

## CHERRY WAY DOCUMENT PREPARATION SERVICES

DIVORCE (DISSOLUTION) QUESTIONNAIRE	
Your Name: _____	Request Date: _____
Phone: (____) _____ Fax: (____) _____ E-Mail: _____	Date Needed: _____
I. MARITAL BACKGROUND INFORMATION	
1. What action are you seeking?	<input type="checkbox"/> Divorce <input type="checkbox"/> Legal Separation <input type="checkbox"/> Annulment <i>If seeking an Amendment or Response, please specify Case No.</i> <input type="checkbox"/> Amendment <input type="checkbox"/> Response <input type="checkbox"/> Case No. _____
2. Are <u>both</u> parties agreeable to action you are seeking?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure If <b>Unsure</b> , please specify: _____
3. Have either spouse retained an attorney?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure If <b>Yes</b> , please specify: <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent If <b>Unsure</b> , please specify: _____
4. Which spouse will be the petitioner?	<input type="checkbox"/> Husband <input type="checkbox"/> Wife
5. Date and Place of Marriage:	Month: _____ Date: _____ Year: _____ City: _____ State: _____ County: _____
6. Date of Separation:	Month: _____ Date: _____ Year: _____ Time from date of marriage to date of separation: Years: _____ Months: _____
7. Petitioner's Name and Address:	Name: _____ Address: _____ City: _____ State: _____ Zip: _____ County: _____  Petitioner has resided in this State: _____ <input type="checkbox"/> Years <input type="checkbox"/> Months Petitioner has resided in this County: _____ <input type="checkbox"/> Years <input type="checkbox"/> Months
8. Petitioner's Employer Name and Business Address:	Name: _____ Address: _____ City: _____ State: _____ Zip: _____
9. Respondent's Name and Address:	Name: _____ Address: _____ City: _____ State: _____ Zip: _____ County: _____  Respondent has resided in this State: _____ <input type="checkbox"/> Years <input type="checkbox"/> Months Respondent has resided in this County? _____ <input type="checkbox"/> Years <input type="checkbox"/> Months
10. Respondent's Employer Name and Business Address:	Name: _____ Address: _____ City: _____ State: _____ Zip: _____

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I. MARITAL BACKGROUND INFORMATION (Cont'd)				
11. Is either spouse in the military?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span>	If <b>Yes</b> , please specify: <span style="margin-left: 100px;"><input type="checkbox"/> Petitioner</span> <span style="margin-left: 100px;"><input type="checkbox"/> Respondent</span>		
12. Are there children from this marriage?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span>	<i>If no, skip Section II</i>		
II. CHILDREN BORN OR ADOPTED INTO THE MARRIAGE				
1. Specify children born or adopted from the marriage <i>(include middle initial):</i>	<u>Full Name</u>	<u>Place of Birth</u>	<u>Birthdate</u>	<u>Age</u> <u>Sex</u>
	(1) _____	_____	_____	_____
	(2) _____	_____	_____	_____
	(3) _____	_____	_____	_____
	(4) _____	_____	_____	_____
2. Specify residence of each child for last 5 years:	<u>Child's Name</u>	<u>Residence Address</u>	<u>Currently Residing With</u>	
	(1) _____	_____	<input type="checkbox"/> Petitioner	<input type="checkbox"/> Respondent
	(2) _____	_____	<input type="checkbox"/> Petitioner	<input type="checkbox"/> Respondent
	(3) _____	_____	<input type="checkbox"/> Petitioner	<input type="checkbox"/> Respondent
	(4) _____	_____	<input type="checkbox"/> Petitioner	<input type="checkbox"/> Respondent
3. What custody or visitation orders are you seeking?	Legal Custody of children to: <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint <input type="checkbox"/> Other Physical Custody of children to: <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint <input type="checkbox"/> Other Child visitation be granted to: <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Joint <input type="checkbox"/> Other  If <b>Joint</b> , please specify custody time:    ___ % with Petitioner    ___ % with Respondent  If <b>Other</b> , please specify terms or attach agreement: _____  _____			

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II. CHILDREN BORN OR ADOPTED INTO THE MARRIAGE (Cont'd)	
4. Is there a likelihood of any disputes about the custody of the children?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span> If <b>Yes</b> , please specify from whom: <span style="margin-left: 100px;"><input type="checkbox"/> Petitioner</span> <span style="margin-left: 100px;"><input type="checkbox"/> Respondent</span> Which child? _____
5. Is there a likelihood of any disputes about the paternity of the children?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span> If <b>Yes</b> , please specify from whom: <span style="margin-left: 100px;"><input type="checkbox"/> Petitioner</span> <span style="margin-left: 100px;"><input type="checkbox"/> Respondent</span> Which child? _____
6. Are you seeking the court to order child support based on state's guidelines?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span> If <b>Yes</b> , please specify from whom: <span style="margin-left: 100px;"><input type="checkbox"/> Petitioner</span> <span style="margin-left: 100px;"><input type="checkbox"/> Respondent</span> If <b>No</b> , please specify agreed terms or attach agreement for court's approval: _____ _____
7. Are you seeking the court to determine other support orders for the children?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span> If <b>Yes</b> , please specify from whom: <span style="margin-left: 100px;"><input type="checkbox"/> Petitioner</span> <span style="margin-left: 100px;"><input type="checkbox"/> Respondent</span>  Child care to be paid by: <span style="margin-left: 100px;"><input type="checkbox"/> Petitioner</span> <span style="margin-left: 100px;"><input type="checkbox"/> Respondent</span> Health insurance for children paid by: <span style="margin-left: 100px;"><input type="checkbox"/> Petitioner</span> <span style="margin-left: 100px;"><input type="checkbox"/> Respondent</span> Emergency housing support paid by: <span style="margin-left: 100px;"><input type="checkbox"/> Petitioner</span> <span style="margin-left: 100px;"><input type="checkbox"/> Respondent</span>  If <b>No</b> , please specify agreed terms or attach agreement for court's approval: _____ _____
8. Either party receiving public assistance for the minor children?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span> <span style="margin-left: 50px;"><input type="checkbox"/> Intend to apply for</span> If <b>Yes</b> , please specify? <span style="margin-left: 100px;"><input type="checkbox"/> Petitioner</span> <span style="margin-left: 100px;"><input type="checkbox"/> Respondent</span> If <b>Intend to apply for</b> , please specify? <span style="margin-left: 100px;"><input type="checkbox"/> Petitioner</span> <span style="margin-left: 100px;"><input type="checkbox"/> Respondent</span>
9. Are you also seeking the court to issue Emergency Domestic Violence Orders?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span> If <b>Yes</b> , please specify or include attachment explaining history of violence against you, the children or problems that may arise because you are seeking a divorce: _____ _____
III. ASSETS AND DEBTS	
1. Will you divide your assets, debts, support or other orders by signing and notarizing a marital settlement agreement?	<input type="checkbox"/> Yes <span style="margin-left: 150px;"><input type="checkbox"/> No</span> If <b>Yes</b> , is Agreement? <span style="margin-left: 100px;"><input type="checkbox"/> Done</span> <span style="margin-left: 100px;"><input type="checkbox"/> Need one prepared</span>

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### III. ASSETS AND DEBTS (Cont'd)

2. Are there any community debts or assets for the court's determination?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Per attachment If <b>Yes</b> , please specify and for whom: _____ _____
3. Are there any separate debts or assets for the court's determination?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> See attachment If <b>Yes</b> , please specify and confirmed to whom: _____ _____ _____
4. Are you seeking the court to determine other support or orders?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Per attached agreement If <b>Yes</b> , please specify from whom: <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent Spousal support to be paid by: <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent Restoration of former name for: <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

### IV. FINANCIAL INFORMATION

1. Petitioner's Income:	Monthly gross income before taxes:              \$ _____ Monthly deductions:              (1) _____ \$ _____ (2) _____ \$ _____ (3) _____ \$ _____ (4) _____ \$ _____ <b>Monthly take home pay:</b> \$ _____
2. Petitioner's Household Expenses:	(1) Rent or house payment & maintenance              \$ _____ (2) Food and household supplies                              \$ _____ (3) Utilities and telephone                                      \$ _____ (4) Clothing    \$ _____ (5) Laundry and cleaning                                        \$ _____ (6) Medical and dental payments                              \$ _____ (7) Insurance (life, health, accident, etc.)                 \$ _____ (8) School and child care, if any                                \$ _____ (9) Transportation and auto expenses (insurance, gas, etc.)    \$ _____ (10) Installment payments (specify):                              \$ _____ (a) _____ \$ _____ (b) _____ \$ _____ (c) _____ \$ _____ (d) _____ \$ _____  <b>Total Monthly Expenses:</b> \$ _____

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IV. FINANCIAL INFORMATION (Cont'd)																																														
3. Respondent's Income:	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Monthly gross income before taxes:</td> <td style="width: 5%;"></td> <td style="width: 35%; text-align: right;">\$ _____</td> </tr> <tr> <td>Monthly deductions:</td> <td>(1) _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td></td> <td>(2) _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td></td> <td>(3) _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td></td> <td>(4) _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><b>Monthly take home pay:</b></td> <td></td> <td style="text-align: right;"><b>\$ _____</b></td> </tr> </table>	Monthly gross income before taxes:		\$ _____	Monthly deductions:	(1) _____	\$ _____		(2) _____	\$ _____		(3) _____	\$ _____		(4) _____	\$ _____	<b>Monthly take home pay:</b>		<b>\$ _____</b>																											
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V. GENERAL INFORMATION																																														
1. Is spouse willing to sign a court form stating they received the divorce papers via the mail?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure If <i>Unsure</i> , please specify: _____ _____																																													
2. Specify any additional information, pending issues or questions?	_____ _____ _____																																													