TRACY M. RAU, ESQ. TMR LAW GROUP			•								
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Las Vegas, Nevada 89106											
Tel: 702-754-6700 Fax: 702-754-6701											
Attorney for											
rate in a second				H JUDICIA			Т				
CLARK COUNTY, NEVADA FAMILY DIVISION											
				FAMILY	DIVISION	1					
)	Case No.								
Plaintiff,)	Dept. No.						
Ve)							
VS.) 									
		<u> </u>									
)											
DETAILED FINANCIAL DISCLOSURE FORM											
What is your name?											
What is your hamo.	First Name		Middle		Last Name		(Maiden / Former Name)				
How old are you?				What is y	What is your date of		f birth?				
What is your occupation?											
Who is your employer?						From:		To:			
Previous employer?						From:		To:			
What is your highest level of	education	1?						•			
Level of disability Agency/Physician Certifying Disability:											
		-									
FAMILY RESIDENCE TABLE - In the table below, insert t						currently living with you. MINOR CHILD NOT OF THIS					
NAME AC		AGE	MINOR CHILD OF THIS MARRIAGE/RELATIONSHIP?			MARRIAGE/RELATIONSHIP?		OTHER RELATIONSHIP (SPECIFY)			
Income/Support from Othe	rs										
I am am not		divorced f	from the other party in this action				I am	am not		remarried.	
My current spouse is:	is not:			currently employed.						_	
My current spouse earns:		_	per	_							
Attorney's Fees and Retain	ner(s)										
As of the date of this Disclosure, a total of:				has been paid by me or on my behalf to all counsel who ha						represented	
me in this matter. I have a Retainer balance of				remaining in my attorney's Trust Account.						,	
I currently owe my attorney(s) a				, a	., - 1. act / loodanti						
Lourrently owe my prior attorne		of:									