

PRE-MARITAL/POST MARITAL AGREEMENT WORKSHEET

PLEASE PROVIDE THE FOLLOWING INFORMATION:

INFORMATION ABOU	JT <u>CLIENT</u>					
Full Legal Name:						
Name As You Sign on	Documents:_					
Address:						
City/State/Zip:						
Home Telephone:		Co	unty of Home:			
Place of Employment:	Work Phone:					
Cell Phone:	Email Address:					
Birthdate:			Age:			
Social Security #:			Sex: M	F		
Marital Status:			U.S. Citizen?	Υ	N	
ls this your first marria	ge? Y	N				
Children w/ Current/ Proposed Spouse:	Name			Dat —	e of Birth	
Your Children from pric	or marriages:					

Deceased Children:								
-						Desc	endants? Y	N
-						Desc	endants? Y	N
-						Desc	endants? Y	N
INFORMATION ABOUT	SPOUSE/ P	ROPOS	ED SPOU	<u>SE</u>				
Full Legal Name:								
Name As You Sign on Do	cuments:							
Address:								
City/State/Zip:								
Home Telephone:			_ County c	f Home:				
Place of Employment: _					Work P	hone: _		
Cell Phone:			Email	Address	·			
Birthdate: _				Age:				
Social Security #:				Sex:	М	F		
Marital Status:				U.S. C	itizen?	Υ	N	
Is this your first marriage?	? Y	N						
Children w/ Current Proposed Spouse:	Name					Da	ate of Birth	
- -					-	_		
Your Children from prior r	narriages:							
-					-	_		
-						_		
Deceased Children:						D	andonte? V	N
-							endants? Y	N
-							endants? Y	N
_						Desc	endants? Y	N

GENERAL INFORMATION ABOUT COUPLE:	
How Were You Referred to Heritage Law ?:	
Who Will Be Responsible for Your Account With Us?:	
Have you seen another attorney about this matter?	If yes, who?
OTHER CONCERNS OR COMMENTS WHICH YOU FEE ATTORNEY IN YOUR PREMARITAL/ POST MARITAL AGRE	
WHAT ARE YOUR GOALS YOU WOULD LIKE TO SEE AG	COMPLISHED IN YOUR PRE-MARITAL /