



**KESSLER, SCHWARZ
& SOLOMIANY, PC**
FAMILY LAW ATTORNEYS

Confidential Information Sheet

Today's Date: _____, 200__

(NOTICE: No representation is provided until a signed fee contract is received and the retainer is paid).

Full Name: _____

Confidential Address - all correspondence from this office will be sent to this address - be sure it is secure:

(Do not list an address where mail could be retrieved by the other party or anyone else; rather, give us a safe address, or call us later when you obtain a secure address such as a PO Box).

Telephone Numbers:

(*Do not list a number or email address where calls, faxes, emails or pages could be received by the other party or anyone you do not want receiving them; rather, give a safe number or email address, or call us later when you obtain such safe contact information: We **STRONGLY** suggest that you create a new email account with a new password for any communications with us).

(only list "safe" numbers) Home: (____) _____ Cell Phone: (____) _____
Work: (____) _____ Facsimile: (____) _____
Email: _____ Other Number: (____) _____

How did you learn of our firm? _____

If this individual is an attorney or other professional, to what firm/practice doe he/she belong?: _____

Can we send a thank you letter to the person who referred you to our office?: _____

Reason for seeking counsel? _____

Soc. Sec. No.: _____ Date of birth: ____ / ____ / ____ If Divorce, this is your ____ Marriage (1st, 2nd, etc)

Date of Marriage: ____ / ____ / ____ Place of Marriage: _____ Date Separated: ____ / ____ / ____

Adverse Party Information:

Name: _____

Address: _____

City/State: _____

Date of Birth: ____ / ____ / ____ Soc. Security No.: _____ 1st, 2nd, etc., Marriage(s): _____

Opposing Attorney: _____

Minor Children:

Name: _____ Birthdate: ____ / ____ / ____ Soc. Security No.: _____

Name: _____ Birthdate: ____ / ____ / ____ Soc. Security No.: _____

Name: _____ Birthdate: ____ / ____ / ____ Soc. Security No.: _____

Name: _____ Birthdate: ____ / ____ / ____ Soc. Security No.: _____

**Note: The fee for an initial consultation (one hour) is \$250.00*; thereafter, hourly rates apply
*\$350.00 for consultation with founding partner, Randall M. Kessler.**