



**PERSONAL INFORMATION WORKSHEET AND QUESTIONNAIRE**  
Divorce and Separation

Please provide the information requested below. This questionnaire is divided into two parts. The first part asks for personal information about you and your spouse. The second part asks for information about your financial affairs. Your responses will help us understand your objectives and evaluate your needs. **The information you provide us, including the answers to the questions below, is confidential, meaning we will not share it with your spouse, or with his or her attorney, unless you authorize us to do so.**

Date:

Who referred you:

**ABOUT MYSELF**

1. Name:

2. Social security number:

3. Phone numbers

Home: ( ) _____	OK to phone at home?	___ Yes ___ No
Work: ( ) _____	OK to phone at home?	___ Yes ___ No
Mobile: ( ) _____	OK to leave message?	___ Yes ___ No
Other: ( ) _____	OK to leave message?	___ Yes ___ No
Fax: ( ) _____	Call before sending?	___ Yes ___ No

Do you have caller ID on home phone? \_\_\_ Yes \_\_\_ No

4. Sex: \_\_\_ Age: \_\_\_ Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

5. Country(ies) of citizenship: \_\_\_\_\_ (If not U.S. citizen, what is immigration status) \_\_\_\_\_

6. Addresses

E-Mail address:

Mailing address:

Should mail be addressed "PERSONAL AND CONFIDENTIAL" \_\_\_ Yes \_\_\_ No

Residence address:

County/state of residence: \_\_\_\_\_ How long resident of state: \_\_\_ years/months

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Warwick, Rhode Island 02888

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email : steven@hirschesq.com  
web : www.hirschesq.com  
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7. Former name(s):

8.  I do not wish a former name restored

I want my former name restored as follows:

9. Employer:

Address:

Position/occupation:

Length of this employment:

Usual work days/times:

Approximate monthly gross pay:

There is medical / dental coverage through my employer:

for my spouse  for children  no coverage  
monthly cost \$ \_\_\_\_\_

Cost per month of child care enabling me to work:

10. Disability Benefits:

From Whom \_\_\_\_\_ Amount / mo. \_\_\_\_\_

11. Other sources of income (give approximate amount per month):

a)

b)

c)

12. Health problems for which special attention or care is necessary:

13. Education

High school graduate:  Yes  No

Undergraduate degree:  Yes  No

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Type of degree: \_\_\_\_\_

Graduate / professional degree:  Yes  No

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Type of degree: \_\_\_\_\_

Currently in school: \_\_\_ Yes \_\_\_ No  
Course: \_\_\_\_\_  
Expected date of completion: \_\_\_\_\_

Were any marital funds spent for your education? \_\_\_ Yes \_\_\_ No  
If yes, give details:

14. I am currently residing with the following non-immediate family members:

15. Monetary arrangements with person(s) listed above:

16. My most recent will was made on: \_\_\_\_\_  
\_\_\_\_\_ I have no will.

### ABOUT MY SPOUSE

17. Name:

18. Social security number:

19. Phone numbers

Home: ( ) \_\_\_\_\_  
Work: ( ) \_\_\_\_\_  
Other: ( ) \_\_\_\_\_  
Mobile: ( ) \_\_\_\_\_  
Fax: ( ) \_\_\_\_\_

20. Sex: \_\_\_ Age: \_\_\_ Date of birth: \_\_\_ Place of birth: \_\_\_\_\_

21. Country(ies) of citizenship: \_\_\_\_\_ (If not U.S. citizen, what is immigration status) \_\_\_\_\_

22. Addresses

Mailing address:

Residence address:

County/state of residence: \_\_\_\_\_ How long resident of state: \_\_\_ years/months

23. Former name(s):

24. \_\_\_ Spouse does not wish a former name restored  
\_\_\_ Spouse does want a former name restored as follows:

25. Employer:

Address:

Position/occupation:

Length of this employment:

Approximate monthly gross pay:

Usual work days and times:

There is medical / dental coverage through my spouse's employer:

\_\_\_\_\_ for me \_\_\_\_\_ for children \_\_\_\_\_ no coverage

monthly cost: \$ \_\_\_\_\_

Cost per month of child care enabling spouse to work:

26. Disability Benefits:

From Whom: \_\_\_\_\_ Amount / mo. \_\_\_\_\_

27. Other sources of income (give approximate amount per month):

a)

b)

c)

28. Health problems for which special attention or care is necessary:

29. Education

High school graduate: \_\_\_ Yes \_\_\_ No

Undergraduate degree: \_\_\_ Yes \_\_\_ No

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Type of degree: \_\_\_\_\_

Graduate/professional degree: \_\_\_ Yes \_\_\_ No

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Type of degree: \_\_\_\_\_

Currently in school: \_\_\_ Yes \_\_\_ No

Course: \_\_\_\_\_

Expected date of completion: \_\_\_\_\_

Were any marital funds spent for spouse's education? \_\_\_ Yes \_\_\_ No

If yes, give details:

30. My spouse is currently residing with the following non-immediate family members:

- 31. Monetary arrangements with people listed above:
- 32. My spouse currently has / does not have an attorney?
- 33. Spouse's attorney: \_\_\_\_\_  
Address:  
Phone:

**ABOUT THE MARRIAGE**

- Date: \_\_\_\_\_
- Place: \_\_\_\_\_
- Ceremonial: \_\_\_\_\_ Common Law: \_\_\_\_\_
- Do you have your original or a certified copy of your marriage certificate? \_\_\_\_ Yes \_\_\_\_ No
- 34. Date of separation: \_\_\_\_\_
- 35. Residence at time of separation: \_\_\_\_\_
- 36. Divorce is desired by: \_\_\_\_\_ Husband \_\_\_\_\_ Wife \_\_\_\_\_ Both
- 37. Describe any acts of harassment or violence (including dates; indicate if police contacted): \_\_\_\_\_

**CHILDREN BORN OR ADOPTED INTO THIS MARRIAGE**

- 38. For each child list name, age, birth date, and with whom the child resides: \_\_\_\_\_
- 39. Special health care problems: \_\_\_\_\_
- 40. Income or property owned by any dependent children: \_\_\_\_\_
- 41. Custody and visitation of children \_\_\_\_\_

Custody / visitation is currently arranged and working out as follows:

I want custody and visitation rights as follows:

I anticipate that there will / will not be a dispute over custody and visitation. Elaborate if dispute is anticipated.

**MY PREVIOUS MARRIAGES AND RELATIONSHIPS**

- 42. I was previously married \_\_\_\_\_ times before this marriage  
List name of each former spouse, when the marriage was terminated, and how (e.g. death, divorce)
  - a) \_\_\_\_\_
  - b) \_\_\_\_\_

- 43. Children born or adopted into previous marriages (for each, list name, age, birth date, social security number, and with whom the child resides):
- 44. Financial obligations to former spouse(s), children:

**MY SPOUSE’S PREVIOUS MARRIAGES AND RELATIONSHIPS**

- 45. My spouse was previously married \_\_\_ times before this marriage  
 List name of each former spouse, when the marriage was terminated, and how (e.g. death, divorce).  
 a)  
 b)
- 46. My spouse’s children born or adopted into previous marriages (for each list name, age, birth date, social security number, and with whom the child resides):
- 47. Financial obligations to former spouse(s) children:

**CURRENT ARRANGEMENTS**

- 48. Separation  
 \_\_\_ We are not separated  
 \_\_\_ We are separated but have no financial arrangements at this time  
 \_\_\_ We have separated and now live apart under the following financial arrangements:  
 Periodic payments to or from spouse:  
 Direct payments (e.g. mortgage, bills, etc.). List each item, who pays and how often paid:
- 49. Agreements  
 \_\_\_ We have no written agreements and have no oral understandings  
 \_\_\_ We have a written agreement which is attached  
 \_\_\_ We have oral agreements or understandings as follows:

**PENDING ISSUES AND QUESTIONS**

- 50. I foresee the following problems in dealing with my spouse (i.e. fear, distrust, dishonesty, unwillingness to compromise, using children as a weapon, violence):
- 51. I have some questions and issues I would like to explore, as follows:
- 52. I have already made some decisions about what outcome I would like with respect to property, children, support, or goals and conduct of this case as follows:

**PRIOR LITIGATION**

- 53. Prior legal action between you and your spouse, if any, and status of legal action:
  
- 54. Attorney for each party for prior legal action and phone number:
  
- 55. Name, address and phone number of counselor or therapist, if any (no telephone call will be made without your permission):  
Husband's \_\_\_\_\_  
Wife's \_\_\_\_\_  
Couple's \_\_\_\_\_
  
- 56. Have you consulted a mediator? \_\_\_\_ Yes \_\_\_\_ No Name \_\_\_\_\_

**FINANCIAL DISCLOSURE**

Parties entering into marital settlement negotiations or litigation can expect to make full disclosure of assets, liabilities, and amounts and sources of income. You will have an opportunity to discuss with us any concerns you may have about the extent of disclosure you may be required to provide.

Please provide full and complete information about your and your spouse's financial circumstances. If you have only partial information, provide what you do have. We will discuss with you how we will obtain the financial information from your spouse that we will need. You may use the attached worksheet if you wish.

**ASSETS AND DEBTS WORKSHEET**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

1. Family home:

- We do not own and are not buying the family home (skip to 2)
- We own or are buying the family home with an approximate fair market value of:  
\$ \_\_\_\_\_

Address:

Date of original purchase:

Title is now in name of  Husband  Wife  Other

Title is held as:

- Tenants by the entireties
- Joint tenants with right of survivorship
- Tenants in common
- Community property
- Other:

Title has been changed since we first acquired it as follows:

Funds for the down payment of \$ \_\_\_\_\_ were obtained from (give amount):

- Savings during the marriage: \$ \_\_\_\_\_
- My premarital funds: \$ \_\_\_\_\_
- Spouse's premarital funds: \$ \_\_\_\_\_
- My earnings: \$ \_\_\_\_\_
- My spouse's earnings: \$ \_\_\_\_\_
- Sale of prior home: \$ \_\_\_\_\_
- Other: \$ \_\_\_\_\_
- Gifts or inheritance from my family: \$ \_\_\_\_\_
- Gifts or inheritance from spouse's family: \$ \_\_\_\_\_

Money borrowed when home was purchased (give name of lender, original balance, current balance):

First deed of trust:

Second deed of trust:

Other deeds of trust (describe):

Refinancing:

- Home was never refinanced
- Home was refinanced on (date): \_\_\_\_\_
- Amount of new first trust: \$ \_\_\_\_\_

House payments during the marriage were made:

- Entirely from wages of one or both spouses
- Other, as follows (include payments from separate property of either spouse):

If proceeds from the sale of a former residence were used to buy your current home, indicate:



Who owned prior home:  
 Was it acquired prior to your marriage? \_\_\_\_\_  
 Proceeds applied: \$ \_\_\_\_\_

Dividing family home:

\_\_\_\_\_ We both agree that the home should be divided:  
                   50 / 50  
 \_\_\_\_\_ Other:

\_\_\_\_\_ We disagree about the division of the home (describe):

\_\_\_\_\_ There have been \_\_\_\_\_ oral \_\_\_\_\_ written understandings or agreements about ownership of the family home, or about reimbursement for money spent on purchase or improvements (give dates and details):

Did you or your spouse sell a prior residence prior to 1998? \_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, provide Internal Revenue Form 2110 from the year of sale (should be attached to your 1040 for the year of the sale).

Other real estate:

\_\_\_\_\_ Neither spouse owns or is buying any other real estate (skip to 3).  
 \_\_\_\_\_ I or my spouse own the following other real estate (chart on next page):

(For type, R = rental, U = unimproved land, F = farm or ranch, C = commercial property, V = vacation property (non-rental))

Type	Address	Date Purchased	Price	Current Value	Balance owed on Mortgage	How Titled? H, W, JT, Other

Were any funds from an inheritance or gift to you or your spouse, or from premarital funds of you or your spouse, used to purchase any of this real estate? If so, explain:



4. Cash accounts (checking, saving, credit union, money market, T-bills, CDs):

In name of: H / W / H & W	Institution; type of account	Account Number	Balance at separation	Balance now	Who controls H / W / JT / Other

5. Defined contribution retirement account (e.g. IRA, 401 (k), profit sharing, ESOP, TSP, 403 (b), other) held by either spouse:

In name of: H / W	Financial Institution or Plan Administrator	Account number	Type of account	Approximate current value

6. Defined benefit pension plans, retirement in which either spouse has an interest (e.g. private annuity retirement plan, CSRS, FERS, military, Foreign Service, state or other government, international organization plans):

In name of H / W	Sponsoring entity (e.g. company, union, government or organization)	Name of Plan	Years in plan	Terms, amounts of benefits

7. Other deferred compensation plans or benefits (e.g. stock options, stock bonus, stock awards, supplemental retirement plans, restricted shares):

In name of H / W	Sponsoring entity (e.g. company, union, government or organization)	Type of Benefit	Number of shares or units	Present Value

For each plan, give the name and phone number of the person or office that administers the plan, if you know it.

List all prior employers who provided retirement or deferred compensation benefits to you or your spouse and how to contact the benefits office.

8. Securities (mutual funds, bonds, limited partnerships, stocks) owned by either spouse:

In name of H / W / H & W	Broker / name of fund	Description (# of shares, % interest)	Approximate Current Value

9. Business interests. Describe any interest held by either spouse in any business, professional practice or corporation, giving approximate value of interest where possible:

10. Is there any other property owned by you or your spouse not mentioned above (e.g. patents, oil and gas rights, money owed to you)? If so, give description, value, and person who owns the property.

11. Are you the beneficiary of any trusts or estates? If yes, please provide details.

12. Life insurance policies:

Name of insurance company	Policy number	Type (whole, life, term)	Death benefit	Annual premium	Insured's name

13. Debts<sup>1</sup> (Include all credit cards and lines of credit even if you pay your balance in full every month):

Creditor	Debtor H / W / both	Type: credit card, personal loan, etc.	Purpose / how used	Balance today	Monthly payment

14. Note here marital funds or property you believe has been dissipated. Give dates, amounts and circumstances:

15. Tax returns

Last year for which we filed a joint return was:

\_\_\_ There is no tax refund currently due

\_\_\_ There is still a refund due:

\$ \_\_\_ from the state

\$ \_\_\_ from the federal government

Outstanding taxes owed for previous tax years (indicate whether return has been filed and amount of outstanding tax shown on return):

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<sup>1</sup>We strongly recommend that you obtain a current credit report for yourself as soon as possible. For a small fee, you may obtain a copy of your report by contacting either of the following credit agencies: Equifax at (800) 685-1111 ([www.equifax.com](http://www.equifax.com)), TransUnion, (800) 680-7289 ([www.transunion.com](http://www.transunion.com)), or Experian at (888) 397-3742 ([www.experian.com](http://www.experian.com)).

If you have reason to believe you could have problems with a previously filed joint or separate return, explain:

Mortgage interest deduction has been / should be allocated as follows:

\_\_\_\_\_ I anticipate a dispute with my spouse on allocation of the mortgage interest deduction

Dependency exemption for minor children has been / should be allocated as follows:

\_\_\_\_\_ I anticipate a dispute with my spouse on allocation of the dependency exemption for children.

16. While married to your current spouse, did you and your spouse ever live in Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington (state), or Wisconsin (community property states)? If so, state name of state \_\_\_\_\_, dates of residence, \_\_\_\_\_, and list all assets acquired by you or your spouse while living there other than gifts or inheritances.

Asset	Title in Whose Name	Approximate Value When Acquired
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## **DOCUMENTS WE REQUEST**

Please provide the following documents at our first meeting if available to you and if applicable:

1. Copies of the last three years of income tax returns for you and your spouse. If you do not have your returns, please IMMEDIATELY send to the IRS a Form 4506 for each return requested.
2. Your most recent pay stub.
3. The most recent pay stub of your spouse if you have it.
4. Copies of your current bank account statements (savings and checking) for you, and, if you have it, your spouse.
5. Copy of deed to your home and other real estate, and copy of settlement statement for purchase and any refinance.
6. Statement of your mortgage balance(s).
7. Copies of any real estate appraisals done in the last three years.
8. Last benefit statement for your pension/retirement plan.
9. Last benefit statement for your spouse's pension plan/retirement, if you have it.
10. Copies of the most recent statements from any IRA, 401 (k), or defined contribution plan of yours or your spouse.
11. Any financial statement furnished to a lender by you or your spouse in the last two years.
12. Form 2119 (attached to your Federal tax return for year of sale of residence of you and/or spouse if sale was before 1998).
13. For any business owned by you or your spouse, a copy of the most recent balance sheet, profit and loss statement, tax return, and buy-sell agreement.
14. Any premarital agreement or any separation agreement between you and your spouse. If you do not have a signed copy, please provide an unsigned copy if you have it.
15. Documents relating to any other financial matters that you wish to discuss or that you believe may be relevant.

Referred By	Yellow Pages _____ Newspaper _____
	Professional (name) _____
	Client (name) _____
	Other _____

I believe that the following goals are important in our parenting plan *(check all that applies)*:

- That the children have similar time with each parent
- A majority of the children's time with Mom / Dad *(circle one)*
- That we make our plan according to our children's desires
- That the plan has predictability *(the children can tell when they are with each parent)*
- That the children have overnights with each parent
- That the children always sleep at the same residence
- That each parent has time without the children in order to do adult activities
- That the children have access to extended families
- That each party is entitled to a vacation with the children
- That the children are not used to relay communications between the parents
- That the children have the same bedtime at each parent's home
- That the children maintain the same activities and extra curricular events as before the divorce
- That the police are involved each time the parents transfer the children from one to another
- That the parents and children will meet 2 or 4 times per year together to review and adjust schedules
- That the children are separated 3 or 4 times per year so that each parent can have a "one-on-one" with each child
- That transportation of the children will be shared
- That each parent honors and supports the other parent in front of the children





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This plan addresses the following interests (identify yours, your spouses and the children's):

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**OTHER TOYS (identify, value and outstanding loans)**

1. Boats, Motorcycles, Trailer / RV

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2. Children's car

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**HOUSEHOLD CONTENTS (identify, value and history)**

Art \_\_\_\_\_

Oriental Rugs \_\_\_\_\_

Coins, stamps \_\_\_\_\_

Antiques \_\_\_\_\_

Big Miscellaneous \_\_\_\_\_

**HOW ARE HOUSEHOLD BILLS MET NOW**

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POSSIBLE LEGACIES OR INHERITANCES