

**WILKINSON & FINKBEINER, LLP
MEDIATION CLIENT INFORMATION**

Date: _____

Husband's Name: _____

Wife's Name: _____

Husband Telephone: (Hm.) _____ (Wk.) _____
(Cell) _____ (Fax) _____

Wife Telephone: (Hm.) _____ (Wk.) _____
(Cell) _____ (Fax) _____

Husband's Addresses: Home: _____
Work: _____

Wife's Addresses: Home: _____
Work: _____

Husband's Email Address: _____

Wife's Email Address: _____

Husband's Employer: _____ Date Started: _____

Husband's Income: _____

Wife's Employer: _____ Date Started: _____

Wife's Income: _____

Husband's Social Security Number: _____

Wife's Social Security Number: _____

Husband's Date of Birth: _____

Wife's Date of Birth: _____

Husband's Driver's License Number: _____

Wife's Driver's License Number: _____

PRIVILEGED AND CONFIDENTIAL

Debt/Obligation Description (including date debt incurred):	Value:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Former marriages of Husband: _____
(Include former spouse's name and date of marriage/divorce)

Former marriages of Wife: _____
(Include former spouse's name and date of marriage/divorce)

Wife's maiden name: _____

How did you hear about Wilkinson & Finkbeiner, LLP?
