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**Marital Dissolution (Divorce) Client Intake Form**

**Instructions.** I look forward to assisting you towards a positive resolution of your case. To best assist me in this effort, please review and fully complete this form and return it to my office by mail, fax or email. Although we have discussed your case, to ensure that I have all the facts and nothing has been left out, I have asked below for information which I believe will be important to your case or necessary to complete the required financial disclosure forms. If you believe there is information regarding any issues or facts which I should know or are important to your case, and which I have not asked about herein, please provide that information to me, including detailed explanations about your concerns, issues which you feel should be pursued and the reasons therefor, actions you would like to take, and what you would like to achieve.

Although you may not have all the information at this time, please provide as detailed and accurate information as possible. If the information is not accurate and complete, the recommendations I make may not be appropriate for your circumstances. If an item is not applicable, please write "N/A", or if you do not know the answer, write, I do not know. Your information will be handled with sensitivity and kept in strict confidence. Don't hesitate to call or email me if you have any questions along the way.

**How you were referred to our office**

Los Angeles County Bar Association-LRS \_\_\_\_\_

Radio \_\_\_\_\_

Website (if so, which one?) \_\_\_\_\_

Other \_\_\_\_\_

**Your Personal Information**

Full Legal Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Previous Names: \_\_\_\_\_

Do you wish to restore your maiden name? (List name) \_\_\_\_\_

Address: \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

How long have you been a resident of California? \_\_\_\_\_

How long have you been a resident of Los Angeles? \_\_\_\_\_

U.S. Citizen? \_\_\_\_\_ Nationality if not a U.S. Citizen: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

The best way to communicate with me is by: \_\_\_\_\_

Emergency contact and telephone number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Are you presently a member of the U.S. Military? \_\_\_\_\_

Have you completed High School or equivalent? \_\_\_\_ If no, highest grade completed: \_\_\_\_\_

Number of years of college completed: \_\_\_\_\_ Degree obtained: \_\_\_\_\_

Number of years of graduate school completed: \_\_\_\_\_ Degree obtained: \_\_\_\_\_

Do you have professional/occupational license(s) or vocational training? If yes, please specify.

Social media account names (i.e. Facebook, Twitter): \_\_\_\_\_

Do you post regularly, and if so, on which one? \_\_\_\_\_

### **Your Spouse's Personal Information**

Full Legal Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Previous Names: \_\_\_\_\_

Address: \_\_\_\_\_

Last Prior Address: \_\_\_\_\_

How long has your spouse lived at this address? \_\_\_\_\_

How long has your spouse been a resident of California? \_\_\_\_\_

How long has your spouse been a resident of Los Angeles? \_\_\_\_\_

U.S. Citizen? \_\_\_\_\_ Nationality if not a U.S. Citizen: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Is your spouse presently a member of the U.S. Military? \_\_\_\_\_

Other party completed High School or equivalent? \_\_\_\_ If no, highest grade completed: \_\_\_\_\_

Number of years of college completed: \_\_\_\_\_ Degree obtained: \_\_\_\_\_

Number of years of graduate school completed: \_\_\_\_\_ Degree obtained: \_\_\_\_\_

Does the other party have professional/occupational license(s) or vocational training? If yes, please specify. \_\_\_\_\_

Social media account names (i.e. Facebook, Twitter): \_\_\_\_\_

Does your spouse post regularly, and if so, on which one? \_\_\_\_\_

### **Marital Information**

Date of Marriage: \_\_\_\_\_ Ceremony (City/County/State): \_\_\_\_\_

Date of Separation: \_\_\_\_\_ Explain why you chose this date of separation: \_\_\_\_\_

Do you and your spouse agree that this is the date you separated? \_\_\_\_\_

If not, explain how you disagree? \_\_\_\_\_

Are you and your spouse currently living together? \_\_\_\_\_

Is there any chance at reconciliation? \_\_\_\_\_

Was verbal or physical abuse present in your marriage? \_\_\_\_\_ If yes, briefly Describe: \_\_\_\_\_

Have you or your present spouse ever started a previous divorce action in this marriage? \_\_\_\_\_

If yes, in which county? \_\_\_\_\_

Date action was started: \_\_\_\_\_

Have you been a resident of California for the last six months and a resident of Los Angeles County for the last three months? \_\_\_\_\_

If not, please state your place of residence for the last six months \_\_\_\_\_

**CHILDREN from Present Marriage** *(If you do not have children, please skip this section)*

<u>Child's full name</u>	<u>Gender</u>	<u>Birthdate</u>	<u>Age</u>	<u>Currently Living with Whom?</u>	<u>Since what date?</u>

List each address where your children have lived for the past five (5) years starting with the most recent:

<u>Address</u>	<u>Dates at this address</u>	<u>Lived with Whom?</u>

Have you been involved in any court proceedings involving your spouse, the other parent or the child?

☐ No ☐ Yes (If yes provide the following information)

Parties: \_\_\_\_\_

Name(s) of Child(ren): \_\_\_\_\_

Date of Proceeding: \_\_\_\_\_

Type of Proceeding: \_\_\_\_\_

Do you know of any court documents given to you by the other party or filed with the court?

☐ No ☐ Yes (if yes, please make copies and return with this form)

Do you know of any person, who is not mother or father, who claims to have custody or visitation rights with any of the children listed here? ☐ No ☐ Yes (if yes, complete the following)

Name and Address of Person: \_\_\_\_\_

☐ Has physical custody ☐ Claims custody ☐ Claims visitation

Have you ever paid child support either court ordered or voluntary to Child Support Services or directly to the other parent? ☐ No ☐ Yes (if yes, attach a chronological history of payments and copies of any receipts or cancelled checks)

Is there a current pregnancy involved in this case? \_\_\_\_\_

Are any of your children in Daycare? \_\_\_\_\_ If yes, which of your children?

\_\_\_\_\_

Do you have childcare expenses? \_\_\_\_\_ If yes, monthly amount? \_\_\_\_\_

Who pays for the child care expenses? \_\_\_\_\_

Do you \_\_\_\_\_ or your spouse \_\_\_\_\_ have children from a prior marriage or relationship? Yes or No: \_\_\_\_\_ If so, what are their names and dates of birth?

\_\_\_\_\_

## **Your Employment Information**

Are you employed? \_\_\_\_\_ Full Time or Part Time? \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Title or Job Description: \_\_\_\_\_

When Job started: \_\_\_\_\_ Gross Monthly Income: \_\_\_\_\_

How many hours per week do you work?: \_\_\_\_\_ What is your hourly wage or annual salary? \_\_\_\_\_

If unemployed, date last employed: \_\_\_\_\_

If unemployed, reason not employed: \_\_\_\_\_

Are you receiving unemployment insurance, disability benefits, workers compensation or other income, and if so, what is the monthly amount and when will it cease?

\_\_\_\_\_

**Your Spouse's Employment Information**

Spouse Employed? \_\_\_\_\_ Full Time or Part Time? \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Title or Job Description: \_\_\_\_\_

When Job started: \_\_\_\_\_ Gross Monthly Income: \_\_\_\_\_

How many hours per week does your spouse work?: \_\_\_\_\_

What is your spouse's hourly wage or annual salary? \_\_\_\_\_

If unemployed, date last employed: \_\_\_\_\_

If unemployed, reason not employed: \_\_\_\_\_

Is your spouse receiving unemployment insurance, disability benefits, workers compensation or other income, and if so, what is the monthly amount and when will it cease?  
\_\_\_\_\_**Your Prior Marriage Information**

Were you previously married? \_\_\_\_\_ If not, you can skip this section.

Number of previous marriages: \_\_\_\_\_

When and where did divorce occur? \_\_\_\_\_

Are you obligated to pay spousal support to your former spouse? \_\_\_\_\_

If so, in what amount? \_\_\_\_\_ Is any amount delinquent? \_\_\_\_\_

Are you obligated to pay child support to any children of this relationship? \_\_\_\_\_

Amount? \_\_\_\_\_

Number of children: \_\_\_\_\_ Ages: \_\_\_\_\_

Is any amount delinquent? \_\_\_\_\_

Are you entitled to receive child support from a previous relationship? \_\_\_\_\_

If so, in what amount? \_\_\_\_\_ Number of children: \_\_\_\_\_

Ages: \_\_\_\_\_ Is any amount delinquent? \_\_\_\_\_

**Your Spouse's Prior Marriage Information**

Was your spouse previously married? \_\_\_\_\_ If not, you can skip this section.

Number of previous marriages: \_\_\_\_\_

When and where did divorce occur? \_\_\_\_\_

Is your spouse obligated to pay spousal support to a former spouse? \_\_\_\_\_

If so, in what amount? \_\_\_\_\_ Is any amount delinquent? \_\_\_\_\_

Is your spouse obligated to pay child support to any children of this relationship? \_\_\_\_\_

Amount? \_\_\_\_\_

Number of children: \_\_\_\_\_ Ages: \_\_\_\_\_

Is any amount delinquent? \_\_\_\_\_

Is your spouse entitled to receive child support from a previous relationship? \_\_\_\_\_

If so, in what amount? \_\_\_\_\_ Number of children: \_\_\_\_\_

Ages: \_\_\_\_\_ Is any amount delinquent? \_\_\_\_\_

**Medical Insurance**

Do you have health insurance? \_\_\_\_\_ If so, who provides it? \_\_\_\_\_

Name of insurance company: \_\_\_\_\_

Does your spouse have health insurance? \_\_\_\_\_

If so, who provides? \_\_\_\_\_

Do your children have health insurance? \_\_\_\_\_

If so, who provides? \_\_\_\_\_

Do you have dental insurance? \_\_\_\_\_ Does your spouse have dental insurance? \_\_\_\_\_

Do your children have dental insurance? \_\_\_\_\_

If so, who provides? \_\_\_\_\_

If you have health insurance coverage through your spouse's employer, will you be able to obtain health insurance through your employer after the marriage is dissolved? \_\_\_\_\_

**Tax Information**

Year you last filed taxes: \_\_\_\_\_ What was your tax filing status? Single \_\_\_\_\_

Head of Household \_\_\_\_\_ Married, filing separately \_\_\_\_\_ or Married, filing jointly with  
\_\_\_\_\_ (list name).

State within which you filed State tax returns: \_\_\_\_\_

How many dependency exemptions do you claim: \_\_\_\_\_

**Asset Information****REAL PROPERTY**

A. Family Residence Address: \_\_\_\_\_

Exact name(s) on Title: \_\_\_\_\_

1) What was the purchase price? \_\_\_\_\_

2) What was the date of acquisition? \_\_\_\_\_

3) What was the Down Payment? \_\_\_\_\_

4) What was the original Loan Amount? \_\_\_\_\_

5) What was the source(s) of the down payment? \_\_\_\_\_

6) Was any amount of the down payment made with funds either spouse had prior to marriage, or with a funds from a gift or inheritance? If so, please explain:  
\_\_\_\_\_

7) Have you re-financed? \_\_\_\_\_ If Yes-Date \_\_\_\_\_

8) Did you change the names on the deeds when you re-financed? \_\_\_\_\_

9) Have you taken out any new loans? \_\_\_\_\_ If Yes-Date \_\_\_\_\_

For \$ \_\_\_\_\_

10) Have you had the property appraised? \_\_\_\_\_

11) Please list improvements made to property and source of funds for same:  
\_\_\_\_\_

*If you have any other real property, please provide the answers to the foregoing questions on a separate sheet of paper for each piece of real property.*



**BUSINESS INTERESTS**

Name of Business: \_\_\_\_\_

Is this your or your spouse's business?: \_\_\_\_\_

What is the type of business? \_\_\_\_\_

What was the date of acquisition? \_\_\_\_\_

What is the form of entity? \_\_\_\_\_

**BANK/SAVINGS/ CREDIT UNION/CD AND OTHER DEPOSIT ACCOUNTS**

Account No. 1: Institution Name \_\_\_\_\_

Name(s) on account \_\_\_\_\_

Account Number \_\_\_\_\_

1) What was the balance as of the date of marriage? \_\_\_\_\_

2) What was the balance as of the date of separation? \_\_\_\_\_

3) What were the source(s) of funds on deposit? \_\_\_\_\_

Account No. 2: Institution Name \_\_\_\_\_

Name(s) on account \_\_\_\_\_

Account Number \_\_\_\_\_

1) What was the balance as of the date of marriage? \_\_\_\_\_

2) What was the balance as of the date of separation? \_\_\_\_\_

3) What were the source(s) of funds on deposit? \_\_\_\_\_

Account No. 3: Institution Name \_\_\_\_\_

Name(s) on account \_\_\_\_\_

Account Number \_\_\_\_\_

1) What was the balance as of the date of marriage? \_\_\_\_\_

2) What was the balance as of the date of separation? \_\_\_\_\_

3) What were the source(s) of funds on deposit? \_\_\_\_\_

Account No. 4: Institution Name \_\_\_\_\_

Name(s) on account \_\_\_\_\_

Account Number \_\_\_\_\_

1) What was the balance as of the date of marriage? \_\_\_\_\_

2) What was the balance as of the date of separation? \_\_\_\_\_

3) What were the source(s) of funds on deposit? \_\_\_\_\_

### **INVESTMENT ACCOUNTS: SECURITIES, STOCKS AND BONDS**

Name of Company: \_\_\_\_\_

Type of Investment: \_\_\_\_\_

Name(s) on Account: \_\_\_\_\_

Account Value: \_\_\_\_\_

Date of acquisition: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Type of Investment: \_\_\_\_\_

Name(s) on Account: \_\_\_\_\_

Account Value: \_\_\_\_\_

Date of acquisition: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Type of Investment: \_\_\_\_\_

Name(s) on Account: \_\_\_\_\_

Account Value: \_\_\_\_\_

Date of acquisition: \_\_\_\_\_

**LIFE INSURANCE**

Name of Life Insurance Company (#1), Account Number and holder of policy?

\_\_\_\_\_

What is the face amount? \_\_\_\_\_

What is the premium amount? \_\_\_\_\_

What were the source(s) of funds for payment of premium during marriage?

\_\_\_\_\_

What were the source(s) of funds for payment of premium during post-separation?

\_\_\_\_\_

What was the cash value of whole life insurance at the time of the marriage? \_\_\_\_\_

What was the cash value of whole life insurance at the date of separation? \_\_\_\_\_

What is the current cash value of this policy? \_\_\_\_\_

Are there any loans against this life insurance policy? \_\_\_\_\_

Who owns the policy? \_\_\_\_\_

Who is the insured party? \_\_\_\_\_

Beneficiary Information: \_\_\_\_\_

Name of Life Insurance Company (#2), Account Number and holder of policy?

\_\_\_\_\_

What is the face amount? \_\_\_\_\_

What is the premium amount? \_\_\_\_\_

What were the source(s) of funds for payment of premium during marriage?

\_\_\_\_\_

What were the source(s) of funds for payment of premium during post-separation?

\_\_\_\_\_

What was the cash value of whole life insurance at the time of the marriage? \_\_\_\_\_

What was the cash value of whole life insurance at the date of separation? \_\_\_\_\_

What is the current cash value of this policy? \_\_\_\_\_

Are there any loans against this life insurance policy? \_\_\_\_\_

Who owns the policy? \_\_\_\_\_

Who is the insured party? \_\_\_\_\_

Beneficiary Information: \_\_\_\_\_

**AUTOMOBILES AND OTHER VEHICLES (list all for both parties)**

Year, Make and Model of Vehicle: \_\_\_\_\_

License plate no.: \_\_\_\_\_

Who drives it: \_\_\_\_\_

Purchase price: \_\_\_\_\_

Down payment: \_\_\_\_\_

Source of down payment: \_\_\_\_\_

Form of title: \_\_\_\_\_

Balance due on loan or lease: \_\_\_\_\_

Year, Make and Model of Vehicle: \_\_\_\_\_

License plate no.: \_\_\_\_\_

Who drives it: \_\_\_\_\_

Purchase price: \_\_\_\_\_

Down payment: \_\_\_\_\_

Source of down payment: \_\_\_\_\_

Form of title: \_\_\_\_\_

Balance due on loan or lease: \_\_\_\_\_

Year, Make and Model of Vehicle: \_\_\_\_\_

License plate no.: \_\_\_\_\_

Who drives it: \_\_\_\_\_

Purchase price: \_\_\_\_\_

Down payment: \_\_\_\_\_

Source of down payment: \_\_\_\_\_

Form of title: \_\_\_\_\_

Balance due on loan or lease: \_\_\_\_\_

**JEWELRY, ARTWORK, COLLECTIONS OR ANY OTHER PERSONAL PROPERTY**

Identify (name, description): \_\_\_\_\_

Date acquired: \_\_\_\_\_

How was it acquired? (Purchase, gift, etc.) \_\_\_\_\_

Who has possession of the Jewelry, artwork or collection, etc.? \_\_\_\_\_

What is the value of the jewelry, artwork or collection, etc. ? \_\_\_\_\_

Do you contend that it is your separate property? \_\_\_\_\_

Identify (name, description): \_\_\_\_\_

Date acquired: \_\_\_\_\_

How was it acquired? (Purchase, gift, etc.) \_\_\_\_\_

Who has possession of the Jewelry, artwork or collection, etc.? \_\_\_\_\_

What is the value of the jewelry, artwork or collection, etc. ? \_\_\_\_\_

Do you contend that it is your separate property? \_\_\_\_\_

Identify (name, description): \_\_\_\_\_

Date acquired: \_\_\_\_\_

How was it acquired? (Purchase, gift, etc.) \_\_\_\_\_

Who has possession of the Jewelry, artwork or collection, etc.? \_\_\_\_\_

What is the value of the jewelry, artwork or collection, etc. ? \_\_\_\_\_

Do you contend that it is your separate property? \_\_\_\_\_

Identify (name, description): \_\_\_\_\_

Date acquired: \_\_\_\_\_

How was it acquired? (Purchase, gift, etc.) \_\_\_\_\_

Who has possession of the Jewelry, artwork or collection, etc.? \_\_\_\_\_

What is the value of the jewelry, artwork or collection, etc. ? \_\_\_\_\_

Do you contend that it is your separate property? \_\_\_\_\_

Identify (name, description): \_\_\_\_\_

Date acquired: \_\_\_\_\_

How was it acquired? (Purchase, gift, etc.) \_\_\_\_\_

Who has possession of the Jewelry, artwork or collection, etc.? \_\_\_\_\_

What is the value of the jewelry, artwork or collection, etc. ? \_\_\_\_\_

Do you contend that it is your separate property? \_\_\_\_\_

**RETIREMENT BENEFITS: 401(k), IRA, Pensions, Annuities, Deferred Compensation, etc.)**

**[List accounts of both parties]**

Type: \_\_\_\_\_ Name: \_\_\_\_\_

Account Number: \_\_\_\_\_ Owner: \_\_\_\_\_

Value: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

Date Plan commenced: \_\_\_\_\_

Have you borrowed any funds against the plan? If yes, please explain: \_\_\_\_\_

If your dissolution proceeding has already commenced, has the plan been joined to the Dissolution Action? \_\_\_\_\_

Type: \_\_\_\_\_ Name: \_\_\_\_\_

Account Number: \_\_\_\_\_ Owner: \_\_\_\_\_

Value: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

Date Plan commenced: \_\_\_\_\_

Have you borrowed any funds against the plan? If yes, please explain: \_\_\_\_\_

If your dissolution proceeding has already commenced, has the plan been joined to the Dissolution Action? \_\_\_\_\_

Type: \_\_\_\_\_ Name: \_\_\_\_\_

Account Number: \_\_\_\_\_ Owner: \_\_\_\_\_

Value: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

Date Plan commenced: \_\_\_\_\_

Have you borrowed any funds against the plan? If yes, please explain: \_\_\_\_\_

If your dissolution proceeding has already commenced, has the plan been joined to the Dissolution Action? \_\_\_\_\_

Type: \_\_\_\_\_ Name: \_\_\_\_\_

Account Number: \_\_\_\_\_ Owner: \_\_\_\_\_

Value: \_\_\_\_\_ Beneficiary: \_\_\_\_\_

Date Plan commenced: \_\_\_\_\_

Have you borrowed any funds against the plan? If yes, please explain: \_\_\_\_\_

If your dissolution proceeding has already commenced, has the plan been joined to the Dissolution Action? \_\_\_\_\_

### **EMPLOYEE BENEFITS:**

Do you or your spouse have stock options? If so, please provide all information you have regarding the stock options: \_\_\_\_\_

Do you or your spouse have a Deferred Compensation Plan? \_\_\_\_\_

Do you or your spouse receive bonuses, overtime or any other employee benefit?

\_\_\_\_\_

### **MISCELLANEOUS**

Do you or your spouse have an interest in intellectual property such as writings, copyrights, patents? If so, describe: \_\_\_\_\_

Do you or your spouse have any contract rights or royalties? \_\_\_\_\_

Do you or your spouse belong to any social clubs, athletic clubs, or the like? If so, please list: \_\_\_\_\_

Are either you or your spouse a party to any kind of lawsuit, or court related proceeding, other than this dissolution of marriage? If so, please state the name of the case, case number, and location of the case: \_\_\_\_\_

Do you or your spouse have any current pending business opportunities? If so, please describe? \_\_\_\_\_

Do you or your spouse have any future expectations for business opportunities? If so, please explain? \_\_\_\_\_

Do you and your spouse have a pre-marital agreement? \_\_\_\_\_ If so, please provide a copy.

Do you and your spouse have any agreements, written or otherwise, regarding your marriage, community property, assets, or debts? \_\_\_\_\_

## **Expenses**

### **YOUR AVERAGE MONTHLY EXPENSES**

a. Home:

(1) Rent \_\_\_\_\_ or Mortgage \_\_\_\_\_ If mortgage: Principal: \$ \_\_\_\_\_

Interest: \$ \_\_\_\_\_ ***(Be sure to list the principal vs. interest payment; if it is not reflected separately on your statement, please contact your lender for this information)***

(2) Real property taxes: \$ \_\_\_\_\_

(3) Homeowner's or renter's insurance \$ \_\_\_\_\_

(4) Maintenance and Repair \$ \_\_\_\_\_

b. Monthly Health Insurance premiums for child(ren) \_\_\_\_\_

Monthly Health Insurance premiums for you \_\_\_\_\_

Name, address of Insurance Company \_\_\_\_\_

Health-care costs not paid by insurance \$ \_\_\_\_\_ (prescriptions, co-pays, etc.)

c. Child care \$ \_\_\_\_\_

d. Groceries \$ \_\_\_\_\_

e. Eating out \$ \_\_\_\_\_

f. Utilities (gas, electric, water, trash) \$ \_\_\_\_\_

g. Telephone, cell phone, and e-mail \$ \_\_\_\_\_



h. Laundry and Cleaning \$ \_\_\_\_\_

i. Clothes \$ \_\_\_\_\_

j. Education \$ \_\_\_\_\_

k. Entertainment, gifts and vacation \$ \_\_\_\_\_

l. Auto expenses and transportation

(Insurance, gas, repairs, bus, etc.) \$ \_\_\_\_\_

m. Insurance (life, accident, etc.; do not include

auto, home or health insurance) \$ \_\_\_\_\_

n. Savings and investments \$ \_\_\_\_\_

o. Charitable contributions \$ \_\_\_\_\_

p. Union Dues \$ \_\_\_\_\_

q. Monthly installment payments such as for credit cards, car payment, student loans, etc.

To/Payee	Purpose:	Amount:	Balance:	Date of last Pmt:

r. Other regular monthly expenses not listed above:

To/Payee:	Purpose:	Monthly Pmt.

**Debt Information****MORTGAGES**

Lender: \_\_\_\_\_ Loan Number: \_\_\_\_\_

Loan Amount: \_\_\_\_\_ Amount Remaining: \_\_\_\_\_

Monthly Payment Amount and Due Date: \_\_\_\_\_

Lender: \_\_\_\_\_ Loan Number: \_\_\_\_\_

Loan Amount: \_\_\_\_\_ Amount Remaining: \_\_\_\_\_

Monthly Payment Amount and Due Date: \_\_\_\_\_

**OTHER DEBTS (Include all credit cards, loans, etc. in either spouse's name)**

Lender/Creditor: \_\_\_\_\_ Amount: \_\_\_\_\_

Account Number: \_\_\_\_\_ Debt Description: \_\_\_\_\_

Debt is in the name of: \_\_\_\_\_

Do you contend that this debt or any part of this debt is the responsibility of solely your spouse? \_\_\_\_\_

If so, explain why: \_\_\_\_\_

Lender/Creditor: \_\_\_\_\_ Amount: \_\_\_\_\_

Account Number: \_\_\_\_\_ Debt Description: \_\_\_\_\_

Debt is in the name of: \_\_\_\_\_

Do you contend that this debt or any part of this debt is the responsibility of solely your spouse? \_\_\_\_\_

If so, explain why: \_\_\_\_\_

Lender/Creditor: \_\_\_\_\_ Amount: \_\_\_\_\_

Account Number: \_\_\_\_\_ Debt Description: \_\_\_\_\_

Debt is in the name of: \_\_\_\_\_

Do you contend that this debt or any part of this debt is the responsibility of solely your spouse? \_\_\_\_\_

If so, explain why: \_\_\_\_\_

Lender/Creditor: \_\_\_\_\_ Amount: \_\_\_\_\_

Account Number: \_\_\_\_\_ Debt Description: \_\_\_\_\_

Debt is in the name of: \_\_\_\_\_

Do you contend that this debt or any part of this debt is the responsibility of solely your spouse? \_\_\_\_\_

If so, explain why: \_\_\_\_\_

Lender/Creditor: \_\_\_\_\_ Amount: \_\_\_\_\_

Account Number: \_\_\_\_\_ Debt Description: \_\_\_\_\_

Debt is in the name of: \_\_\_\_\_

Do you contend that this debt or any part of this debt is the responsibility of solely your spouse? \_\_\_\_\_

If so, explain why: \_\_\_\_\_

Lender/Creditor: \_\_\_\_\_ Amount: \_\_\_\_\_

Account Number: \_\_\_\_\_ Debt Description: \_\_\_\_\_

Debt is in the name of: \_\_\_\_\_

Do you contend that this debt or any part of this debt is the responsibility of solely your spouse? \_\_\_\_\_

If so, explain why: \_\_\_\_\_

**Miscellaneous Child Care Duties** *Complete this section only if there is, or you believe there may be a dispute over child custody.*

<b><u>Child-Related Duties</u></b>	<b><u>Your %</u></b>	<b><u>Other parent %</u></b>
Bathing		
Preparing meals		
Putting children to bed		

<b><u>Child-Related Duties</u></b>	<b><u>Your %</u></b>	<b><u>Other parent %</u></b>
Getting them up in the morning		
Getting them ready in the morning		
Feeding		
Dressing		
Laundry		
Making sure they are well-equipped for school/day care		
Helping with homework		
Supervising brushing teeth		
Grooming (hair/nails)		
Reading to them or with them		
Getting them to and from school events		
Getting them to and from extracurricular/sporting activities		
Parent-teacher meetings		
Discipline/teaching manners		
Rewarding them for good grades/conduct in school		
Making doctor and dentist appts.		
Attending doctor and dentist appts.		
Grocery shopping		
Shopping for their clothes		
Taking them to and from daycare/child care		
Other (please specify)		

## **Reimbursements**

If you have been paying for community obligations since you and your spouse separated (such as mortgage, insurance, debts, car payments, etc.), you may be able to obtain reimbursement for those payments. However, we will need evidence of the payment such as the negotiated check or the bank statement which specifically shows the payee name, amount and date. **It is extremely difficult and can be very costly to collect these documents months or years after the payments.** Therefore, it is important for you to maintain these documents as you make the payments. Please also keep a ledger of the payments you are making to go with the documentary proof.

## **What Specific Requests are you making with Regard to the Following?:**

**Child Custody:** (Check the appropriate statement)

Joint physical custody \_\_\_\_\_ Sole physical custody \_\_\_\_\_ Visitation for: \_\_\_\_\_

Joint legal custody \_\_\_\_\_ Sole legal custody \_\_\_\_\_ *(legal custody is the right to make decisions regarding the health, education and welfare of your child/children)*

What is your current parenting schedule, if any (i.e. how are you currently sharing custody)?:

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I would like the following parenting schedule:

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**Spousal Support:** (Check the appropriate statement)

I am requesting that my spouse pay me spousal support \_\_\_\_\_

I agree to pay spousal support to my spouse (for at least some period of time) \_\_\_\_\_

I do not agree to pay any support to my spouse given our respective financial circumstances \_\_\_\_\_

Neither my spouse or I are requesting current support from the other \_\_\_\_\_

**Separate Property:**

List all property which you believe should be awarded to you as your separate property:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Please list any other pertinent information you want me to know about your income/property/spouse and/or your children:**

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**DOCUMENTS TO PROVIDE TO ME AS SOON AS POSSIBLE:**

Your last 3 years tax returns and your pay stubs for the last 2 months.

Any court documents relating to you, your spouse, or your children, including any agreements.

Copies of all deeds, your most recent mortgage statement and property tax statements.

Copies of all closing documents for real property purchases, sales, and refinances.

Copies of your most recent statements for all bank accounts/investment accounts/retirement accounts, as well as copies of all these documents from at or about the date of separation.

Copies of all title and/or ownership documents for personal property (i.e. automobiles) such as pink slips.

Copies of your most recent credit card statements, as well as copies of all these documents from at or about the date of separation.

All life insurance documents in your possession.

Inventory of safe deposit box contents.

Inventory of any personal safes.

Any prenuptial or postnuptial agreement.

Copies of all loan applications made in the last 3 years.

Reimbursement information as detailed above.

Any agreements between you and your spouse.

Any loan documents not set forth above.

Any other documents you believe I should review.