

DISSOLUTION INFORMATION SHEET

Date:

File No.

CLIENT PERSONAL INFORMATION

Name: _____

Date of Birth: _____

Address: _____

Home Phone: () _____

Maiden Name: _____

SSN: _____

Birthplace: _____

Occupation: _____

Employer's Name: _____

Employer's Address: _____

Employer's Phone No.: () _____

Salary \$ _____ per _____ Time at present job: _____

Education - Highest Grade Completed: _____

Number of Other Marriages: _____

Dates Terminated: _____

Prior Child Support Obligation(s): _____

Orders of Protection: Parties: _____

Dates: _____ Is Order in effect: _____

SPOUSE PERSONAL INFORMATION

Name: _____ Date of Birth: _____

Address: _____ Home Phone: () _____

_____ Maiden Name: _____

Birth Place: _____ SSN (MUST HAVE) _____

Occupation: _____

Employer's Name: _____

Employer's Address: _____

Employer's Phone: () _____

Salary \$ _____ per _____ Time at present job: _____

Education - Highest grade completed: _____

Number of other Marriages: _____

Dates Terminated: _____

Prior Child Support Obligation(s): _____

Orders of Protection: Parties: _____

Dates: _____ Is Order in Effect: _____

MARRIAGE

Place of Marriage: _____ Date of Marriage: _____

Living with Spouse Now: _____ If not, date separated: _____

Grounds for Dissolution:

1. Irreconcilable differences? _____
2. Mental, Physical differences? _____
3. Abandonment? _____

CHILDREN - MUST HAVE ALL INFORMATION REQUESTED

Names	Date of Birth	Residence
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

SSN of each child: _____
(MUST HAVE) _____

Type of Custody Desired:

1. Sole Custody: _____
2. Joint Custody: _____
Primary Residence with _____

Amount of Child Support: \$ _____

Any adopted children? (Names, Dates of birth) _____

Wife pregnant? _____

Do the children own property other than personal effects? If yes, identify: _____

MARITAL PROPERTY

Real Property

Address	Record Owners	Value	Date Acquired
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Is any of the property producing revenue? _____

Personal Property

Item	Value (If over \$500.00)	Possession
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

CHECKING, SAVINGS, CDS, STOCKS, BONDS, IRAS

Institute	Owner	Value	Certificate#	#Shares
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

NON-MARITAL PROPERTY

Item	Purchase date	Value
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DEBTS

Creditor	Total Debt Due	Monthly Payment	Marital/NM
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____