

CONFIDENTIAL QUESTIONNAIRE

Please complete this questionnaire. If you spend the time to complete all items, you will give us the background information necessary to begin to understand the complexity of the personal aspects of your marriage. All information will be held in strict confidence.

1. YOUR PERSONAL INFORMATION:

A. Name (first, middle & last): _____

B. Maiden/Former name: _____

Do you wish to have your maiden name restored to you? _____

If so, please indicate the full name: _____

C. Date of Birth: _____ Place of Birth: _____

D. Social Security Number: _____

E. Current address: _____

Do you wish to have your mail and bills from this office sent to a different address? If so, please list the address:

F. Telephone numbers where we may reach you:

Home: _____ Work: _____

Cellular: _____ Pager: _____

Fax Home: _____ Fax Work: _____

G. If you wish to correspond via e-mail, please give your e-mail address:

RESIDENCY INFORMATION:

- A. How long have you lived in the State of Florida? _____
- B. Please list other residential addresses during the past five (5) years and the dates you resided at that residence:

EDUCATION:

- A. Highest degree of education: _____
- B. Portion completed during marriage: _____

EMPLOYMENT:

- A. Employer: _____
- B. Address: _____
- C. What is your job title: _____
- D. Gross salary: _____
- E. Other sources of income (explain): _____

2. SPOUSE INFORMATION:

- A. Name (first, middle & last): _____
- B. Maiden/ Former name: _____
- C. Current address: _____
- D. Date of Birth: _____ Place of Birth: _____
- E. Social Security Number: _____
- F. Telephone numbers:
 Home: _____ Work: _____
 Cellular: _____ Pager: _____
- G. Has your spouse retained counsel? If so, please provide the name and telephone Number of attorney: _____

SPOUSE’S RESIDENCY INFORMATION:

- A. How long has he/she lived in the State of Florida? _____
- B. Please list other residential addresses during the past five (5) years and the dates resided at that residence: _____

SPOUSE'S EDUCATION:

- A. Highest degree of education: _____
- B. Portion completed during marriage: _____

SPOUSE'S EMPLOYMENT:

- A. Employer: _____
- B. Address: _____
- C. What is your job title: _____
- D. Gross salary: _____
- E. Other sources of income (explain): _____

3. MARRIAGE AND SEPARATION:

- A. Date of Marriage: _____
- B. Place of Marriage: _____
- C. Was there a Pre-Nuptial or Post-Nuptial Agreement? _____
If so, please provide copies of all related documents. Who was your attorney?

- D. If you are not living with your spouse, give the approximate date of separation:

- E. Have there been prior separations? _____
- F. If so, how many? Please state approximately how long? _____
- G. Has your spouse ever been charged with crime? _____
Have you been charged with a crime? _____
- H. Have there been prior court proceedings between you and your spouse? _____
If so, please bring copies of all related documents. Who was your previous attorney? _____
- I. Have you and/or your spouse tried counseling? _____ If so, who went, for how long and to whom? _____
- J. Do you want counseling for yourself, your spouse and/or for both of you and your spouse? _____
- K. Are either you or your spouse a member of the military service of the United States or any of its allies? _____

L. Have either you or your spouse received an inheritance or gift (greater than \$1,000.00) during the course of your marriage? _____

4. CHILDREN:

A. How many children were born or adopted of this marriage? _____

B. If so, please give full name, date of birth, place of birth, and sex of each child. If there are any children by a previous marriage, please indicate?

<u>Name and SS#:</u>	<u>Sex</u>	<u>D.O.B.</u>	<u>P.O.B</u>	<u>SCHOOL</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

C. Do any of your children have any special mental or physical problems? If so, please explain: _____

D. Where are the children residing at this time: _____

E. List all residence addresses for the children during the past five (5) years, dates they lived at that residence and with whom they resided.

<u>Address</u>	<u>Date at this address</u>	<u>With whom resided</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

F. Please list any current proceedings, if any, presently pending which would affect these divorce proceedings in any way. Include case style and case number:

G. List all property, if any, owned by the children:

5. REAL AND PERSONAL PROPERTY:

A. List all real estate you and/or your spouse own by street address, indicating who the property is titled to and its approximate value:

<u>Address</u>	<u>Value</u>	<u>Owner(s)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

B. List all vehicles (cars, boats, etc.) you and/ or your spouse currently own, who the vehicle is titled and who has possession:

<u>Vehicle</u>	<u>Possession</u>	<u>Owner(s)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

C. List all bank, savings, money market, credit union accounts:

<u>Bank</u>	<u>Account Number</u>	<u>Balance</u>	<u>Owner(s)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

6. ANY OTHER PROPERTY: Please briefly list any and all other property, real or personal, not named above:
