

HISTORY OF THIS MARRIAGE:

Date of this Marriage: _____

Place of this Marriage: _____
CITY STATE COUNTY

Number of this marriage for you: _____
Number of this marriage for your spouse: _____

Are you and your spouse living together now? Yes No
If not, state the date of separation and provide details surrounding separation: _____

When was the last time you had sexual relations with your spouse? _____

If separated, where have you lived since separation? _____
CITY STATE COUNTY

If separated, where has your spouse lived since separation? _____
CITY STATE COUNTY

If separated and if all your addresses since separation are not listed above, please list here:

_____ From: ___ To: ___
_____ From: ___ To: ___
_____ From: ___ To: ___

Other than the separation information listed above, have you and your spouse lived together continuously throughout the marriage? Yes No If not, please explain:

INFORMATION ABOUT YOUR CHILD(REN):

Number of Children of this Marriage: _____
Full Name Date of Birth Living With S.S.#

Children living with you but not of this marriage:

Full Name	Date of Birth	S.S.#
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you receive child support for any child(ren) by a prior marriage or relationship? Yes No
If so, what is the total amount you receive per month? \$ _____

Addresses at which the children of this marriage have lived for the past five (5) years and with whom they have lived:

Do any of the children have any physical or other problems that may be a factor in this case (i.e. learning differences, physical impairment, etc.)? _____

If so, please explain: _____

Do you anticipate a dispute about the custody of the children? Yes No

If so, please state your wishes regarding custody: _____

Who has physical custody now? I do Spouse Both

Who wants custody after the divorce? I do Spouse Both

What is the child's preference: _____

INFORMATION ABOUT YOUR EMPLOYMENT:

Name of Employer: _____

Employment Address: _____

_____	CITY	_____	STATE	_____	ZIP	_____
Job Title:	_____	Nature of Job:	_____	_____	_____	_____

Employed since: _____

If you are not employed, are you currently seeking full-time employment? Yes No

List two most recent places of employment prior to your current employer:

Employer #1	From	To	Salary	Reason for Leaving
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_____	_____	_____	_____	_____
Employer #2	From	To	Salary	Reason for Leaving

_____	_____	_____	_____	_____
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Employee benefits: Retirement Pension Profit Sharing Other

Retirement Value: _____ As of: _____ Accrued since: _____ (Date)

INFORMATION ABOUT YOUR EDUCATION:

High School: Years Completed 9 10 11 12 GED

College Attended: _____
Years Completed: 1 2 3 4 Degree: _____
Graduate School: _____
Years Completed: 1 2 3 4 Degree: _____
Vocational School: _____ Degree: _____

INFORMATION ABOUT YOUR INCOME:

How often are you paid? Weekly Bi-weekly Monthly
Income from employer: Gross \$ _____ Net \$ _____
Any income from other sources: Gross \$ _____ Net \$ _____

INFORMATION ABOUT YOUR SPOUSE'S EMPLOYMENT:

Name of Employer: _____
Employment Address: _____
_____ CITY STATE ZIP
Job Title: _____ Nature of Job: _____
Employed since: _____

List two most recent places of employment prior to your spouse's current employer:

Employer #1	From	To	Salary	Reason for Leaving
_____	_____	_____	_____	_____
Employer #2	From	To	Salary	Reason for Leaving
_____	_____	_____	_____	_____

Employee benefits: Retirement Pension Profit Sharing Other
Retirement Value: _____ As of: _____ Accrued since: _____ (Date)

INFORMATION ABOUT YOUR SPOUSE'S EDUCATION:

High School: Years Completed 9 10 11 12 GED

College Attended: _____
Years Completed: 1 2 3 4 Degree: _____
Graduate School: _____
Years Completed: 1 2 3 4 Degree: _____
Vocational School: _____ Degree: _____

INFORMATION ABOUT YOUR SPOUSE'S INCOME:

How often is your spouse paid? Weekly Bi-weekly Monthly

Income from employer: Gross \$ _____ Net \$ _____

Any income from other sources: Gross \$ _____ Net \$ _____

INFORMATION ABOUT PRIOR MARRIAGES:

If you and/or your spouse have had prior marriages, state the name of the prior spouse(s) and how, when and where the prior marriage(s) terminated:

If you and/or your spouse have any children from any prior marriage(s), please list the names and ages of any child(ren) and state with whom the child(ren) live(s) and any support paid by you or your spouse for their benefit:

PRIOR PROCEEDINGS:

Have there been any previous legal or other proceedings between you and your spouse?

Yes No

If so, please describe: _____

To your knowledge, are there any records of any events involving you and your spouse, including police reports, etc.?
Yes No

If so, please describe: _____

RECONCILIATION:

Do you have an interest in reconciliation? Yes No

Does your spouse, to your knowledge? Yes No

Have you tried marriage counseling? Yes No

If so, when and with whom? _____

REAL PROPERTY (Use additional pages if necessary):

Please answer these questions regarding real property (land/houses) owned by you and your spouse:

Marital Residence:

Address: _____ City: _____ State: ____ Zip: _____

Owned by? (Names on Deed) Me Spouse Both

Purchase date: _____ Names on mortgage: Me Spouse Both

Loan #: _____ Mortgage company: _____

Mortgage balance: _____ As of: _____

Do you rent rather than own? Yes No Monthly Rental: \$ _____

What is your monthly payment? \$ _____ Estimate market value: \$ _____

Other real property

Address: _____ City: _____ State: ____ Zip: _____

Owned by? (Names on Deed) Me Spouse Both

Purchase date: _____ Names on mortgage: Me Spouse Both

Loan #: _____ Mortgage company: _____

Mortgage balance: _____ As of: _____

Do you rent rather than own? Yes No Monthly Rental: \$ _____

What is your monthly payment? \$ _____ Estimate market value: \$ _____

Other real property

Address: _____ City: _____ State: ____ Zip: _____

Owned by? (Names on Deed) Me Spouse Both

Purchase date: _____ Names on mortgage: Me Spouse Both

Loan #: _____ Mortgage Company: _____

Mortgage balance: _____ As of: _____

Do you rent rather than own? Yes No Monthly Rental: \$ _____

What is your monthly payment? \$ _____ Estimate market value: \$ _____

AUTOMOBILES:

Make/Model	Year	Who drives	Present Value
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

Which car(s) do you plan to drive after the divorce? _____

What is the insurance company on the above automobiles? _____

What is the monthly premium? _____

DEBTS:

Please answer the following questions regarding debts owed by you and your spouse. (Exclude house mortgages and auto loans):

Accounts Owed (use additional pages if necessary and provide most current statements):

<u>Name of Creditor</u>	<u>Owner/ Responsible Parties of Account</u>	<u>Credit used for (items purchased, school loans, etc.)</u>	<u>Balance Owed</u>	<u>Monthly Payment</u>
_____	Me Spouse	_____	_____	_____
_____	Me Spouse	_____	_____	_____
_____	Me Spouse	_____	_____	_____
_____	Me Spouse	_____	_____	_____
_____	Me Spouse	_____	_____	_____
_____	Me Spouse	_____	_____	_____

LIFE INSURANCE:

Do you have life insurance on your life? Yes No Amount? \$ _____ Whole or Term?

Who is the beneficiary? _____

Do you have life insurance on your spouse's life? Yes No Amount? \$ _____

Does your spouse have their own life insurance? Yes No Amount? \$ _____

Who is the beneficiary? _____

Does your spouse have life insurance on your life? Yes No Amount? \$ _____

FINANCIAL PROPERTY:

Checking Accounts

Bank: _____ In name of: Me Spouse Both
 Account #: _____ Balance: \$ _____

Bank: _____ In name of: Me Spouse Both
 Account #: _____ Balance: \$ _____

Savings Accounts

Bank: _____ In name of: Me Spouse Both
 Account #: _____ Balance: \$ _____

Bank: _____ In name of: Me Spouse Both
 Account #: _____ Balance: \$ _____

Certificates of Deposit (CDs)

Bank: _____
Account #: _____

In name of: Me Spouse Both
Amount: \$ _____

Stocks and Bonds

Company: _____
Date acquired: _____

No. Of Shares: _____
Cost: \$ _____ Present Value: \$ _____

Retirement Accounts:

Type: _____
Date acquired or vested: _____

Company or Employer: _____
Present Value: \$ _____

Type: _____
Date acquired or vested: _____

Company or Employer: _____
Present Value: \$ _____

MEDICAL INSURANCE:

What is the name of your medical insurance carrier? _____

Whose name is the policy in? Mine Spouse's

What is the monthly premium? \$ _____

Is it through your/your spouse's employer? Yes No

What is the name of you dental insurance carrier? _____

Whose name is the policy in? Mine Spouse's

What is the monthly premium? \$ _____

Is it through your/your spouse's employer? Yes No

OTHER:

To your knowledge, has your spouse consulted an attorney regarding this matter? Yes No

If yes, please indicate the attorney's name and address, if known:

Name of accountant you use: _____

Are there bank accounts, lines of credit, stock and investment accounts or other accounts to which your spouse has access? Yes No

If so, please describe: _____

Does your spouse have in his or her possession credit cards for which you are responsible?

Yes No

If so, please specify which accounts: _____

Have you signed anything which may affect this case, including pre-nuptial or post-nuptial agreement(s), or other documents presented by your spouse, at any time? Yes No

If so, please describe what you signed and when: _____

Do you have copies of the above-referenced documents?

Have you or your spouse sold any real property in the last five (5) years? Yes No

If so, please describe: _____

Have any criminal charges been filed against you or your spouse at any time during this marriage? Yes No

If so, please provide details of the charges, including charge, county and disposition of the charge:

Have your or your spouse been involved in any other lawsuit? Yes No

If so, please provide details including case name, county, case number and disposition:

Please provide any and all additional information which you have not provided above and which you believe is pertinent to your case and describe in your own words YOUR GOALS in this case.

