

# SMITH WATTS & ASSOCIATES, LLC

DATE: \_\_\_\_\_

COUNTY OF ACTION: \_\_\_\_\_

## CLIENT'S INFORMATION

FULL NAME: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

State & County of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

House

Work

\_\_\_\_\_

Cell Phone

Race: \_\_\_\_\_

Weekly Income: \$ \_\_\_\_\_

**Relationship to Children:** \_\_\_\_\_

## MOTHER'S INFORMATION

FULL NAME: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

State & County of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

House

Work

\_\_\_\_\_

Cell Phone

Race: \_\_\_\_\_

Weekly Income: \$ \_\_\_\_\_

## FATHER'S INFORMATION

FULL NAME: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

State & County of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

House

Work

\_\_\_\_\_

Cell Phone

Race: \_\_\_\_\_

Weekly Income: \$ \_\_\_\_\_

**NAME OF CHILDREN**

**DATE OF BIRTH**

**SOCIAL SECURITY #**

**STATE & COUNTY OF BIRTH**

NAME OF CHILDREN	DATE OF BIRTH	SOCIAL SECURITY #	STATE & COUNTY OF BIRTH
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____