

DIVORCE QUESTIONNAIRE

Payment Due At Time Of Service Unless Otherwise Agreed

Date: _____

Your General Information:

Name	
Address	County
Phone	
Cell phone	
E-mail address	
Social Security Number	
Driver's License Number	
Date of Birth	
State of Birth	
Eye color	
Hair color	
Height	
Weight	
Race	
Scars, tattoos, etc.	
Education	
AFDC recipient identification if you have applied for public assistance	

Spouse's General Information:

Name	
Address	County
Phone	
Cell phone	
E-mail address	
Social Security Number	
Driver's License Number	
Date of Birth	
State of Birth	
Eye color	
Hair color	
Height	
Weight	
Race	
Scars, tattoos, etc.	
Education	
AFDC recipient identification if you have applied for public assistance	

Your Personal Habits:

Church name
Smoke
Alcohol
Drugs
Criminal Record

Spouse's Personal Habits:

Church name
Smoke
Alcohol
Drugs
Criminal Record

DIVORCE QUESTIONNAIRE

Your Employment:

Occupation
Employer
Employer's address
Work phone
Start date
hours per week
Start time: Stop time:
Hourly pay
Gross weekly income
Medical Benefits
Retirement benefits and value

Spouse's Employment:

Occupation
Employer
Employer's address
Work phone
Start date
hours per week
Start time: Stop time:
Hourly pay
Gross weekly income
Medical Benefits
Retirement benefits and value

Your Prior employment:

Former employer
Address
Dates employed
Retirement benefit & value
Plan administrator
Address
Contact person
Phone #

Spouse's Prior employment:

Former employer
Address
Dates employed
Retirement benefit & value
Plan administrator
Address
Contact person
Phone #

DIVORCE QUESTIONNAIRE

Marriage Information:

Date of Marriage
Officiant
City/Township
County
State
Date of Separation

Wife's Information:

Maiden name
Name prior to this marriage

Prior Marriages:

How many times you have been married
How many times your spouse has been married

Your Prior Marriage Information:

Name of spouse 1 2 3
Death or divorce 1 2 3
If divorce, what County 1 2 3
Date of judgment 1 2 3

Spouse's Prior Marriage Information:

Name of spouse 1 2 3
Death or divorce 1 2 3
If divorce, what County 1 2 3
Date of judgment 1 2 3

Children of the Marriage:

Name and Age 1 2 3 4 5
Date of Birth if a Minor 1 2 3 4 5
Social Security Number if a Minor 1 2 3 4 5
Special needs of any child

DIVORCE QUESTIONNAIRE

Your Other Minor Children:

Name of child 1 2 3
Date of Birth 1 2 3
Name of Parent Having Custody 1 2 3
Child Support Amount 1 2 3
Pay or Receive Support 1 2 3
Special Circumstances of any child

Spouse's Other Minor Children:

Name of child 1 2 3
Date of Birth 1 2 3
Name of Parent Having Custody 1 2 3
Child Support Amount 1 2 3
Pay or Receive Support 1 2 3
Special Circumstances of any Child

Information on any child who has been involved in a prior court case:

Name of child 1 2
Type of case (ex: adoption, divorce, support, paternity, neglect, delinquency) 1 2
County and name of judge 1 2
Active/Closed and Disposition 1 2

Medical Insurance:

Name of company and type of coverage 1 2
Name of Insured 1 2
Policy number 1 2
Total cost and cost for children alone 1 2

DIVORCE QUESTIONNAIRE

Real Property:

Is <u>Marital Residence</u> owned or leased
How long you have lived there
Other real property 1 2
Purchase price MR 1 2
Mortgagee MR 1 2
Monthly payments MR 1 2
Balance due MR 1 2
Condition of property MR 1 2
Special Circumstances

Privately Owned Life Insurance:

Name of company	H/W
1	
2	
Death benefit	cash value
1	
2	

Vehicles:

Year, make and model 1 2 3
Name of lien holder 1 2 3
Monthly payments 1 2 3
Balance Due 1 2 3
Value of Vehicle 1 2 3
Who has title 1 2 3
Who drives vehicle 1 2 3
Name of Insurance Agency

Other Assets and their value:

DIVORCE QUESTIONNAIRE

Debts:

Creditor	Balance
1	
2	
3	
4	
5	
6	
Type of Debt	
1	
2	
3	
4	
5	
6	
Monthly Payment	Obligor (H/W/joint)
1	
2	
3	
4	
5	
6	

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Relief Requested:

Custody
Parenting time
Child support
Tax exemption
Spousal support
Temporary use of home
Maiden name restored
Receive what property
You pay what bills
Spouse pays what bills