

Today's Date: _____

DIVORCE/SEPARATION QUESTIONNAIRE – SHORT FORM

(To be used for 1 year separate divorce or separate maintenance where parties have an agreement.)

BASIC INFORMATION

Date of Marriage: _____ Date of Separation: _____

Place of Marriage (County & State): _____

Children Born of the Marriage or Adopted (Do not include step-children):

1. Name: _____	DOB: _____
2. Name: _____	DOB: _____
3. Name: _____	DOB: _____
4. Name: _____	DOB: _____
5. Name: _____	DOB: _____

Who has the children now? _____

_____ One Year Separation (Must be separated one full year before you can file)

_____ Separate Maintenance (Legal Separation)

Last place parties lived together as Husband and Wife: _____

WIFE'S INFORMATION

Full Name: _____

Maiden Name: _____

Current Street Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ SSN: _____

Does Wife have a current valid Driver's License? _____ DL #: _____

Wife has been married how many times (Including this Marriage): _____

Wife's Race: _____ Is wife a US citizen? _____

Employer: _____ City: _____ State: _____

If Wife does not work, Why? _____

Gross Weekly Wage: _____ Does wife have retirement: _____

Amount of Retirement: _____

Is any of this retirement Pre-Marital? _____

HUSBAND'S INFORMATION

Full Name: _____
Current Street Address: _____
City: _____ State: _____ Zip: _____
Date of Birth: _____ SSN: _____
Does Husband have a current valid Driver's License? _____ DL #: _____
Husband has been married how many times (Including this Marriage): _____
Husband's Race: _____ Is husband a US citizen? _____
Employer: _____ City: _____ State: _____
If husband does not work, Why? _____
Gross Weekly Wage: _____ Does husband have retirement: _____
Amount of Retirement: _____
Is any of this retirement Pre-Marital? _____

MARITAL PROPERTY

(List any property which either you or your spouse acquired during the marriage,
regardless of whose name the title is in.)

1. House/Land/Mobile Home (address): _____
Current Value: _____ Amount still owed: _____
Bank or Mortgage Company: _____ Payment Amount: _____

2. House/Land/Mobile Home (address): _____
Current Value: _____ Amount still owed: _____
Bank or Mortgage Company: _____ Payment Amount: _____

Vehicles (cars, trucks, motorcycles)

Year	Make	Model	Mileage	Lien Holder	Current Amount Owed & Payment Amt
1.	_____	_____	_____	_____	_____ / _____
2.	_____	_____	_____	_____	_____ / _____
3.	_____	_____	_____	_____	_____ / _____
4.	_____	_____	_____	_____	_____ / _____
5.	_____	_____	_____	_____	_____ / _____

Boats, 4-Wheelers, Tractors, etc.

Description	Current Value	Lien Amount	Lien Holder
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

Stock and/or Bond Accounts

Description	Current Value	Broker
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Savings Account/Certificate of Deposit/Money Market
Bank/Credit Union/Account Number

Bank/Credit Union/Account Number	Current Value	Whose Name? H, W, J?
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Checking Accounts
Bank/Credit Union

Bank/Credit Union	Current Value	Whose Name? H, W, J?
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

List any other property or your personal property list: _____

MARITAL DEBTS

(Don't list debts listed above. List all debts incurred during marriage regardless of whose name its in.)

Finance Companies and other Loans

Name of Finance Co. & Account Number	Current Amount Owed	Debt in name of H, W, J?
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Credit Cards

Name of Card	Account Number	Current Balance	Debt in name of H, W, J?
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____

Other Marital Debt (Please describe)

1. _____
2. _____
3. _____

OTHER INFORMATION

1. Is Wife covered by Medical Insurance? _____
2. Is Husband covered by Medical Insurance? _____
3. Are Children covered by Medical Insurance? _____
 - a. If so, who pays for this insurance? _____
 - b. How much does it cost for the children only? _____
4. Does Husband have any other children? _____
 - a. If so, how many? _____
 - b. Do they live with Husband? _____
 - c. If no, does husband pay child support for these children? _____
 - d. How much per week? _____
5. Does Wife have any other children? _____
 - a. If so, how many? _____
 - b. Do they live with Wife? _____
 - c. If no, does Wife pay child support for these children? _____
 - d. How much per week? _____
6. Are any of the children of the marriage in daycare? _____
 - a. If so, how much is daycare per week? _____
 - b. What is name of daycare? _____
7. What is the agreement between you and your spouse? _____

