

Today's Date: _____

ADOPTION INTAKE SHEET

Attorney: A.J. Balbo, Chet Gregg, Nicki Davis

Are you a new client? _____

If so, how did you hear about our firm? _____

Client-Adopting Parent

Full Name: _____

Address: _____ Apt. Lot# _____

Contact Info.: Hm (____) _____ Cell (____) _____

E-mail _____

Date of Birth: _____

Have you been a resident of _____ County for 6 months? _____

Personal Information of Custodial Biological Parent

Full Name: _____

Address: _____ Apt./Lot # _____

City: _____ State _____ Zip: _____

Contact Info.: Hm (____) _____ Cell (____) _____

E-mail: _____

Date of Birth: _____

Have you been a resident of _____ County for 6 months? _____

Date and place of present marriage with adopting step- parent: _____

Personal Information of Non-Custodial Biological Parent

Full Name: _____

Address: _____

City: _____ State _____ Zip: _____

Contact Info.: Hm (____) _____ Cell (____) _____

E-mail _____

Name of Child(ren) to be Adopted

Child's Name: _____ DOB: _____

Child's Name: _____ DOB: _____

Child's Name: _____ DOB: _____

Name of Child(ren) after Adoption

Child's Name: _____ DOB: _____

Child's Name: _____ DOB: _____

Child's Name: _____ DOB: _____

For Office Use

Fee Quoted: \$ _____

Amount Paying Today: \$ _____

COURSE OF ACTION:

Rev. October, 2014