

THOMPSON, THOMPSON & GLANVILLE, PLC "NO MINOR CHILDREN" DIVORCE INTERVIEW SHEET

Date _____

Our File No. _____

Client

Full name _____

Birth date _____

Age _____

Address _____

Home phone _____

Work phone _____

Cell phone _____

Pager _____

E-mail address _____

Fax _____

Social Security no. _____

Driver's License no. _____

State _____

Occupational License no(s). _____

Armed Forces status _____

Birth place _____

Next of kin _____

Relation _____

Address _____

Spouse

Full name _____

Birth date _____

Age _____

Address _____

Home phone _____

Work phone _____

Cell phone _____

Pager _____

E-mail address _____

Fax _____

Social Security no. _____

Driver's License no. _____

State _____

Occupational License no(s). _____

Armed Forces status _____

Birth place _____

Next of kin _____

Relation _____

Address _____

MARRIAGE

Place of marriage: _____
[City/Village/Twp]

_____ [County] _____ [State/Foreign Country]

Date of marriage _____

Date of separation _____

Lived in Michigan 180 days? _____

County 10 days? _____

Wife's Maiden name _____

Wife's Name before this marriage _____

Does wife desire name change?

Yes To what? _____

No

No. of previous marriages: yours _____

spouse _____

How terminated: yours _____

spouse _____

Is there a prenuptial or postnuptial agreement?

Yes Please attach a copy of the agreement.

No

Is wife pregnant?

Yes When is birth expected?

No

CURRENT ESTATE PLAN

Do you have a will or a trust?

Yes

No

Do you have a power of attorney or health care directive?

Yes

No

PRIOR LITIGATION

Has either spouse previously filed for divorce in this county or elsewhere?

Yes Indicate when and where filed, status of case, case number, and name of judge. _____

No _____

Has there been any previous domestic relations or domestic violence case filed in this county or elsewhere involving you and/or your spouse or any other family member?

Yes Indicate when and where filed, status of case, case number, and name of judge. _____

No _____

FAMILY HEALTH AND SOCIAL ISSUES

Do you or your spouse have

- any serious physical or mental disability, disorder, handicap or incurable disease?

Yes Please explain. _____

No

- any problems with substance abuse (drugs, alcohol)?

Yes What type of drugs? _____

What treatment and by whom? _____

When? _____

Place of treatment _____

No

What physical abuse, if any, has occurred and on what dates? _____

Has either spouse ever been arrested, convicted, imprisoned, or placed on probation?

Yes Explain. _____

No

Any particular interest in another person by either party _____

Any problems with debts _____ Gambling _____

Any marriage counseling _____

Personal counseling (yours/spouse's) _____

Would you begin or continue counseling? _____

Attitudes (yours/spouse's) toward reconciliation _____

Are you or your spouse receiving ADC?

Yes Caseworker _____ Case no. _____

No

PHYSICAL INFORMATION

Physical Description of Client:

Race _____ Height _____ Weight _____ Eye color _____ Hair color _____

Glasses No Yes Worn all the time? Yes No

Mustache/beard No Yes Color _____

Distinguishing scars or tattoos _____

Any current restraining orders? _____

Physical Description of Spouse:

Race _____ Height _____ Weight _____ Eye color _____ Hair color _____

Glasses No Yes Worn all the time? Yes No

Mustache/beard No Yes Color _____

Distinguishing scars or tattoos _____

Any current restraining orders? _____

EMPLOYMENT

Client
Employer _____
Address _____
Date of hire _____
Occupation _____
Weekly gross pay _____
Weekly take home _____
Pension _____
Early retirement benefits _____
Signing bonus or any special payment _____
Profit-sharing _____
Recognition or other awards _____
Income last year _____

Spouse
Employer _____
Address _____
Date of hire _____
Occupation _____
Weekly gross pay _____
Weekly take home _____
Pension _____
Early retirement benefits _____
Signing bonus or any special payment _____
Profit-sharing _____
Recognition or other awards _____
Income last year _____

Please attach a copy of your last 3 pay stubs. Indicate if any deductions are mandatory (other than taxes), for example, union dues, pension, etc. Please attach the last 2 income tax returns (personal and business) with their schedules and W-2 forms.

Previous employer _____
Address _____
Annual income _____

Previous employer _____
Address _____
Annual income _____

Other income sources (pension, retirement, public assistance or ADC, veterans' benefits, Social Security, annuity funds):

- 1. Type (wage/dividend) _____
Gross per year _____ In whose name _____
- 2. Type (wage/dividend) _____
Gross per year _____ In whose name _____

EDUCATION

Client
Highest degree obtained _____
High school _____
Date of diploma or GED _____
Univ./College _____
Degree _____
Date obtained _____
Univ./College _____
Degree _____
Date obtained _____
Additional training _____
Did either spouse contribute to the education of the other?
 Yes Describe. _____
 No

Spouse
Highest degree obtained _____
High school _____
Date of diploma or GED _____
Univ./College _____
Degree _____
Date obtained _____
Univ./College _____
Degree _____
Date obtained _____
Additional training _____

ASSETS

(Attach additional sheets if necessary.)

A. Real property. Attach copies of deeds or land contracts for all property.

- 1. Resident address _____
Date purchased _____ Purchase price _____ Mortgage co. _____
Account no. _____ In whose name _____
Monthly payments _____ Balance due _____ Paid by Husband Wife Both
What is the fair market value of property? _____
Please attach a copy of last property tax bill. Amount of property taxes _____
Are they included in monthly payment? _____

2. Additional real estate
 Address _____
 Date purchased _____ Purchase price _____ Mortgage co. _____
 Account no. _____ In whose name _____
 Monthly payments _____ Balance due _____ Paid by Husband Wife Both
 What is the fair market value of property? _____
Please attach a copy of last property tax bill. Amount of property taxes _____
 Are they included in monthly payment? _____

B. Vehicles (car, boat, trailer, motorcycle, snowmobile, etc.)

1. Year/make _____
 Vehicle identification number _____
 In whose name _____ Possession _____ Miles/Condition _____
 Purchase price _____ Monthly payments _____
 Lien holder _____ Balance due _____
 Approximate value of car _____

2. Year/make _____
 Vehicle identification number _____
 In whose name _____ Possession _____ Miles/Condition _____
 Purchase price _____ Monthly payments _____
 Lien holder _____ Balance due _____
 Approximate value of car _____

3. Year/make _____
 Vehicle identification number _____
 In whose name _____ Possession _____ Miles/Condition _____
 Purchase price _____ Monthly payments _____
 Lien holder _____ Balance due _____
 Approximate value of car _____

4. Year/make _____
 Vehicle identification number _____
 In whose name _____ Possession _____ Miles/Condition _____
 Purchase price _____ Monthly payments _____
 Lien holder _____ Balance due _____
 Approximate value of car _____

5. Year/make _____
 Vehicle identification number _____
 In whose name _____ Possession _____ Miles/Condition _____
 Purchase price _____ Monthly payments _____
 Lien holder _____ Balance due _____
 Approximate value of car _____

C. Bank accounts or credit union accounts

1. Name of bank and branch _____
 Account number _____
 Type of account (savings, checking, money market) _____
 Signatories _____
 Source of monies _____ Balance _____

2. Name of bank and branch _____
 Account number _____
 Type of account (savings, checking, money market) _____
 Signatories _____
 Source of monies _____ Balance _____

3. Name of bank and branch _____
 Account number _____
 Type of account (savings, checking, money market) _____
 Signatories _____
 Source of monies _____ Balance _____

D. Individual retirement accounts

- 1. Financial institution _____
Account number _____ Balance _____ In whose name _____
- 2. Financial institution _____
Account number _____ Balance _____ In whose name _____

E. Retirement plans, pensions, Keoghs, 401(k) plans, profit-sharing plans, stock bonus or option plans, etc. (attach copies of plan descriptions and annual reports for each)

- 1. Employer or financial institution _____
Name and type of plan _____ Vested _____
Value _____ Account no. _____ In whose name _____
- 2. Employer or financial institution _____
Name and type of plan _____ Vested _____
Value _____ Account no. _____ In whose name _____
- 3. Employer or financial institution _____
Name and type of plan _____ Vested _____
Value _____ Account no. _____ In whose name _____

F. Corporate stocks, bonds, notes, securities, bills, brokerage accounts

- 1. Name of broker and firm holding investments _____
Type of investment _____
Account no. _____ In whose name _____
Type of account (savings, checking, money market) _____
Purchase price _____ Current value _____
What was source of stock or funds to purchase? _____

G. Patents, inventions, copyrights, etc.

H. Life insurance

| | |
|--|--|
| <i>Client</i> | <i>Spouse</i> |
| Name of insurer _____ | Name of insurer _____ |
| Name of insured _____ | Name of insured _____ |
| Name of beneficiary _____ | Name of beneficiary _____ |
| _____ | _____ |
| Type of insurance (term, whole life, etc.) _____ | Type of insurance (term, whole life, etc.) _____ |
| Policy no. _____ | Policy no. _____ |
| Amount of policy _____ | Amount of policy _____ |
| Cash surrender value _____ | Cash surrender value _____ |
| Loans against policy _____ | Loans against policy _____ |

I. Business interests (corporations, partnerships, sole proprietorships, etc.)

Name and type of business interest _____
 Type of ownership interest _____
 Value of interest _____
 Initial investment and when _____
 Additional amounts invested and when _____

J. Community property (property acquired with your spouse)

Have you ever lived in a state which has a community property law (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, or Wisconsin)?

Yes Provide details and the status of assets brought into this state. _____

No

K. Miscellaneous assets

Please describe any miscellaneous assets you or your spouse have, such as jewelry or collectibles, that have any significant monetary or emotional value: _____

L. Gifts

Have you or your spouse made any substantial gifts in the past or placed property in joint names with anyone other than the spouse?

- Yes Provide details. _____
- No

M. Trust beneficiaries

Are you or your spouse the beneficiary under any trust?

- Yes Provide details. _____
- No

N. Please list any significant assets or debts either you or your spouse had at the time of marriage.

O. Are you aware of assets being given away, sold, or hidden from you?

- Yes Briefly explain. _____
- No

LIABILITIES

Please indicate with an asterisk any accounts that you have reason to believe are delinquent.

Indebtedness (i.e., credit cards, educational loans, personal loans, etc.)

1. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____ Is the account current? Yes No
Present balance due _____ Monthly payment _____
Named borrowers _____
Who will pay until the divorce judgment? _____
2. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____ Is the account current? Yes No
Present balance due _____ Monthly payment _____
Named borrowers _____
Who will pay until the divorce judgment? _____
3. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____ Is the account current? Yes No
Present balance due _____ Monthly payment _____
Named borrowers _____
Who will pay until the divorce judgment? _____
4. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____ Is the account current? Yes No
Present balance due _____ Monthly payment _____
Named borrowers _____
Who will pay until the divorce judgment? _____
5. Creditor _____ Account no. _____
Type of indebtedness (credit card, etc.) _____ Is the account current? Yes No
Present balance due _____ Monthly payment _____
Named borrowers _____
Who will pay until the divorce judgment? _____

Delinquent indebtedness

Mortgage _____ How much? _____ How long overdue? _____

Property _____ How much? _____ How long overdue? _____

Income taxes _____ How much? _____ How long overdue? _____

Vehicle loan _____ How much? _____ How long overdue? _____

Other _____ How much? _____ How long overdue? _____

Business debts

What kind? _____ How much? _____ How long overdue? _____

Other obligations (for example, spousal support to a former spouse) _____

Is anyone other than the spouse financially dependent on you?

Yes Give details. _____

No

On your spouse?

Yes Give details. _____

No

WHAT ARE YOUR GOALS IN THIS CASE?

Divorce

Spousal support _____

Spouse to vacate home _____

Contribution to your attorney fees _____

Restoration of former name _____

Property division

Domestic abuse injunction

Health insurance _____

Mortgage payments _____

Debts _____

Other _____

PLEASE GIVE A BRIEF SUMMARY OF WHAT YOU THINK A FAIR SETTLEMENT WOULD BE:

DOCUMENTS REQUESTED

All of the items below are needed to complete your divorce case file if they apply to your case. Bring in copies or originals as soon as possible.

Items needed

- Tax returns with schedules and W-2s -- last two years
- Paycheck stubs -- last two months: You Your spouse
- Mortgage statement
- Document showing legal description
 - Marital home
 - Vacation property
 - Income property
- Last property tax bills for each property
- Pension or retirement account statement: You Your spouse
- Car titles You Your spouse
- Life insurance cash value statement
- Savings account statements
- Investment account balance statements
- Appraisal for any real estate
- Prenuptial or postnuptial agreement
- Latest credit card or other debt statements
- _____