

**FAMILY LAW CLIENT QUESTIONNAIRE**

*April 2013*

Please complete this questionnaire. If you will spend the time to complete all items, you will give us the background information necessary to begin to understand the complexity of the personal aspects of your family law problem. All information will be held in strict confidence.

Please DO NOT skip a question and leave the answer blank. The staff at Evans Family Law Group are trained to follow up with you on any blank questions. Please indicate some answer to all questions, even if “n/a” or “none.”

**Information About You and Your Spouse**

**\*\* Please fill in all blanks \*\***

**Please give your full legal name, date and place of birth, Social Security number, and driver’s license number:**

Name: \_\_\_\_\_ Maiden name: \_\_\_\_\_  
Date of birth: \_\_\_\_\_  
Place of birth: \_\_\_\_\_  
Social Security No.: \_\_\_\_\_  
Driver’s Lic. / State: \_\_\_\_\_ / \_\_\_\_\_

**Please give the full legal name and requested information for your spouse:**

Name: \_\_\_\_\_  
Maiden name: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Social Security No.: \_\_\_\_\_  
Driver’s Lic. / State: \_\_\_\_\_ / \_\_\_\_\_

**Where are you living now?**

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip : \_\_\_\_\_

How Long in State? \_\_\_\_\_ County? \_\_\_\_\_

County of residence: \_\_\_\_\_

Residence telephone: \_\_\_\_\_

Other telephone numbers: \_\_\_\_\_

Do you own or rent where you currently reside? \_\_\_\_\_

If you rent, when does your lease expire: \_\_\_\_\_

**Date of marriage:** \_\_\_\_\_ **Date of Separation:** \_\_\_\_\_

**Location/Place of Marriage:** \_\_\_\_\_

Describe primary reason(s) for Separation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Is your spouse aware that you are considering divorce?**  YES  NO **Is your spouse willing to agree to the divorce?**  YES  NO

**Please complete the following concerning your employment:**

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Full address: \_\_\_\_\_

Telephone number of employer \_\_\_\_\_

Gross salary/ month: \$ \_\_\_\_\_ Annual Income: \$ \_\_\_\_\_ Length

of employment: \_\_\_\_\_ Education: \_\_\_\_\_

\_\_\_\_\_ Training: \_\_\_\_\_

\_\_\_\_\_ Describe

any bonuses, commissions, or other financial benefits provided by your employment in addition to salary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Where is your spouse living and what is his/her telephone number?**

Street address: \_\_\_\_\_ City: \_\_\_\_\_  
\_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone  
number: \_\_\_\_\_ **Provide the**

**following information concerning the employment of your spouse:**

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Full address: \_\_\_\_\_

Telephone number of employer: \_\_\_\_\_

Gross salary/ month: \$ \_\_\_\_\_ Annual Income: \$ \_\_\_\_\_ Length  
of employment: \_\_\_\_\_

Education/Training: \_\_\_\_\_

Describe any bonuses, commissions, or other financial benefits provided by your spouse'  
employment in addition to salary: \_\_\_\_\_

\_\_\_\_\_  
-

\_\_\_\_\_  
-

**Marriage Counselor, if applicable:**

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

Address & Phone #: \_\_\_\_\_

Dates of Counseling: \_\_\_\_\_

**Check as appropriate if your marital difficulties involve any of the following:**

- |  |  |
|--|--|
| <input type="checkbox"/> Incompatibility       | <input type="checkbox"/> Drugs/alcohol             |
| <input type="checkbox"/> Sexual disappointment | <input type="checkbox"/> Financial dispute         |
| <input type="checkbox"/> Sexual infidelity     | <input type="checkbox"/> Physical violence         |
| <input type="checkbox"/> Not Cohabiting (3yrs) | <input type="checkbox"/> Religion                  |
| <input type="checkbox"/> Abandonment           | <input type="checkbox"/> Mental Institution (3yrs) |

Other: \_\_\_\_\_. Describe \_\_\_\_\_

**Has your spouse been violent toward you in the past?**  Yes  No

If yes, give dates and times and describe each incident in detail: \_\_\_\_\_

---

---

---

---

---

---

**Have you or your spouse ever filed for a divorce?**  Yes  No

If so, when, where, and against whom? \_\_\_\_\_

---

**Does your spouse now have an attorney?**  Yes  No

If so, Name & Contact Information: \_\_\_\_\_

---

**Is your spouse requesting a name change or prior name be restored?**  Yes  No

If yes, state name requested in full: \_\_\_\_\_

**Have you been married before?**  Yes  No If Yes, how many times? \_\_\_\_\_

In what county and state have you been divorced? \_\_\_\_\_ In

what county and state have you been divorced? \_\_\_\_\_

**State the name of each of your former spouses, date of divorce from each former spouse, and county where each divorce was granted:**

|        |                 |                   |             |
|--------|-----------------|-------------------|-------------|
| _____  | _____           | _____             | Name/Former |
| Spouse | Date of Divorce | County of Divorce |             |
| _____  | _____           | _____             | Name/Former |
| Spouse | Date of Divorce | County of Divorce |             |

Has your spouse been married before?  Yes  No If Yes, how many times? \_\_\_\_\_

**State the name of each of your spouse's former spouses, date of each divorce and county where each divorce was granted:**

|                |                 |                   |      |
|----------------|-----------------|-------------------|------|
| _____          | _____           | _____             | Name |
| of spouse's ex | Date of Divorce | County of Divorce |      |

\_\_\_\_\_  
\_ Name of spouse's ex      Date of Divorce      County of Divorce      **Information on Children**

**If any children born during your marriage, answer all questions:**

Name of child: \_\_\_\_\_ Sex: \_\_\_\_\_

Date and place of birth: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

Driver's Lic./State: \_\_\_\_\_ / \_\_\_\_\_

if any: \_\_\_\_\_

Disability,

Child's address: \_\_\_\_\_

Name of child:

\_\_\_\_\_ Sex: \_\_\_\_\_

Date and place of birth: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

Driver's Lic./State: \_\_\_\_\_ / \_\_\_\_\_

if any: \_\_\_\_\_

Disability,

Child's address: \_\_\_\_\_

Name of child: \_\_\_\_\_ Sex: \_\_\_\_\_

Date and place of birth: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

Driver's Lic./State: \_\_\_\_\_ / \_\_\_\_\_

if any: \_\_\_\_\_

Disability,

Child's address: \_\_\_\_\_

Name of child: \_\_\_\_\_ Sex: \_\_\_\_\_

Date and place of birth: \_\_\_\_\_

Social Security No.: \_\_\_\_\_

Driver's Lic./State: \_\_\_\_\_ / \_\_\_\_\_

if any: \_\_\_\_\_

Disability,

Child's address: \_\_\_\_\_

**Do any court Orders exist re: the children of your marriage?**     YES     NO

*Example: Child support orders from Attorney General's Office*

If yes, County and State: \_\_\_\_\_ Date Rendered: \_\_\_\_\_

**Are there any questions of paternity that need to be addressed?**     YES     NO *If*

*so, please discuss with the Attorney privately and as soon as possible*

**If there are any minor children of you or your spouse from a prior relationship (marriage, living together, or otherwise), answer all questions:**

Name of child: \_\_\_\_\_ Sex: \_\_\_\_\_ Date  
and place of birth: \_\_\_\_\_

Disability, if any: \_\_\_\_\_

With whom Child resides: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name of child: \_\_\_\_\_ Sex: \_\_\_\_\_

Date and place of birth: \_\_\_\_\_ Disability,  
if any: \_\_\_\_\_

With whom Child resides: \_\_\_\_\_

If there is court ordered visitation, what are the terms: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Do you pay or receive child support?** \_\_\_\_\_

Amount of support: \_\_\_\_\_ per \_\_\_\_\_

When were you first ordered to start paying? \_\_\_\_\_

Are you currently in Arrears?  Yes  No How much? \$ \_\_\_\_\_

Is there an Attorney General Order/Case:  Yes  No \_\_\_\_\_ Is

there an previous private Order/case:  Yes  No

**Does your Spouse pay or receive child support?** \_\_\_\_\_ Describe

child support: \_\_\_\_\_ per \_\_\_\_\_

When was your spouse first ordered pay? \_\_\_\_\_

Are you currently in Arrears?  Yes  No How much? \$ \_\_\_\_\_

Is there an Attorney General Order/Case:  Yes  No \_\_\_\_\_

Is there an previous private Order/case:  Yes  No \_\_\_\_\_

**Are you or your spouse currently under any enforcement proceedings or threat of enforcement related to child support?**  Yes  No If yes, please describe: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

– **Custody of the Children**

**Will there be agreement on custody of the children?**  YES  NO  UNKNOWN

If yes, will primary custody be with?  Mom  Dad  Neither  Other *Note: This means who will the children primarily live with, who decides their residency?*

**Will the parents be named Joint Managing Conservators?**  YES  NO

*Note: This is the presumption under Texas law. Typical exceptions, to avoid appointment of both parents as joint managing conservators, are things such as family violence, issues related to alcohol, physical or other abuse, criminal history etc ... If you are unsure, you need to discuss this in detail with the Attorney.*

**Will one parent be named as Sole Managing Conservator?**  YES  NO

*If yes, please describe reasons to overcome the presumption of joint managing conservatorship as this information may be required to be included in the Decree of Divorce or presented to the Court upon finalizing your Divorce:* \_\_\_\_\_

\_\_\_\_\_

—

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Is there any concern with both parents having access to information related to the Children and the right to confer with professionals related to the Children? For example: access to medical records, educational records, and the right to consult with educators, medical or mental health providers for the Children:**  YES  NO

*If Yes, please detail the reasons for limiting, restricting, or prohibiting a parent in this regard as this information may be required to be included in the Decree of Divorce or presented to the Court upon finalizing your Divorce:* \_\_\_\_\_

\_\_\_\_\_

—

\_\_\_\_\_

\_\_\_\_\_

**The Texas Family Code allocates the rights and duties of parents and parents may likewise enter into an agreed “parenting plan” which allocates these rights and duties between them by agreement. These decisions may be made “jointly” by agreement between the parents, “exclusively” by one parent with or without first consulting the other**

parent, or “independently” meaning each parent may independently make these decisions.

Below, please indicate “M” for “Mom” or “D” for “Dad” in addition to the following:

- “J” decisions to be made jointly and by agreement between the parents
- “E” decisions to be made exclusively by one parent
- “I” decisions to be made independently by either parent
- “C” parents are required to consult the other parent in advance
- “No C” parents are not required to consult the other parent in advance
- “T” “tie breaker”, meaning the parent indicated, M or D, has the ultimate right

to break a tie and make a particular decision for the child if the parents are unable to reach agreement.

**Describe how decisions related to the Children are to be made under the Family Code:**

**Type of Decision** **M or D + J, E, I, C, No C, T**

1. Medical, dental, invasive surgical treatment \_\_\_\_\_

*Note: Unless agreed to otherwise, both parents have the right, per the Texas Family Code, to make decisions in the event of an emergency related to the Child that does not involve invasive surgical treatment.*

2. Psychiatric, psychological, or other mental health treatment \_\_\_\_\_

3. Legal matters or decision with legal effect on behalf of the Children \_\_\_\_\_

4. Marriage and enlistment into the armed forces \_\_\_\_\_

5. Education, school, or education related decisions \_\_\_\_\_

6. The right to and manage the services and earnings of the Children \_\_\_\_\_

7. Right to act as agent of Child in relation to the Child’s estate \_\_\_\_\_

Unknown, undecided, or “other”, or have further questions, please detail to discuss with Attorney: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Possession and Access for the Children**



**Describe the agreement will be regarding possession and access/visitation of the children during school:** *Note: Any questions, please call to discuss with the attorney*

- (1) Standard Possession Order
- (2) Expanded Standard Possession Order
- (3) Modified expanded/standard possession  (*describe below*)
- (4) “2-2-3” Non Wrap Possession Order
- (5) “2-2-3” Wrap Possession Order  (6) Alternating Weekly possession schedule
- (7) Firefighter’s schedule
- (8) Custom order, something other than above  (*describe below*)

If the agreement related to visitation and possession of the children will vary from one of the version stated above, please detail as much as possible the terms of the agreement for visitation:

---

---

---

---

---

---

---

---

---

---

**Holidays & Summer**

Holidays are generally “split” in the Texas Family Code. Under the standard Holiday schedule, parents who reside within 100 miles of each other split the Christmas Holiday alternating in each year which parent has the first part of Christmas and the latter part of Christmas. The parent who has the latter part of the Christmas Holiday gets the Children for the Thanksgiving holiday and the parents will alternate Spring Break.

For parents within 100 miles, Summer is typically 30 days in the month of July or can be broken up as designated by that parent who has the extended Summer possession time. However, the Thursday periods of possession generally do *not* occur during the Summer but the weekend schedule continues. During the Summer period of possession, the parent without the extended Summer possession has the right to “block out” one weekend during the extended summer possession and one weekend outside of the extended summer possession.

If parents live over 100 miles apart, the difference is that this parent would have every Spring Break Holiday and Summer possession is extended to 42 days rather than 30.

However, in an Agreed Divorce, parents can choose a parenting plan for holidays that they believe works best for them and that is in the best interest of their Children.

**Indicate what are the terms of your agreement for Holiday Possession and Access:**

**Christmas**  Standard  Other (Please detail below)

*Which parent will have first part of Christmas Odd Years* Mom  Dad

*Which parent will have first part of Christmas even Years* Mom  Dad

---

---

---

---

---

**Thanksgiving**  Standard  Other (Please detail below)

---

---

**Summer**  Standard  Other (Please detail below)

---

---

**Summer**  2 Weeks Alternating, as described below

---

---

---

*Note: A common option in the Summer in Agreed Divorces is to allow each parent to have a period of 2 weeks of possession and access to allow for "summer vacation". Typically, the agreement is in alternating years one parent has the first right by April 1<sup>st</sup> to designate their 2 weeks and then the other parent designates their 2 weeks by April 15<sup>th</sup> and then vice versa in the alternating years. In the absence of a timely designation, the 2 weeks usually is first 2 weeks of July and then the first 2 weeks of August as a default.*

---

**Spring Break**      Standard         Other    (Please detail below)

---

**Father's Day Weekend** Standard      Other    (Please detail below)

---

---

**Mother's Day Weekend**      Standard      Other    (Please detail below)

---

---

**Child's Birthday**      Standard         Other    (Please detail below)

---

---

---

*Note: The standard provision on the child's birthday is that the parent then not otherwise entitled to possession on the day of the Child's actual birthday would have the right to a visitation from 6:00 pm – 8:00 pm on the actual day of the Child's birthday, provided the parent picks up the kiddo from the other parent's location and returns the Child to the parent's location.*

**The following are options that are not "standard" in the Holiday section of the Texas Family Code, but are options which I have seen parents include in their parenting plans in Agreed Divorces. If the box is "checked" it tells the Attorney you want to include a provision related to that Holiday:**

**Parent's Birthday**       (Please detail below)

---

---

---

*Note: While it's not "standard" in the Family Code, the standard provision here on a parent's birthday is similar to that of the Child's birthday that the parent then not otherwise entitled to possession on the day of the parent's actual birthday would have the right to a visitation from 6:00 pm – 8:00 pm on the actual day of the parent's birthday, provided the parent picks up the kiddo from the other parent's location and returns the Child to the parent's location.*

**Easter Sunday in Even Years**      Mom      Dad

---

---

---

**Easter Sunday in Odd Numbered Years** Mom  Dad

---

---

---

**Memorial Weekend in Even Numbered Years** Mom  Dad

---

---

---

**Memorial Weekend in Odd Numbered Years** Mom  Dad

---

---

---

**July 4<sup>th</sup> In Even Numbered Years** Mom  Dad

---

---

---

**July 4<sup>th</sup> In Odd Numbered Years** Mom  Dad

---

---

---

**Labor Day Weekend in Even Numbered Years** Mom  Dad

---

---

---

**Labor Day Weekend in Odd Numbered Years** Mom  Dad

---

---

---

**Extra-Curricular Activities**

---

**If your children are involved in extra-curricular activities, please describe them:**

---

---

---

**With regard to extra-curricular activities, what is the agreement between you and your spouse with regard to how to (1) enroll or select and register, (2) pay for, and (3) transport the Children to their extra-curricular activities (particularly keeping in mind whether or not they can be scheduled during times that may occur on the other parent’s periods of possession and visitation)?**

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

*Note: if this is an issue, there are many options related to extra-curricular activities and you may need to discuss with the Attorney. Generally, most Agreed Divorces provide that parents will first attempt to agree on extra-curricular activities and, if agreed, the parents split the costs of such activity. In our general experience, most Agreed Divorces include a provision that allow each parent to sign the Child up for 1 extra-curricular activity at a time which may or may not occur on the other parent’s time. Our language generally gives preference to activities the Child has been involved or is expressing an interest and both parents are required to confer with the other in advance to allow discussion and planning. If it is agreed, the parents split the costs and, if not, the enrolling parent pays all costs but the parents publish the schedule and share transportation regardless whether it is the extracurricular activity preferred by the parent then in possession or visitation with the kiddo. However, this like all other parts of a parenting plan in an Agreed Divorce is to be discussed and agreed upon by the parents in accordance to what they believe is in the best interest of their kiddo.*

**SAMPLE PROVISION RE: *Extracurricular Activities***

---

*The Court finds that the parties have agreed and IT IS ORDERED AND DECREED that each party shall have the right to enroll the child in no more than (1) extra-curricular activity at a time provided such activity does not impinge on the other party's period or periods of possession of the child. By way of clarification, unless otherwise expressly*

agreed and signed by both parties, the child shall not be enrolled in any more than a total of two (2) extra-curricular activities at a time, with each party authorized to enroll the child in one (1) activity at a time subject to the terms and conditions set forth herein.

*The Court finds that the parties have agreed and IT IS ORDERED AND DECREED that if a child is unilaterally enrolled into an extracurricular activity, then, absent a written agreement from the other party to share the cost of the activity, the enrolling party will be solely responsible for all costs and transportation associated with the activity.*

*The Court finds that the parties have agreed and IT IS ORDERED AND DECREED that neither party shall enroll the child the subject of this suit in an extracurricular activity that impinges or interferes with the other party's period or periods of possession of the child without the express written agreement of the other party. In the event the child is enrolled in an extracurricular activity that has been agreed upon by the parties, the parties stipulate, agree, and*

*IT IS FURTHER ORDERED AND DECREED the parties shall equally share and be responsible for the costs associated with the agreed upon extracurricular activity.*

*IT IS FURTHER ORDERED AND DECREED the parties agree to provide transportation to and from the activities, practices or other events conducted as part of the agreed upon extracurricular activity. In the event a party is unable to transport the child on a particular day, that party shall contact and notify the non-possessory party to see if appropriate arrangements can be made for the child to attend.*

**If a child is 3 years of age or under, will there be any special modification for visitation?**

Yes  No If yes, please describe: \_\_\_\_\_

---

---

---

**Are there any long distance or travel considerations for visitation by a parent with their children?**  Yes  No If yes, please describe: \_\_\_\_\_

---

---

**What are the terms of the agreement regarding long distance travel?** \_\_\_\_\_

---

---

---

---

*Note: For example, who will pay travel expenses? Who will accompany the children? Are there any particular restrictions on the type of travel such as no commercial bus or non-stop flights?*

**Are there special considerations or restrictions for international travel and the Children?**

Yes  No **If yes, please describe:** \_\_\_\_\_

---

---

---

---

**Will there be special considerations to apply for & maintain passports?**  Yes  No

If yes, please describe: \_\_\_\_\_

---

---

### **Electronic and Telephone Contact with Children**

Will there be any agreements or special considerations to allow the children and a parent or both parents to have telephone and/or electronic communication with the other parent (i.e. skype, email, text etc): \_\_\_\_\_

---

---

---

---

### **Geographical Restriction for the Children's Primary Residence**

**What will the geographical restriction be on where the Children can reside?**

(1) **Same County as Filing Petition for Divorce**

*Example: Travis County*

(2) **Same County and Surrounding Counties**

*Example: Travis County & Contiguous Counties*

(3) **School District or Surrounding Districts**  *(describe below)*



Example: Austin Independent School District

(4) **Attendance Zone of a Child's school**  (describe below) Example:  
Attendance Zone of Kiker Elementary School

(5) **A defined mileage radius**  (describe below)  
Example: 20 miles from Child's School or Resident of a Parent

(6) **State of Texas**

(7) **Continental United States**

(8) **No restriction**

(9) **Other, to be described below**  (describe below)

---

---

---

---

### Child Support

#### **Describe your agreement regarding child support:**

Who will pay child support:  Mom  Dad  Neither How much: \$\_\_\_\_\_

Is there a lump sum to be paid for child support?  Yes  No If yes, how much: \$\_\_\_\_\_ Is  
support to be paid Monthly, Bi-Monthly, or Every 2 weeks (circle one)

Will support payments be withheld, i.e. "garnished", from paychecks:  Yes  No

Will a party purchase life insurance to insure child support obligation?  Yes  No.

If yes, which party be required: Mom  Dad  How much will policy be? \$\_\_\_\_\_

If other, explain: \_\_\_\_\_

---

---

Will there be any agreement for college related expenses or education expenses beyond high  
school?  Yes  No. If yes, explain: \_\_\_\_\_

---

---

---

---

*Note: The law does not obligate a parent to support a child, including education/college, one the child has turned 18 years of age and is no longer enrolled full-time in high school earning a high school diploma or GED. However, parents can agree to make arrangement contractually which may be incorporated in their Decree of Divorce. Because a Decree of Divorce can be both the Order of the Court and a contract executed by the parties, this kind of provision would be enforceable in the nature of a contract.*

### **Health Insurance for the Children**

Is/are the children current covered by health insurance?  Yes  No.

Who provides health insurance?  Mom  Dad  Neither  Other

Who is the health insurance provider: \_\_\_\_\_

What is the policy number: \_\_\_\_\_

What is the amount of the monthly premium: \_\_\_\_\_

If other, please describe: \_\_\_\_\_

---

Is the current health insurance policy acquired through work or privately? \_\_\_\_\_

Who will continue coverage for children after divorce? \_\_\_\_\_

If different, name of company covering spouses: \_\_\_\_\_

Insuring life of: \_\_\_\_\_

Policy #: \_\_\_\_\_ Work or Privately acquired? \_\_\_\_\_

Will spouse elect cobra coverage post divorce? (*may do so up to 36 months*):  Yes  No

If spouse will make election for cobra, please describe: \_\_\_\_\_

---

**Is there a health savings account through a parent's employment?**  Yes  No. If yes, please describe any terms of agreement on how these funds are to be applied and set forth in the Decree of Divorce: \_\_\_\_\_:

---

---

**Are there any special considerations or restrictions related to the HSA to be set forth in the Decree?** \_\_\_\_\_

---

---

**Please describe the agreement regarding providing health insurance for the children postdivorce:** \_\_\_\_\_

\_\_\_\_\_

**Please describe the agreement for allocating between the parents out of pocket medical expenses that are not reimbursed by health insurance:**

\_\_\_\_\_

**Is there agreement to provide, if eligible, coverage for the Children beyond age 18? If yes, please describe the agreement:** \_\_\_\_\_

\_\_\_\_\_

**Other than health insurance, are there other insurance considerations to be incorporated in the Decree of Divorce such as dental, vision, or otherwise:** \_\_\_\_\_

\_\_\_\_\_

**Do any of the children have special needs or disabilities that will require long-term support or that render them incapable of supporting themselves financially or requiring long-term care or direct supervision? If yes, please describe the special need or disability:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**If your child has medical prescriptions, please describe:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**If a child does have special needs or disability as stated above, if there is an agreement for long term support for such child please detail the terms of such agreement:** \_\_\_\_\_

\_\_\_\_\_

---

**If necessary, please provide any additional information regarding your agreement or other special considerations related to child support:** \_\_\_\_\_

**List all property (other than furniture and clothing) owned by the children, if any (including any property you or someone else is holding for the benefit of the Children):**

**Are there any financial accounts in the name of your children, such as savings, checking, education (529) or custodial?**  No  Yes If yes, give following: information:

Financial Institution: \_\_\_\_\_ Amount on Deposit: \$ \_\_\_\_\_  
Type of Account: \_\_\_\_\_ Style of Account: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_

What is the agreement with regard to how this account will be managed post-divorce? \_\_\_\_\_

Financial Institution: \_\_\_\_\_ Amount on Deposit: \$ \_\_\_\_\_  
Type of Account: \_\_\_\_\_ Style of Account: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_

What is the agreement with regard to how this account will be managed post-divorce? \_\_\_\_\_

**Does anyone other than your spouse or your children live with you?**  No  Yes

If yes, please describe: \_\_\_\_\_

---

**ASSETS AND LIABILITIES**

**Real Estate:**

Address of Property #1: \_\_\_\_\_

Mortgage Company: \_\_\_\_\_ Year bought: \_\_\_\_\_

Balance owed: \$ \_\_\_\_\_ Monthly payments: \$ \_\_\_\_\_

Escrow taxes & insurance?  Yes  No. If no, how are they paid? \_\_\_\_\_

In who's name(s) is the note on property? \_\_\_\_\_

In who's name(s) is the title on property? \_\_\_\_\_

Amount of original loan: \$ \_\_\_\_\_ Date original loan: \_\_\_\_\_

To whom loan is made payable to: \_\_\_\_\_

\* Volume # \_\_\_\_\_ page # \_\_\_\_\_ Deed of Trust Records of \_\_\_\_\_ (County)

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other *see below "disposition of real estate"*

**Legal description of the property:** *(This is the "lot and block" description you may obtain from your property tax records, deed, or other closing documentation.)* \_\_\_\_\_

---

\* *Check your closing documents for the volume and page references*

Address of Property #2: \_\_\_\_\_

Mortgage Company: \_\_\_\_\_ Year bought: \_\_\_\_\_

Balance owed: \$ \_\_\_\_\_ Monthly payments: \$ \_\_\_\_\_

Escrow taxes & insurance?  Yes  No. If no, how are they paid? \_\_\_\_\_

In who's name(s) is the note on property? \_\_\_\_\_

In who's name(s) is the title on property? \_\_\_\_\_

Amount of original loan: \$ \_\_\_\_\_ Date original loan: \_\_\_\_\_

To whom loan is made payable to: \_\_\_\_\_

\* Volume # \_\_\_\_\_ page # \_\_\_\_\_ Deed of Trust Records of \_\_\_\_\_ (County)

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other *see below "disposition of real estate"*

**Legal description of the property:** *(This is the "lot and block" description you may obtain from your property tax records, deed, or other closing documentation.)* \_\_\_\_\_

---

---

**Special Consideration for Disposition of Real Estate** *Print and repeat as necessary for each property*

**For any of the real estate properties listed above, is there agreement that one or more of them will be sold?**  Yes  No. If yes, which ones: \_\_\_\_\_

**If you answered yes, the please answer the following:**

**Is there agreement on terms of listing and sale of the property?**  Yes  No If yes, please describe: \_\_\_\_\_

**Is there agreement on the broker/realtor for listing & marketing the property?**

Yes  No If yes, please give name and contact information for broker/realtor: \_\_\_\_\_

In the event there is disagreement over terms of the sale and/or marketing of the property, would you be willing to allow any one of the following methods to resolve the disagreement (so as to avoid having to return to court to request a judge to decide):

Allow realtor to determine  Binding mediation  Party in possession determines  
 Other, or describe alternatives in Decree. If so, please describe: \_\_\_\_\_

**Will there be any special considerations in the sale to account for?**  Yes  No If yes, please describe: \_\_\_\_\_

*Note: At times parties agree to use the proceeds from the sale of a residence to be applied at the time of closing to specified debts or liabilities of the parties, such as credit cards. The*

*Decree of Divorce can be written in such a way to specify that at the time of closing to address this kind of situation.*

**Is there agreement one party will retain while the other refinances?**  Yes  No If yes, please describe the terms of your agreement regarding refinancing: \_\_\_\_\_

*Note: In a situation when one spouse will retain the residence but the mortgage is in the name of both parties, consider whether there should be a specified period of time by which the residence must be refinanced or sold.*

**If any of the real estate properties listed above are not to be sold, what are the terms of your agreement for use post-divorce?** \_\_\_\_\_

**Motor Vehicles, Boats, Airplanes, Cycles, Trailers:**

Year \_\_\_\_\_ Make \_\_\_\_\_ Model: \_\_\_\_\_

VIN # \_\_\_\_\_ Balance of Lien \$ \_\_\_\_\_

Lien holder (bank): \_\_\_\_\_ Year Acquired: \_\_\_\_\_

In who's name(s) is the loan on the vehicle? \_\_\_\_\_

In who's name(s) is the title on the vehicle? \_\_\_\_\_

Will transfer of title on the vehicle be required?  Yes  No To whom? \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model: \_\_\_\_\_

VIN # \_\_\_\_\_ Balance of Lien \$ \_\_\_\_\_

Lien holder (bank): \_\_\_\_\_ Year Acquired: \_\_\_\_\_

In who's name(s) is the loan on the vehicle? \_\_\_\_\_

In who's name(s) is the title on the vehicle? \_\_\_\_\_

Will transfer of title on the vehicle be required?  Yes  No To whom? \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Model: \_\_\_\_\_

VIN # \_\_\_\_\_ Balance of Lien \$ \_\_\_\_\_

Lien holder (bank): \_\_\_\_\_ Year Acquired: \_\_\_\_\_

In who's name(s) is the loan on the vehicle? \_\_\_\_\_

In who's name(s) is the title on the vehicle? \_\_\_\_\_

Will transfer of title on the vehicle be required?  Yes  No To whom? \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

**Bank Accounts, Savings Accounts, C.D. 's, Credit Union, Savings Bonds:**

Financial Institution: \_\_\_\_\_ Amount on Deposit: \$ \_\_\_\_\_

Type of Account: \_\_\_\_\_ Style of Account: \_\_\_\_\_

Last 4 Numbers on Account: \_\_\_\_\_ Primary User: \_\_\_\_\_

Name(s) on withdrawal card: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

Financial Institution: \_\_\_\_\_ Amount on Deposit: \$ \_\_\_\_\_

Type of Account: \_\_\_\_\_ Style of Account: \_\_\_\_\_

Last 4 Numbers on Account: \_\_\_\_\_ Primary User: \_\_\_\_\_

Name(s) on withdrawal card: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

Financial Institution: \_\_\_\_\_ Amount on Deposit: \$ \_\_\_\_\_

Type of Account: \_\_\_\_\_ Style of Account: \_\_\_\_\_

Last 4 Numbers on Account: \_\_\_\_\_ Primary User: \_\_\_\_\_

Name(s) on withdrawal card: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

Financial Institution: \_\_\_\_\_ Amount on Deposit: \$ \_\_\_\_\_

Type of Account: \_\_\_\_\_ Style of Account: \_\_\_\_\_

Last 4 Numbers on Account: \_\_\_\_\_ Primary User: \_\_\_\_\_

Name(s) on withdrawal card: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

**Life Insurance:**

Name of company: \_\_\_\_\_

Insuring life of: \_\_\_\_\_

Whole, Term, or Universal \_\_\_\_\_ Policy #: \_\_\_\_\_

Work or Privately acquired? \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_



Name of company: \_\_\_\_\_  
Insuring life of: \_\_\_\_\_  
Whole, Term, or Universal \_\_\_\_\_ Policy #: \_\_\_\_\_  
Work or Privately acquired? \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

**Stocks, Mutual Funds, Personal Investments, etc.:**

Financial Institution holding investment: \_\_\_\_\_  
Name on Account: \_\_\_\_\_ Type of Account: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Estimated value: \$ \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

Financial Institution holding investment: \_\_\_\_\_  
Name on Account: \_\_\_\_\_ Type of Account: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Estimated value: \$ \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

Financial Institution holding investment: \_\_\_\_\_  
Name on Account: \_\_\_\_\_ Type of Account: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Estimated value: \$ \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

Financial Institution holding investment: \_\_\_\_\_  
Name on Account: \_\_\_\_\_ Type of Account: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Estimated value: \$ \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

Financial Institution holding investment: \_\_\_\_\_  
Name on Account: \_\_\_\_\_ Type of Account: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Estimated value: \$ \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

**Pets & Livestock:**

Type of Animal \_\_\_\_\_ Breed: \_\_\_\_\_ Name: \_\_\_\_\_  
Description of Animal: \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or Special considerations  
after divorce? \_\_\_\_\_  
\_\_\_\_\_

Type of Animal \_\_\_\_\_ Breed: \_\_\_\_\_ Name: \_\_\_\_\_  
Description of Animal: \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or Special considerations  
after divorce? \_\_\_\_\_

**Retirement, Pensions, Other Company Benefits (See Additional Information Below)**

Do you participate in a retirement plan?  Yes  No Type of Plan: \_\_\_\_\_  
Financial Institution holding investment: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Estimated value: \$ \_\_\_\_\_  
Name and contact information for the plan administrator: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:  
\_\_\_\_\_

Does your spouse participate in a retirement plan?  Yes  No Type of Plan: \_\_\_\_\_  
Financial Institution holding investment: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Estimated value: \$ \_\_\_\_\_  
Name and contact information for the plan administrator: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:  
\_\_\_\_\_

Do you participate in a company savings plan?  Yes  No Type of Plan: \_\_\_\_\_  
How much is on deposit in that savings plan? \$ \_\_\_\_\_  
Financial Institution holding investment: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Account Holder: \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:  
\_\_\_\_\_

Does your spouse have a company savings plan?  Yes  No Type of Plan: \_\_\_\_\_  
If so, how much does your spouse have in that saving plan? \$ \_\_\_\_\_  
Financial Institution holding investment: \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Account Holder: \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:  
\_\_\_\_\_

**Miscellaneous Assets:**

Does anyone owe you or your spouse any money?  Yes  No

If yes, name of person owing money (debtor): \_\_\_\_\_  
Address of debtor: \_\_\_\_\_  
Date debt was created: \_\_\_\_\_  
Original Amount owed: \$\_\_\_\_\_ Is debt evidenced in writing?  Yes  No  
Reason for Debt? \_\_\_\_\_  
Describe who will be obligated on debt after divorce? H \_\_\_\_\_ % W \_\_\_\_\_ % or other:  
\_\_\_\_\_

If yes, name of person owing money (debtor): \_\_\_\_\_  
Address of debtor: \_\_\_\_\_  
Date debt was created: \_\_\_\_\_  
Original Amount owed: \$\_\_\_\_\_ Is debt evidenced in writing?  Yes  No  
Reason for Debt? \_\_\_\_\_  
Describe who will be obligated on debt after divorce? H \_\_\_\_\_ % W \_\_\_\_\_ % or  
other: \_\_\_\_\_

**Are you or your spouse involved in any lawsuits?**  Yes  No  
If so, explain \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

**Do you own any mineral interests (Oil & Gas)?**  Yes  No  
Describe: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_

**Do you or your spouse own any interest in a closely held corporation, partnership, joint venture, sole proprietorship, etc?**  Yes  No

Describe: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other \_\_\_\_\_ **Do**

**you or your spouse own any interest in a closely held corporation, partnership, joint venture, sole proprietorship, etc.?**  Yes  No.

Type of business interest:  Corporation  Partnership  JV  Sole Proprietorship  
Please describe for interest #1: \_\_\_\_\_

---

---

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:

---

---

Type of business interest:  Corporation  Partnership  JV  Sole Proprietorship  
Please describe for interest #2: \_\_\_\_\_

---

---

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:

---

---

Type of business interest:  Corporation  Partnership  JV  Sole Proprietorship  
Please describe for interest #3: \_\_\_\_\_

---

---

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:

---

---

**Spousal Maintenance a/k/a "Alimony"**

**Is there agreement to provide a spouse with Alimony following divorce?**  Yes  No

Who will pay Alimony:  Husband  Wife  Neither How much: \$\_\_\_\_\_

*Note: To qualify as Alimony for the IRS, Alimony must be made in monthly payments and cannot be a "substitution" for payments on debt or division of marital assets. If written properly, Alimony is tax deductible by the paying party ("obligor") but is taxable income to receiving party ("obligee"). In an agreement, there are no specific requirement as this can, within reason, be left to agreement of the parties. If you have questions please consult the Attorney.*

For what period of time will the Alimony be paid? \_\_\_\_\_

*Note: This is generally express in terms of months or years.*

Is support to be paid Monthly, Bi-Monthly, or Every 2 weeks (circle one)

Will the alimony payments be withheld, i.e. "garnished", from paychecks:  Yes  No

Will the payments "step-down" and be reduced over a period of time?  Yes  No

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Note: some parties agree to initially start Alimony at a certain rate and after a defined period of time it "steps-down" or reduces automatically.*

Will a party purchase life insurance to insure the alimony obligation?  Yes  No.

If yes, which party be required: Husband  Wife  How much will policy be? \$\_\_\_\_\_

If other, explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Summary of Debts**

**Debts: (Other than home and automobiles)**

Name of creditor: \_\_\_\_\_ Balance: \$\_\_\_\_\_

Last 4 Numbers on Account: \_\_\_\_\_ Primary User: \_\_\_\_\_

Who created debt: \_\_\_\_\_ Purpose of Debt: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:

\_\_\_\_\_

Name of creditor: \_\_\_\_\_ Balance: \$\_\_\_\_\_

Last 4 Numbers on Account: \_\_\_\_\_ Primary User: \_\_\_\_\_

Who created debt: \_\_\_\_\_ Purpose of Debt: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:

\_\_\_\_\_

Name of creditor: \_\_\_\_\_ Balance: \$\_\_\_\_\_

Last 4 Numbers on Account: \_\_\_\_\_ Primary User: \_\_\_\_\_

Who created debt: \_\_\_\_\_ Purpose of Debt: \_\_\_\_\_

Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:

\_\_\_\_\_

Name of creditor: \_\_\_\_\_ Balance: \$ \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Primary User: \_\_\_\_\_  
Who created debt: \_\_\_\_\_ Purpose of Debt: \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations: \_\_\_\_\_

Name of creditor: \_\_\_\_\_ Balance: \$ \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Primary User: \_\_\_\_\_  
Who created debt: \_\_\_\_\_ Purpose of Debt: \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations: \_\_\_\_\_

Name of creditor: \_\_\_\_\_ Balance: \$ \_\_\_\_\_  
Last 4 Numbers on Account: \_\_\_\_\_ Primary User: \_\_\_\_\_  
Who created debt: \_\_\_\_\_ Purpose of Debt: \_\_\_\_\_  
Proposed Division: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations: \_\_\_\_\_

**Income Taxes:**

**Have you filed an income tax return for all previous years?**

Yes  No . If yes, how filed in previous years:  Joint  Individual

Prepared by whom? \_\_\_\_\_

Describe agreement for filing of income taxes in year of divorce? \_\_\_\_\_

Refund anticipated for year of divorce?  Yes  No If yes, once refunds is received, describe agreement for division of same and how it received by other spouse:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Proposed Division of refund:** H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations: \_\_\_\_\_

**Are any fees owed for prior tax preparations:**  Yes  No If yes, please describe proposed division of this obligation: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations: \_\_\_\_\_

**Tax Arrearages**

**Do you and/or your spouse owe the IRS back taxes?**  Yes  No . If yes, please describe agreement for division of arrearage: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Do you and/or your spouse have any losses or other “carryovers” for purposes of the IRS that need to be considered?**  Yes  No . If yes, please describe agreement for division of same: : H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Do you and/or your spouse owe any tax arrearages (ex: property taxes)?**  Yes  No If yes, please describe type of arrearage, to whom the arrearage is owed, specifically what the arrearage relates to: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Describe proposed agreement for division of the same: H \_\_\_\_\_ % W \_\_\_\_\_ % Other or special considerations: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Dependency Exemptions for Children, if any:**

Have you and your spouse discussed claiming children on future tax returns?  Yes  No If yes, how filed in previous years:  Joint  Individual

Describe agreement for claiming children in future? (*for example: one spouse claims, spouses alternate claims, one spouse claims one child and another claims the other*): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*Note: If there is an agreement by the parents to claim a child or children as dependents, in order to formally comply with the IRS requirements, the parents need to execute and file with the IRS Form 8332. If there is an agreement in this regard between the parents to allocate the dependency exemption, language to this effect will be included in the Decree of Divorce requiring the parties to sign IRS Form 8332, which is a “Release of Claim to Exemption for Child of Divorced or Separated Parents”.*

*This form is available at our website at [www.evansfamilylawgroup.com](http://www.evansfamilylawgroup.com) , can be provided through our office or you may download the form at: [www.irs.gov](http://www.irs.gov) and search for form 8832*  
**Separate Property**

The term “separate property” mean property which (1) was owned or acquired by you **before** your marriage or (2) which was **inherited** either before or during your marriage, or (3) was received as a **gift** either before or during your marriage or (4) was **purchased with** the proceeds of sale of property which was separate property.

Do you own any separate property?  Yes  No

If yes, describe in detail your separate property or indicate clearly in the margins above which property is considered separate, otherwise the law will presume the property you have listed in this questionnaire was acquired during your marriage and is considered community property between you and your spouse: \_\_\_\_\_

---

---

---

---

---

**Describe your Primary Goals in Retaining our Office:**

---

---

---

---

---

**Describe any special considerations you wish our office to always keep in mind:**

---



---

---

---

---

---

**What are your most immediate and pressing needs, if any:**

---

---

---

---

---

**Mail**

Address you wish to receive mail from this office: \_\_\_\_\_

---

**Electronic Mail**

Electronic email address you wish to receive electronic mail from this office:

---

**Phone Contact**

Where do you prefer to be contacted/telephoned?

Office \_\_\_\_\_ Preferred time to call \_\_\_\_\_ Home  
\_\_\_\_\_ Preferred time to call \_\_\_\_\_ Other

---

I state that the information contained above is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature

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

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

**DIVISION OF RETIREMENT ACCOUNTS CHECKLIST**

**If part of your agreed division includes the division of an IRA, 401k, pension plan, defined benefit plan or other retirement plan then you will need to provide the following information:**

**Instructions:** This checklist refers to the “Participant” as the employee participating in the retirement plan, and the “Alternate Payee” as the spouse seeking her/his share of the retirement plan benefits. Please answer as many questions as you can and provide as much information as possible. If you have any questions, please contact our office.

**1. Provide the following information about the Participant (Employee):**

Name: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Address, City, State, Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**2. Provide the following information about the Alternate Payee (Spouse of Employee):**

Name: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Address, City, State, Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**3. Are the Participant and Alternate Payee’s divorced?  Yes  No**

What is the date of divorce \_\_\_\_\_ Date of separation \_\_\_\_\_

What was the date of marriage \_\_\_\_\_

**4. How many retirement plans does Participant (Employee) participate in?**

\_\_\_\_\_

**5. Is a prior spouse entitled to plan benefits with an existing QDRO?  Yes  No**

**6. Please provide the following information about the employer:**

Name of Employer: \_\_\_\_\_ E-mail address: \_\_\_\_\_  
Address, City, State, Zip: \_\_\_\_\_  
Employer Contact Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**7. Information about the Participant's employment history. Date Participant:**

Began employment: \_\_\_\_\_ Terminated employment: \_\_\_\_\_

Is Participant retired?  Yes  No

Is Participant currently receiving payments from the plan?  Yes  No

**8. Does Participant have plan assets with more than one employer?  Yes  No**

**9. What is/are the name of the plan(s):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**10. Is this a Federal civil service plan?  Yes  No**

**11. Is this a military plan?  Yes  No**

*If yes, what is the Participant's branch of service?* \_\_\_\_\_

**14. Only if available, provide copy of most recent plan(s) account statement or valuation.**

Is Available  Is *not* Available

**15. Please provide a copy of the first page and the page with QDRO reference ONLY of the divorce decree, separation agreement, or decree of separate maintenance.**

**Household Furnishings, Appliances, Etc**

Please identify all household furnishings, wall hangings, appliances, equipment, tools, firearms, etc. which have significant replacement cost or personal value to you which you would like to claim in this divorce as yours on a room to room basis or as you have agreed with your spouse to divide your assets:

| Room | Item | Date Acquired | Value | Division |
|------|------|---------------|-------|----------|
|------|------|---------------|-------|----------|

\_\_\_\_\_





### **Household Furnishings, Appliances, Etc**

Please identify all household furnishings, wall hangings, appliances, equipment, tools, firearms, etc. which have significant replacement cost or personal value to you which you would like to claim in this divorce as yours on a room to room basis or as you have agreed with your spouse to divide your assets:

| Room | Item | Date Acquired | Value | Division |
|------|------|---------------|-------|----------|
|------|------|---------------|-------|----------|

|  |  |
|--|--|
|  |  |
|--|--|





**Disclosure Disclaimer by Parties**

**If you and your spouse answer the questionnaire together**, please review the following disclaimers and sign below. It is not required that your spouse sign this document. The first disclaims that your spouse understand that Evans Family Law Group represents only the client and not the other spouse and that at any time any discussions had between Evans Family Law Group and the non client spouse should not be considered legal advice nor creating an attorney client relationship with the non client spouse. The second disclaims the parties have made a reasonable

disclosure of all property, both community and separate, and all financial obligations and they are contained within the Agreed Decree of Divorce.

***Disclaimer as to Representation***

This Agreement has been prepared by James W. Evans, attorney for CLIENT (name will appear in the Agreed Decree of Divorce). At the commencement of, and at all stages during, the negotiation of this Agreement, James W. Evans, the attorney for CLIENT informed all Parties that the attorney has acted solely as counsel for CLIENT and has not advised or represented NON CLIENT SPOUSE (Name will appear in Agreed Decree of Divorce) in any manner whatsoever. NON CLIENT SPOUSE, at the commencement of, and at all stages during, the negotiation of this Agreement has been told that he/she could and/or should be represented by his/her own counsel of his/her own choosing, but at all times has elected not to do so. Both Husband and Wife have read this Agreement carefully and thoroughly, fully understand each of its provisions, and, therefore, sign it freely and voluntarily.

***Disclosure Disclaimer***

Each party represents and warrants to the other party that he or she has, to the best of his or her ability, made to the other party a fair and reasonable disclosure of the nature and extent of the community property of the parties, including values, and financial obligations, contingent or otherwise before their execution of this *Agreed Decree of Divorce*. Each party additionally acknowledges that, before the signing of the agreement, he or she has been provided a fair and reasonable disclosure of the community property and financial obligations of the parties before the execution of this *Agreed Decree of Divorce*. Furthermore, and before the execution of this *Agreed Decree of Divorce*, each party has previously offered to provide, or has provided, to the other party all information and documentation pertaining to all community property, including income and value, and all financial obligations that have been requested by the other party. Each party acknowledges that he or she has, or reasonably could have had, full and complete knowledge of the community estate of the parties and of all financial obligations of the community estate of the parties.

---

**CLIENT SPOUSE SIGNATURE    NON CLIENT SPOUSE SIGNATURE    FIRM  
CONTACT INFORMATION**

**EVANS FAMILY LAW GROUP**

*FAMILY LAW ATTORNEY*

[WWW.EVANSFAMILYLAWGROUP.COM](http://WWW.EVANSFAMILYLAWGROUP.COM)

ATTORNEY

JAMES W. EVANS  
(512) 628-2571 DIRECT LINE  
(512) 689-8319 CELL  
(512) 628-2551 FAX  
[JIMMY@EVANSFLG.COM](mailto:JIMMY@EVANSFLG.COM)

PARALEGAL

DINAH LAFREY  
BOARD CERTIFIED (TBLS)  
(512) 628-2550  
[DINAH@EVANSFLG.COM](mailto:DINAH@EVANSFLG.COM)