_\_  
IS WIFE EXPECTING A CHILD AT THIS TIME? \_\_\_\_\_  
WHAT IS WIFE'S MAIDEN NAME? \_\_\_\_\_

OPPOSING COUNSEL:

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
PHONE NO.: \_\_\_\_\_  
FACSIMILE NO.: \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_