

## INFORMATION SHEET - DOMESTIC RELATIONS CASE

It is absolutely necessary that you answer all the questions in the following pages. With this information, we are in a better position to answer your questions, to evaluate your marital and legal situation, to advise you, and to prepare the necessary legal papers. If any of the questions do not meet with your situation, pass on to the next question.

### **Your Personal Information:**

Name: \_\_\_\_\_ S.S.N. \_\_\_\_\_  
Contact Information: Telephone (home) \_\_\_\_\_ (cell) \_\_\_\_\_  
(work) \_\_\_\_\_ Email (home) \_\_\_\_\_  
(work email) \_\_\_\_\_ *(please indicate your preferred means of contact)*  
Current Address: \_\_\_\_\_  
How long at current address: \_\_\_\_\_ years  
Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Birthplace: \_\_\_\_\_  
Last schooling completed: \_\_\_\_\_  
Employer's name/address/telephone: \_\_\_\_\_  
\_\_\_\_\_  
Job title/hours: \_\_\_\_\_  
Current wage: \_\_\_\_\_ per hour \_\_\_\_\_ yearly  
How long as present employer \_\_\_\_\_ years  
Fringe benefits (health insurance, 401k, pension, etc.): \_\_\_\_\_  
\_\_\_\_\_

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### **Spouse's Personal Information:**

Spouse's name: \_\_\_\_\_ S.S.N. \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Birthplace: \_\_\_\_\_  
Prior marriages: \_\_\_\_\_  
Residence at time when married: \_\_\_\_\_  
Last schooling completed: \_\_\_\_\_  
Employer's name/address/telephone: \_\_\_\_\_  
\_\_\_\_\_  
Job title/hours: \_\_\_\_\_  
Current wage: \_\_\_\_\_ per hour \_\_\_\_\_ yearly  
How long as present employer \_\_\_\_\_ years  
Fringe benefits (health insurance, 401k, pension, etc.): \_\_\_\_\_  
\_\_\_\_\_

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**Information Regarding Marriage**

1. Date and Location of Marriage(s)(include county): \_\_\_\_\_  
\_\_\_\_\_
2. County/state of residence at time of marriage: \_\_\_\_\_
3. Date couple separated: \_\_\_\_\_
4. Your prior marriages \_\_\_\_\_  
\_\_\_\_\_ (if any, state name  
of former spouse, date of marriage and date of divorce)
5. Your Spouse's prior marriages \_\_\_\_\_  
\_\_\_\_\_ (if any, state name  
of former spouse, date of marriage and date of divorce)
6. Name of spouse's attorney (if any): \_\_\_\_\_
7. Counseling efforts made: \_\_\_\_\_
8. Would further counseling efforts be fruitful? Yes / No
9. Do you believe that the marriage irretrievably broken? Yes / No

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**Information Regarding Children**

1 Children of this marriage:

Name	Age	Date of Birth	Residing with:
_____	_____	_____	mother / father _____
_____	_____	_____	mother / father _____
_____	_____	_____	mother / father _____
_____	_____	_____	mother / father _____
_____	_____	_____	mother / father _____
_____	_____	_____	mother / father _____

2. Any special needs of children? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Any special concerns regarding custody/visitation of children? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Have visitation / custody issues been agreed upon already? Yes / No (If yes, please provide separate sheet with details of agreement)

5. Children Not from this marriage:

Name	Age	Date of Birth	Child of:
_____	_____	_____	his / hers
_____	_____	_____	his / hers
_____	_____	_____	his / hers
_____	_____	_____	his / hers
_____	_____	_____	his / hers

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**Information Regarding Assets** (if asset is owned by one party only, please indicate who owns the asset)<sup>1</sup>

1. Cash on hand: \_\_\_\_\_

2. Bank account, checking:

Acct. Title	Acct. No.	Bank	Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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<sup>1</sup>Even if you have reached an agreement on the division of property, you should complete this section of the form as we will want to be aware of all assets and debts. Please list the terms of any agreement on a separate sheet of paper.

**3. Bank account, savings:**

Acct. Title	Acct. No.	Bank	Balance

**4. Brokerage Account**

Acct. Title	Acct. No.	Bank	Balance

**5. Retirement Account**

Acct. Title	Acct. No.	Bank	Balance

**6. Other Stocks/Bonds**

Acct. Title	Acct. No.	Bank	Balance

**7. Pension or profit-sharing plan:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**8. Real estate (title):**

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**9. Automobiles (title, make, model, year, vehicle ID#, who has possession):**

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**10. Home furnishings (special concerns):** \_\_\_\_\_

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**11. Jewelry (substantial concern):** \_\_\_\_\_

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**12. Life insurance (current face and accrued values, company, names of insured and beneficiary):** \_\_\_\_\_

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**13. Other:** \_\_\_\_\_

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**Information Regarding Debts/Liabilities** (if debt is owed by only one party only, please indicate who

owes the debt)

**1. Mortgages** (please list in order of priority)

Institution	Account #	Outstanding Balance	Monthly Payment
	/	/	/
	/	/	/
	/	/	/

**2. Bank loans**

Institution	Account #	Outstanding Balance	Monthly Payment
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/

**3. Credit Cards**

Institution	Account #	Outstanding Balance	Monthly Payment
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/

**4. Other Debts**

Institution	Account #	Outstanding Balance	Monthly Payment
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/

**Information Regarding Non Marital Property** (this can include property/debt which existed prior to the marriage, and also gifts and inheritances. If the parties are in disagreement on whether an item is marital or non-marital property, please indicate which items are disputed.)

**1. Debts Prior to marriage** (this should include any student loans incurred *prior* to marriage)

**His Debts:**

Institution	Account #	Outstanding Balance	Monthly Payment
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/

**Her Debts:**

Institution	Account #	Outstanding Balance	Monthly Payment
	/	/	/
	/	/	/
	/	/	/
	/	/	/
	/	/	/

**2. Gifts, inheritances or other separate property acquired during marriage** (please list the type, source and fair market value)

**His:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Hers:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3. Property owned prior to marriage which parties claim is not part of marital assets**

**His:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Hers:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_