

DIVORCE QUESTIONNAIRE

Date: _____

Please complete this questionnaire as completely and accurately as you can. Where appropriate, provide documents, receipts and other supporting information separately. **All information that you provide will be held in strict confidence.**

1. Personal Information.

a. Name: _____

b. Date of birth: _____

c. Place of birth: _____

d. Social Security Number: _____

e. Driver's License Number: _____

f. Email addresses: _____

g. May we communicate with you via email? (Please be sure that your email is secure and protected from your spouse): _____

h. How do you prefer that we communicate with you? _____

2. Where are you living now?

a. Address: _____

b. City, State, Zip: _____

c. May we send mail to you at this address? (Please ensure that your mail is secure and protected from your spouse): _____

3. What are your telephone numbers?

a. Home: (_____) _____ - _____ ext. _____

b. Cell: (_____) _____ - _____ ext. _____

c. Work: (_____) _____ - _____ ext. _____

d. Which number do you prefer that we to contact you? _____

IMPORTANT: How can we contact you at all times? (Relative or friend who can always locate you):

Name: _____

Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

4. Please complete the following concerning your employment.

a. Employer: _____

b. Length of employment: _____

c. Job Title: _____

d. Street Address: _____

e. City, State, Zip: _____

f. Telephone number: _____

g. Gross salary per month or annually: \$_____ (per _____)

IMPORTANT: Please provide your last 3 paycheck stubs, most recent W-2 and tax return.

5. Describe your education (schools attended, dates attended, degrees obtained):

6. Please give your spouse's full name, date and place of birth, and Social Security number.

a. Name: _____

b. Date of birth: _____

c. Place of birth: _____

d. Social Security Number: _____

e. Driver's License Number: _____

7. Where is your spouse presently living and what is your spouse's telephone number?

a. Address: _____

b. City, State, Zip: _____

c. Residence telephone number: _____

8. Complete the following concerning your spouse's employment.

a. Employer: _____

b. Job Title: _____

c. Street Address: _____

d. City, State, Zip: _____

e. Telephone number: _____

f. Spouse's gross salary per month or annually: \$_____ (per _____)

g. Length of spouse's employment: _____

9. Describe your spouse's education (schools attended, dates attended, degrees obtained):

10. Please give the date and place of your marriage.

Date: _____

City, State: _____

11. Please give the full name, date and place of birth, sex, Social Security number, and driver's license number of each child of this marriage.

A. NAME: _____

SEX: _____

BIRTHPLACE: _____ BIRTH DATE: _____

DRIVER'S LICENSE NO: _____ STATE: _____

SOCIAL SECURITY NUMBER: _____

B. NAME: _____
SEX: _____
BIRTHPLACE: _____ BIRTH DATE: _____
DRIVER'S LICENSE NO: _____ STATE: _____
SOCIAL SECURITY NUMBER: _____

C. NAME: _____
SEX: _____
BIRTHPLACE: _____ BIRTH DATE: _____
DRIVER'S LICENSE NO: _____ STATE: _____
SOCIAL SECURITY NUMBER: _____

D. NAME: _____
SEX: _____
BIRTHPLACE: _____ BIRTH DATE: _____
DRIVER'S LICENSE NO: _____ STATE: _____
SOCIAL SECURITY NUMBER: _____

E. NAME: _____
SEX: _____
BIRTHPLACE: _____ BIRTH DATE: _____
DRIVER'S LICENSE NO: _____ STATE: _____
SOCIAL SECURITY NUMBER: _____

12. Are you now separated from your spouse? _____
If so, give the date of separation. _____

13. Which spouse will live in the family home during the divorce? _____
Who will pay for the house? _____

14. Have you or your spouse seen any marriage counselors? _____
If so, give name, address and telephone: _____

15. What is your religious preference? _____
What is your spouse's religious preference? _____
What is the religious preference for the children? _____

16. Check as appropriate if your marital difficulties involve any of the following:

- Drugs/alcohol
- Physical violence
- Sexual dysfunction
- Religion
- Sexual infidelity
- Financial disputes
- Other:

17. Will there be a dispute over custody of the children? _____

a. If not, custody who will have primary custody? _____

b. Should there be a geographical restriction on where the children will live? If so, please state the geographical area that the children's residence should be restricted to:

18. Where are the children living at this time?

19. List any property (other than furniture, clothing and toys) owned by the children.

20. How long have you lived in Texas? _____

21. What county do you reside in and how long there? _____

22. Have you or your spouse ever filed for a divorce? _____ If so, when and where?

23. Does your spouse now have an attorney? _____ If so, name and telephone number?

24. Have you been married before? _____

If so, how many times? _____

25. Do you have children by a previous marriage? _____

If so, give full name, date and place of birth, and sex of each child of your previous marriages.

A. NAME: _____

SEX: _____

BIRTHPLACE: _____ BIRTH DATE: _____

DRIVER'S LICENSE NO: _____ STATE: _____

SOCIAL SECURITY NUMBER: _____

B. NAME: _____

SEX: _____

BIRTHPLACE: _____ BIRTH DATE: _____

DRIVER'S LICENSE NO: _____ STATE: _____

SOCIAL SECURITY NUMBER: _____

C. NAME: _____

SEX: _____

BIRTHPLACE: _____ BIRTH DATE: _____

DRIVER'S LICENSE NO: _____ STATE: _____

SOCIAL SECURITY NUMBER: _____

D. NAME: _____

SEX: _____

BIRTHPLACE: _____ BIRTH DATE: _____

DRIVER'S LICENSE NO: _____ STATE: _____

SOCIAL SECURITY NUMBER: _____

With whom do these children reside: _____

26. Do you pay/receive child support? _____

If so, how much? \$_____ per _____

27. Has your spouse been married before? _____

If so, how many times? _____

28. Does your spouse have children by a previous marriage? _____

If so, give full name, date and place of birth, and sex of each child of spouse's previous marriages.

A. NAME: _____

SEX: _____

BIRTHPLACE: _____ BIRTH DATE: _____

DRIVER'S LICENSE NO: _____ STATE: _____

SOCIAL SECURITY NUMBER: _____

B. NAME: _____

SEX: _____

BIRTHPLACE: _____ BIRTH DATE: _____

DRIVER'S LICENSE NO: _____ STATE: _____

SOCIAL SECURITY NUMBER: _____

C. NAME: _____

SEX: _____

BIRTHPLACE: _____ BIRTH DATE: _____

DRIVER'S LICENSE NO: _____ STATE: _____

SOCIAL SECURITY NUMBER: _____

D. NAME: _____

SEX: _____

BIRTHPLACE: _____ BIRTH DATE: _____

DRIVER'S LICENSE NO: _____ STATE: _____

SOCIAL SECURITY NUMBER: _____

With whom do these children reside? _____

29. Does your spouse pay/receive child support? _____

If so, how much? \$_____ per _____

30. If a divorce is granted, should the wife's maiden or prior name be restored? _____

If so, what is the exact name to be used? _____

SUMMARY OF PROPERTY (Please provide any deeds, titles, appraisals, statements of account or other documents in your possession regarding your property)

**Note: a more detailed description of your property must be provided in a Sworn Inventory.

Real Estate:

1. Address: _____

Mortgage company: _____

Estimated fair market value: \$ _____

Date purchased: _____

Current mortgage balance: \$ _____

Monthly payments: \$ _____

Legal description of the property:

2. Address: _____

Mortgage company: _____

Estimated fair market value: \$ _____

Date purchased: _____

Current mortgage balance: \$ _____

Monthly payments: \$ _____

Legal description of the property:

3. Address: _____

Mortgage company: _____

Estimated fair market value: \$ _____

Date purchased: _____

Current mortgage balance: \$ _____

Monthly payments: \$ _____

Legal description of the property:

**Attach additional sheets, if necessary.

Motor Vehicles, Boats, Airplanes, Cycles, Trailers:

1. Year: _____ Make: _____ Model: _____

Who drives? _____ Vehicle Identification No. _____

Mortgage with: _____ Account No. _____

Amount owed: \$ _____ Payment amount: \$ _____

Present market value: \$ _____ How determined? _____

2. Year: _____ Make: _____ Model: _____

Who drives? _____ Vehicle Identification No. _____

Mortgage with: _____ Account No. _____

Amount owed: \$ _____ Payment amount: \$ _____

Present market value: \$ _____ How determined? _____

3. Year: _____ Make: _____ Model: _____

Who drives? _____ Vehicle Identification No. _____

Mortgage with: _____ Account No. _____

Amount owed: \$ _____ Payment amount: \$ _____

Present market value: \$ _____ How determined? _____

4. Year: _____ Make: _____ Model: _____

Who drives? _____ Vehicle Identification No. _____

Mortgage with: _____ Account No. _____

Amount owed: \$ _____ Payment amount: \$ _____

Present market value: \$ _____ How determined? _____

5. Year: _____ Make: _____ Model: _____

Who drives? _____ Vehicle Identification No. _____

Mortgage with: _____ Account No. _____

Amount owed: \$ _____ Payment amount: \$ _____

Present market value: \$ _____ How determined? _____

**Attach additional sheets, if necessary.

Bank Accounts, Savings Accounts, C.D.'s, Credit Union, Savings Bonds:

1. Name of Institution: _____

Type of account (bank, savings, etc): _____

Account Name: _____ Account No. _____

Amount currently in account: \$ _____

Names on account: _____

2. Name of Institution: _____

Type of account (bank, savings, etc): _____

Account Name: _____ Account No. _____

Amount currently in account: \$ _____

Names on account: _____

3. Name of Institution: _____

Type of account (bank, savings, etc): _____

Account Name: _____ Account No. _____

Amount currently in account: \$ _____

Names on account: _____

4. Name of Institution: _____

Type of account (bank, savings, etc): _____

Account Name: _____ Account No. _____

Amount currently in account: \$ _____

Names on account: _____

5. Name of Institution: _____

Type of account (bank, savings, etc): _____

Account Name: _____ Account No. _____

Amount currently in account: \$ _____

Names on account: _____

6. Name of Institution: _____

Type of account (bank, savings, etc): _____

Account Name: _____ Account No. _____

Amount currently in account: \$ _____

Names on account: _____

Life Insurance:

1. Name of company: _____

Insuring Life of: _____

Type of policy (term, whole life, etc.): _____ Cash value: \$ _____

2. Name of company: _____

Insuring Life of: _____

Type of policy (term, whole life, etc.): _____ Cash value: \$ _____

3. Name of company: _____

Insuring Life of: _____

Type of policy (term, whole life, etc.): _____ Cash value: \$ _____

Stocks, Mutual Funds, Bonds, Securities:

1. Name of investment: _____

Number of shares owned: _____ Present value: \$ _____

2. Name of investment: _____

Number of shares owned: _____ Present value: \$ _____

3. Name of investment: _____

Number of shares owned: _____ Present value: \$ _____

4. Name of investment: _____

Number of shares owned: _____ Present value: \$ _____

5. Name of investment: _____

Number of shares owned: _____ Present value: \$ _____

6. Name of investment: _____

Number of shares owned: _____ Present value: \$ _____

**Attach additional sheets, if necessary

Retirement, Pensions, Other Company Benefits:

1. Do you participate in any retirement plan? _____

Name of the plan: _____

Address of plan: _____

Account No.: _____ Beneficiary: _____

Current value of retirement account: \$ _____

Is any portion of the plan your separate property? _____ Date plan started: _____

2. Does your spouse participate in any retirement plan? _____

Name of the plan: _____

Address of plan: _____

Account No.: _____ Beneficiary: _____

Current value of retirement account: \$ _____

Is any portion of the plan your separate property? _____ Date plan started: _____

Other

1. Does anyone owe you or your spouse any money? _____

If so, how much \$ _____

Owed by whom? _____

2. Are you or your spouse involved in any lawsuits? _____

If so, describe: _____

3. Do you own any livestock or mineral interests? _____

If so, describe: _____

4. Do you belong to any clubs with an equity interest? _____

If so, describe: _____

Debts: (Other than house and/or automobiles. For example, credit card debt or personal loans)

1. Name of creditor: _____

Account No. _____ Amount owed: \$ _____ Min. payment: \$ _____

2. Name of creditor: _____

Account No. _____ Amount owed: \$ _____ Min. payment: \$ _____

3. Name of creditor: _____

Account No. _____ Amount owed: \$ _____ Min. payment: \$ _____

4. Name of creditor: _____

Account No. _____ Amount owed: \$ _____ Min. payment: \$ _____

5. Name of creditor: _____

Account No. _____ Amount owed: \$ _____ Min. payment: \$ _____

6. Name of creditor: _____

Account No. _____ Amount owed: \$ _____ Min. payment: \$ _____

Income Tax:

Have you filed for all previous years? _____ Joint or separate? _____

Prepared by whom? _____

Refund received/expected? _____ If so, how much? \$ _____

Separate Property:

Do you own any separate property (owned before marriage or received during marriage by gift or inheritance)? _If so, detail your separate property:

1. Description: _____

a. How acquired? _____ b. Date acquired? _____

2. Description: _____

a. How acquired? _____ b. Date acquired? _____

3. Description: _____

a. How acquired? _____ b. Date acquired? _____

Does your spouse own any separate property? If so, detail the separate property:

1. Description: _____

a. How acquired? _____ b. Date acquired? _____

2. Description: _____

a. How acquired? _____ b. Date acquired? _____

3. Description: _____

a. How acquired? _____ b. Date acquired? _____

**Attach additional sheets, if necessary

