

DOMESTIC RELATIONS QUESTIONNAIRE
PLEASE FILL OUT AND RETURN TO YOUR LAWYER

1. GENERAL:

a. Name:

b. Address (Present/Prior) (Who else resides there)

c. Age/Date of Birth:

Spouse Age/Date of Birth:

d. Education: Grade completed

Spouse Education: Grade Completed:

e. Health:

f. Social Security Number:

Spouse Social Security Number:

g. Maiden Name/Wife's Maiden Name:

2. Married To:

a. Where:

b. When:

Prior Marriages?

a. When?

b. Who?

c. Length of Marriage:

d. When/Where Divorced:

e. Child by prior marriage (details re: custody, etc.)

3. **Children of Marriage:**
 - a. **Names:**
 - b. **Age/Date of Birth:**
Number of Children under Age 18:
 - c. **School/Grade:**
 - d. **Other pregnancies (before/after marriage):**
4. **When first met spouse:**
 - a. **Where:**
 - b. **How:**
 - c. **How long dated before marriage:**
 - d. **Lived together before marriage (details re: where/how long/etc.):**
5. **Where working when met spouse:**
 - a. **Job:**
 - b. **Income:**
6. **Where working when married (Plaintiff and Defendant)**
 - a. **Job:**
 - b. **Income:**
7. **Work experience during marriage (Plaintiff and Defendant)**
 - a. **Job:**
 - b. **Length:**
 - c. **Income:**

8. Problems in Marriage:

- a. When serious problems first started:
- b. When was first serious problem?
- c. Other serious problems in marriage:
- d. Argue frequently? When started? What argued about?
- e. When separated:
 - 1. What happened to cause:
 - 2. Who left?
 - 3. Where went?

Describe Problems:

- a. Sex?
- b. Money?
- c. Affairs?
- d. Communication?
- e. Religion?
- f. Child raising/discipline?

9. Able to discuss problem and work on them? Seek help/counseling?

- a. When?
- b. Who?
- c. Result?
- d. How long attended?
- e. Why stopped?
- f. Any other professional help? Doctor? Psychologist? Preacher? Etc.?

10. Physical abuse?
 - a. Spouse ever hit you?
 - b. Physical abuse of any type?
 1. When?
 2. Where?
 3. Who witnessed or saw marks?
 4. Medical care?
 5. Physical marks, bruises, etc.?
 - c. You ever hit or assault your spouse?
 1. When?
 2. Where?
 3. Who else witnessed?
 4. Medical Care?
 5. Physical marks, bruises, etc.?

11. Spouse abuse, drugs or alcohol?
 - a. When?
 - b. Where?
 - c. Diagnosed?
 - d. Seek treatment/counseling?

You use illegal drugs/alcohol (details)?

12. Any evidence that spouse has been unfaithful during marriage?

- a. What?
- b. When?
- c. Witnesses?

Had spouse followed?

- a. Who?
- b. When/how long?
- c. Pictures/video?
- d. Report?
- e. What reported?
- f. Money paid?

Ever tape a phone conversation to which spouse was a party?

- a. How?
- b. What phone?
- c. You also on phone?
- d. When?
- e. Conversation?

Any other evidence you contend indicates adultery on spouse's part?

13. You ever had sexual intercourse with someone other than spouse during the marriage? (If assert 5th, ask for period excluding last year).

- a. Who?
- b. When?
- c. Where?
- d. Spend night?
- e. Gifts/Trips?

14. Assets owned at marriage:

Plaintiff: Net Worth: \$ _____
Defendant Net Worth: \$ _____

15. Debts owed at marriage

Plaintiff: \$ _____
Defendant: \$ _____

16. During the marriage how was the payment of the family bills handled?

- a. Joint account;
- b. Who put money into account (both incomes go into it)?
- c. Who wrote checks?
- d. Procedure changed? When? What change?
- e. If bills not paid from joint account:
 - 1. Who paid what bills?
 - 2. How decided?

17. Any time during marriage that you or spouse were out of work?
 - a. When?
 - b. How long?
 - c. Reason?
 - d. How family bills were paid?
 - e. Have other income/unemployment/workmen's compensation, etc.?
 - f. Amount?
 - g. How family bills paid during those times?
18. Disability of either Plaintiff or Defendant:
 - a. Doctor whom treated/examined/tested?
 - b. When started?
 - c. Describe.
 - d. Treatment:
 1. Hospitalized?
 2. Surgeries?
 3. Medications?
 4. Physical limitations?
19. Blame your spouse entirely for incompatibility?
 - a. Part each one played in problem;
 - b. You contend you are free from fault or blame?

20. Your spouse as a parent:

- a. Time spent caring for child;
- b. Time spent with child/activities;
- c. Spouse cook for family/house work/yard work/etc.;
- d. Good parent;
- e. Any reason he or she is not fit to have child for custody?

21. Assets accumulated during the marriage: sold, transferred, getting rid of assets:

ASSET	WHEN ACQUIRED	HOW ACQUIRED	PRICE	DEBT	FMV	HOW TITLED

22: Source of funds used to purchase each item:

- a. Any inherited money used to acquire?
- b. Any gift money used to acquire?
- c. Any savings either spouse had before marriage used?
- d. What used assets for/how?

23. Who made decisions as to what to acquire:

How made (discuss with spouse)

24. Had any asset(s) appraised:

- a. What:
- b. When:
- c. Who:
- d. Fair market value:
- e. Copy of report received:

25. Personal monthly living expenses: (see form included in folder)

26. Income:

- a. Where work/how long/job:
- b. How often paid:
 - 1. Cash?
 - 2. Report all income?
 - 3. Get W-2/1099
 - 4. File accurate income tax return?
 - 5. Where was income deposited?
 - 6. Other sources of income?
 - 7. Overtime, bonuses?

27. Bank accounts:

- a. Where/present balance?
- b. Account name?
- c. Who can draw on?
- d. Any deposits made to other account (that your name is not on) by you?
- e. Account with anyone else (relative, friend)?

28. Purchases over \$500.00 in the last two (2) years?

29. Life insurance on your life (details re: cash value, beneficiary, etc.)

30. Trips taken:

- a. Where?
- b. When?
- c. Who went?

31. Marital Debts:

DEBT OWED (INCLUDE CREDIT CARDS)	CREDITOR	BALANCE	NAME ON ACCT	HOW INCURRED? WHO CHARGED?

32. Ever undergone psychiatric counseling or psychological treatment or counseling?

- a. When?
- b. Who?
- c. How long?
- d. Diagnosis/problems?

33. Have retirement plan or pension or profit sharing (401k, IRA, etc.)?

34. Separate property claimed by you, which was by gift/inheritance/owned before marriage?

35. Have antiques, collectibles or furs?

a. When acquired?

b. How acquired?

c. Fair market value?

d. Debt owed?

36. How family is covered for medical insurance (details re: insurer, policy number, who is covered, premium paid, if any):

37. Specific items of real and/or personal property you want the Court to award to you:

38. Witnesses/expert/other (details re: who/what expect to say).

39. Documents per deposition notice.