

DISSOLUTION OF MARRIAGE QUESTIONNAIRE

Please complete the following questionnaire. The information is necessary for the attorney to accurately and competently handle your case. Your responses are protected by attorney/client privilege and will be held in strict confidence.

DATE: _____

1. NAME: _____
First Name
Middle
Last Name

2. OPPOSING PARTY’S NAME: _____

3. YOUR SOCIAL SECURITY NUMBER: _____
 YOUR DATE OF BIRTH: _____

OPPOSING PARTY’S SOCIAL SECURITY NUMBER: _____
 OPPOSING PARTY’S DATE OF BIRTH: _____

4. HOW LONG HAVE YOU LIVED IN FLORIDA? _____

5. DATE OF MARRIAGE: _____
 PLACE OF MARRIAGE: _____

6. COUNTY AND STATE WHERE YOU AND THE OPPOSING PARTY
 LAST LIVED TOGETHER AS HUSBAND AND WIFE: _____

7. DATE OF SEPARATION: _____

8. REASON FOR SEPARATION: _____

9. HAS A DISSOLUTION OF MARRIAGE
 ALREADY BEEN FILED? YES NO
 If yes, in what county and state? _____

A. HAVE YOU BEEN SERVED WITH
 LEGAL PAPERS? YES NO
 Do you have copies of the document with you? YES NO
 If you do not have the documents with you,
 Do you have the case number? YES NO
 If yes, please provide: _____

B. HAVE YOU HIRED A PRIOR ATTORNEY FOR THIS MATTER? YES NO
If yes, name: _____
May we contact your prior attorney? YES NO

10. ADDRESS WHERE YOU CAN BE SERVED WITH LEGAL PAPERS:

11. ADDRESS WHERE THE OPPOSING PARTY CAN BE SERVED WITH LEGAL PAPERS: _____

12. DOES THE OPPOSING PARTY HAVE AN ATTORNEY? YES NO UNKNOWN

If known, attorney's name: _____

13. CHILDREN BORN OR ADOPTED DURING THE MARRIAGE:

<u>NAME</u>	<u>DATE OF BIRTH</u>	<u>SEX</u>	<u>CURRENTLY LIVING WITH MOTHER/FATHER/OTHER</u>
_____	_____	_____	_____
_____	_____	_____	_____

CHILDREN BORN OR ADOPTED FROM ANOTHER RELATIONSHIP:

<u>NAME</u>	<u>DATE OF BIRTH</u>	<u>SEX</u>	<u>CURRENTLY LIVING WITH MOTHER/FATHER/OTHER</u>
_____	_____	_____	_____
_____	_____	_____	_____

14. CHILD SUPPORT

ARE YOU ORDERED/PAYING CHILD SUPPORT FOR CHILDREN FROM ANOTHER RELATIONSHIP? YES NO

If yes, how much per month? _____

ARE YOU RECEIVING CHILD SUPPORT FOR CHILDREN FROM ANOTHER RELATIONSHIP? YES NO

If yes, how much per month? _____

15. ARE YOU PARTICIPATING IN COUNSELING? YES NO
If yes, with whom? _____
- DO YOU HAVE A DRUG OR ALCOHOL PROBLEM? YES NO
If yes, are you participating in Alcoholics
Anonymous or Narcotics Anonymous? YES NO
- ARE THE OPPOSING PARTY AND/OR CHILDREN
PARTICIPATING IN COUNSELING? YES NO
If yes, with whom? _____
- DOES THE OPPOSING PARTY HAVE A DRUG
OR ALCOHOL PROBLEM? YES NO
If yes, is the opposing party participating in Alcoholics
Anonymous or Narcotics Anonymous? YES NO
16. IN WHAT STATES HAVE YOUR CHILDREN RESIDED IN DURING
THE LAST SIX (6) MONTHS? _____
Where do the children presently live? _____
17. ARE YOU EXPECTING A CHILD? YES NO
If yes, is the expected child from the marriage relationship? YES NO
- If expected child is of a relationship outside of this marriage, who
Is the other biological parent? _____
18. YOUR PLACE OF EMPLOYMENT: _____
ADDRESS: _____

19. YOUR YEARLY INCOME: _____
Weekly income, if yearly income unknown: _____
20. OPPOSING PARTY'S PLACE OF EMPLOYMENT: _____
ADDRESS: _____

21. OPPOSING PARTY'S YEARLY INCOME: _____
Weekly income, if yearly income unknown: _____

22. ASSETS:

A. **MARITAL HOME**

Address: _____
Date Purchased: _____
Purchase Price: _____
Current Fair Market Value: _____
Current Mortgage/Credit Line Balance(s): _____
Name(s) on the Deed: _____

B. **OTHER REAL ESTATE**

Address: _____
Date Purchased: _____
Purchase Price: _____
Current Fair Market Value: _____
Current Mortgage/Credit Line Balance(s): _____
Name(s) on the Deed: _____

C. **TRANSPORTATION (Cars, Trucks, Motorcycles, Boats, etc.)**

What vehicle do you drive?

MAKE/YEAR: _____
Date Purchased: _____
Purchase Price: _____
Current Fair Market Value: _____
Current Loan Balance: _____
Name(s) on the Title: _____

What vehicle does the opposing party drive?

MAKE/YEAR: _____
Date Purchased: _____
Purchase Price: _____
Current Fair Market Value: _____
Current Loan Balances: _____
Name(s) on the Title: _____

D. **ADDITIONAL TRANSPORTATION**

MAKE/YEAR: _____
Date Purchased: _____
Purchase Price: _____
Current Fair Market Value: _____
Current Loan Balance: _____
Name(s) on the Title: _____

E. ADDITIONAL TRANSPORTATION

MAKE/YEAR: _____
 Date Purchased: _____
 Purchase Price: _____
 Current Fair Market Value: _____
 Current Loan Balance: _____

F. OTHER ITEMS OF SIGNIFICANT VALUE: (ART, TOOLS, COLLECTIONS, ETC.)

ITEM	VALUE
_____	_____
_____	_____
_____	_____
_____	_____

G. INTANGIBLE ASSETS:

CASH ON HAND: _____
 BANK ACCOUNTS: _____

 STOCKS, BONDS, MONEY MARKETS: _____

 IRA'S OR OTHER RETIREMENT OR PENSION PLANS: _____

23. NON-MARITAL ASSETS: [Defined as assets acquired outside the marriage – such as gifts, inheritances, items owned prior to marriage, etc.] List any items, approximate values, and circumstances under which each item was acquired:

ITEM	VALUE	CIRCUMSTANCES
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

24. DO YOU FEAR THE OPPOSING PARTY WILL DISPOSE OR ATTEMPT TO HIDE MARITAL ASSETS? YES NO

If yes, why: _____

25. DO YOU EXPECT CUSTODY TO BE CONTESTED? YES NO
If yes, why: _____

26. DO YOU EXPECT VISITATION TO BE A PROBLEM? YES NO
If yes, why: _____

27. IS THE OPPOSING PARTY VIOLENT TO YOU OR
YOUR CHILDREN? YES NO
If yes, explain: _____

HAVE PETITION(S) FOR DOMESTIC
VIOLENCE BEEN FILED? YES NO
If yes, how many? _____

HAVE PETITIONS FILED BEEN
DISMISSED BY A JUDGE? YES NO
If yes, how many? _____

28. ARE YOU CURRENTLY COVERED
BY HEALTH INSURANCE? YES NO
Through whom? [My Employment] [Opposing Party's Employment]
Does this insurance cover the entire family? YES NO

29. DO YOU WANT YOUR FORMER NAME
RESTORED TO YOU? YES NO
If yes, clearly print your full name [include middle name]:

HAVE YOU EVER FILED BANKRUPTCY? YES NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO
TYPE(S) OF CRIME(S) [Circle applicable]: FELONY MISEMEANOR
Please explain: _____

HAS THE OPPOSING PARTY EVER BEEN
CONVICTED OF A CRIME? YES NO
TYPE(S) OF CRIME(S): [Circle applicable]: FELONY MISDEMEANOR
Please explain: _____

30. LIABILITIES:

MEDICAL BILLS: _____

CREDIT CARDS: _____

MORTGAGES: _____

OTHER DEBTS: _____

Additional Information: _____

Words of Wisdom to Divorcing Parents

“Your children have come into this world because of the two of you. Perhaps you two made lousy choices as to whom you decided to be the other parent. If so, this is your problem and your fault.”

“No matter what you think of the other party—or what your family thinks of the other party—these children are one half of each of you.”

“Remember that—because every time you tell your child what an “idiot” his father is, or what a “fool” his mother is, or how bad the absent parent is, or what terrible things that person has done, you are telling the child that half of him is bad.”

“That is an unforgivable thing for a child. That is not love. That is possession. If you do that to your children, you will destroy them as surely as if you had cut them into pieces, because that is what you are doing to his emotions.”

“I sincerely hope that you do not do that to your children. Think more about your children, and less about yourselves. And make yours a selfless kind of love, not foolish or selfish, or your children will suffer.”

The Hon. Michael J. Haas
Cass County, Minnesota
(Taken from the official
transcript of a divorce proceeding)