ALEXANDER M. NESSON ATTORNEY AT LAW 23 TRESCOTT STREET TAUNTON, MA 02780 (508) 828-6540 FAX. (508) 828-1222

Confidential Client History. This form is intended to provide information for the Law Office of Alexander Nesson only and to help him have access to information to have on your behalf. If there is additional information that may be of use, please attach another sheet. This worksheet is comprehensive and much of the information may not be applicable to your situation. This attorney is glad to go over the form in person or over the phone. Please feel free to call if you have any questions.

	FULL	L NAME					
	Home	Address					
	Phone	e numbers					
	Lived	at present address since					
	All ho	ome addresses for past	two years:		Dates		
					(From	to)
					(From	to)
	SPOL	JSE'S FULL NAME					
	Spous	se's home address					
	Home	Phone					
	A. Sp	ouse's attorney					
	Addre	ess		P	hone		
	MAR	RIAGE: Date		Place			
	A.	RIAGE: Date Date of Birth: Self: _		S	Spouse:		
	B.		Self:	S	Spouse:		
	Full N	DREN OF THIS MAR Jame		Grade in	School Living	g With	
		ou and your spouse liv					of
		ation					
	separa	ation		<u>.</u> If separ	rated, and if all	of your	
	addre	sses since separation a	re not listed in #	‡1 above, p	please list other	s here:	
					(From	to)
					(From)
•						to)

Please give dates and spouse.	names of per	sonal or marital	coun	selors seen	by you o
Do you anticipate a d	ispute about c	custody of the c	hildre	n?	
EMPLOYMENT:					
	Self		Spo	ouse	
Employer:					
Address:					
Telephone:					
Job Title:					
Employed Since:					
Nature of Job:					
Salary:					
Base					
Gross					
Net					
Overtime & Bonus:					
Gross					
Net					
Previous Employmen	t & Dates: (Ir	ndicate whether	self o	r spouse)	
Employment:	· ·	Dates	5	1 /	
1 2		(Fro	m	to)
		(Fro	m	to)
		(From		to)
EDUCATIONAL BA	CKGROUNI	D.			
G 10					
Spouse					
Spouse					
List all prior marriage	es of vourself	and of your pre	sent s	pouse (Inc	lude nar
all prior spouses of ea					
provide copies of rele					

Spouse	as	ldren of yourself or your a uch children live, who has d.	their le	gal cust	ody, and
Please list credit cards and charge accounts, who can use them and who is responsible for the bill. Accounts Who Can Use? Who is respon H W H W H W H W H W H W H W H W H W H W Please indicate names and addresses of your living parents and siblings: Can you look to any of these people for financial or other assistance if nect Who referred you to us? ASSETS (of you and your spouse): Estimate the value of each of the following items of property. If any item is located outside of Massachusetts, indicate where such item is located and, if necessary, give details on a separate sheet. Indicate how mu					
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noted, joint (J).	te w eet.	ne following items of prop f Massachusetts, indicate details on a separate sheet	where su	te how 1	much of
A. Bank Accounts (Savings & Checking) / Value H W		s & Checking) / Value	Н	W	J

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Patents; trad	ous Property: demarks; copyr interests; and o			partnership in	terest
•	Personal Effect				
	es; jewelry; art sonal property)		us, anciai	t, concetions,	Turs,
				<u> </u>	
Real Estate					
Real Estate					····· ···
Real Estate Location: _ Purchase Date		Present Value	Mtg Bal	Owned by (H,W or J)	
Location: _ Purchase Date	Purchase		e	•	
Location: _ Purchase	Purchase		e	(H,W or J)	by e
Location: _ Purchase Date Location: _	Purchase Price	Value	Bal	(H,W or J)	by e %Co
Location: _ Purchase Date Location: _ Purchase Date	Purchase Price Purchase	Value Present	Bal Mtg	(H,W or J)	by e
Location: _ Purchase Date Location: _ Purchase	Purchase Price Purchase	Value Present	Bal Mtg	(H,W or J)	by e %Cc by e