

DISSOLUTION QUESTIONNAIRE

The following information is necessary in order to properly advise you and handle your case. Please print and fill out every applicable question. If a question is not applicable, please write N/A in the space provided. **Do not leave blanks.** This information will help us help you and **will be kept confidential.**

Today's date: _____

Personal Information

Full Name: _____

Have you ever been known by any other names? If so, what names: _____

Present address: _____

Mailing address if different from above: _____

Social Security Number: _____ - _____ - _____

Home Phone Number: (_____) _____

Work Phone Number: (_____) _____

Cell Phone Number: (_____) _____

How long have you lived at the present address? _____

How long have you lived in Missouri (or Illinois)? _____

Do you OWN or RENT or LIVE WITH RELATIVES? (circle one)

Date of birth: _____ Age: _____

State of your birth: _____

Highest grade you completed in school: _____

How many times, including the present marriage, have you been married? _____

If married previously, how many marriages were ended due to death of spouse? _____

How many were ended due to divorce or dissolution? _____

Date(s) of such death(s) or divorce(s): _____

Employment Information

Are you presently employed? Yes or No

Name, full address and telephone number of employer: _____

How long have you been so employed? _____

What is your approximate gross salary (before deductions)? _____

\$_____ per hour \$_____ per week \$_____ per month

What is your job title? _____

Do you have a pension or profit sharing plan through your employment? Yes or No

If you are not presently employed, when and where were you last employed? _____
_____ Job Title: _____

Salary at time of employment: _____ Date of termination: _____

Was employment terminated? Yes or No

Do you have any source of income other than from your employment? Yes or No

If yes, explain in detail: _____

Spouse's Personal Information

Name of spouse: _____

Spouse's address: _____

Social Security Number: _____-_____-_____

How long has spouse lived at present address? _____

How long has spouse live in Missouri (or Illinois)? _____

Does your spouse OWN, RENT, or LIVE WITH RELATIVES? (circle one)

Spouse's date of birth: _____ Age: _____

State of spouse's birth: _____

Highest grade spouse completed in school: _____

How many times, including present marriage, has your spouse been married? _____

If married previously, how many marriages ended due to death of the spouse? _____

How many were ended due to divorce or dissolution? _____

Date(s) of such death(s) or divorce(s)? _____

Spouse's Employment Information

Is your spouse employed? Yes or No

Name, full address and phone number of employer: _____

How long has spouse been so employed? _____

Approximate gross salary (before deductions): _____

\$ _____ per hour \$ _____ per week \$ _____ per month

What is your spouse's job title? _____

If your spouse is not presently employed, when and where was your spouse last employed? _____

Title: _____ Salary at time of employment: _____

Why was employment terminated? _____

Does your spouse have any income other than from his/her employment? Yes or No

If yes, explain in detail: _____

Are you or your spouse an active member of the Armed Forces? Yes or No

Who referred you to this law firm? _____

Marriage Statistics

Date of marriage: _____

Marriage license obtained at: City: _____ County: _____ State: _____

Where married: City: _____ County: _____ State: _____

Did you live with your spouse before the marriage? Yes or No

Date of separation: _____

Children of Marriage

List children born to you and your spouse. Include children adopted by you and your spouse. List the oldest child first. Indicate whether child was born to you or adopted. Do not include children of a previous marriage who have not been adopted by you or your spouse.

Full Name	Date of Birth	Age	Married	Health	Grade	Private/Public School

Custody of Children

Who has actual physical custody of the minor children at this time? (circle one)

Wife Husband Joint

Who do you feel is best suited to have legal custody of the minor children? (circle one)

Wife Husband Joint

Why? Please be specific: _____

Is your spouse a good parent to the minor children? Yes or No

Have the minor children ever lived with anyone other than you or your spouse?

Yes or No Who? _____

Please list the addresses where the children have lived for the last five (5) years, the dates they lived at such addresses, and with whom they lived:

Address	Date	With whom
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Has there ever been any litigation concerning custody of these children in Missouri or in any other state? Yes or No If yes, explain _____

Have there been any discussions or agreements concerning child support or maintenance? Yes or No If yes, explain _____

Is wife pregnant at this time? Yes or No

Have you and your spouse entered into any ante-nuptial agreement (before marriage) or post-nuptial agreement (after marriage)? Yes or No

Do you have a will? Yes or No

Does your spouse have a will? Yes or No

Within the past two years have you sold a home or residence? Yes or No

If so, please provide the following information:

Date of sale: _____

Buyer's name: _____

Sale price: _____

Your purchase price: _____

Amount spent on improvements: _____

Was the home ever appraised? Yes or No If so, please state the following:

Date of each such appraisal: _____

Appraised value: _____

The actual monetary basis that you had in the home at the time of its sale: _____

Marital Problems

Please state briefly your view of the basic marital problems: _____

Please state briefly any complaints your spouse would have against you at this time: _____

Does your spouse have any physical or mental disabilities? If so, describe: _____

Do you have any physical or mental disabilities? If so, describe: _____

Service of Petition

At what address(es) should your spouse be served? _____

What time of day is best to serve the petition at each address listed? _____

How do you suggest service be accomplished? Circle one

- Sheriff/Deputy
- Spouse pick up at Sheriff Department
- Spouse to pick up at Lemon & Morrow office and sign acknowledgement of Service
- Spouse's Attorney to accept service
- Other, please explain: _____