

QUESTIONNAIRE

All Children of Marriage

Custody Joint Custody Wife Sole Custody Husband Sole Custody
Placement Placement with Wife Placement with Husband Shared Equal Placement W ___% H ___%
Tax Deductions of children Husband Claims # _____ Wife Claims # _____

<u>Names of All Children</u>	<u>Birthdate</u>	<u>Age</u>	<u>Social Security No.</u>	<u>Living With</u>
------------------------------	------------------	------------	----------------------------	--------------------

Attach additional list if necessary

Child support this family

<u>Wife</u>	<u>Husband</u>
Is Child Support Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	Is Child Support Paid <input type="checkbox"/> Yes <input type="checkbox"/> No
Case # _____	Case # _____
How Much \$ _____	How Much \$ _____
To Whom _____	To Whom _____

Other child support obligations to other children not of this family

Is Child Support Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	Is Child Support Paid <input type="checkbox"/> Yes <input type="checkbox"/> No
Case # _____	Case # _____
How Much \$ _____	How Much \$ _____

Have you entered into any written agreements as to support, legal custody, physical placement, visitation of the child(ren), maintenance, or property division. Yes No

Explain _____

Medical Insurance

<u>Who Covers Family</u>	
<u>Wife</u> <input type="checkbox"/>	<u>Husband</u> <input type="checkbox"/>
Insurance Company _____	Insurance Company _____

State Aid

Are you receiving any State Aid Yes No
 Explain _____

Armed Services

<u>Branch</u>	<u>Dates of Services</u>
_____	_____

Auto

Wife _____	_____
Husband _____	_____
Year	Make of Auto

Debts

<u>Creditor</u>	<u>Purpose</u>	<u>Balance</u>	<u>Monthly</u>	<u>Who Pays</u>
-----------------	----------------	----------------	----------------	-----------------

Attach additional list if necessary

WILL ONE OF YOU KEEP THE HOUSE? WIFE: _____ Husband: _____
 DO YOU PLAN TO SELL YOUR HOUSE? YES: _____ NO: _____

IS WIFE PREGNANT? YES NO

RETURN THIS QUESTIONNAIRE TO:

AFFORDABLE DIVORCE ASSISTANCE (ADA)

return to: ADA 582 S. Main Street, Fond du Lac, WI 54935

1-800-654-4889 or 920-929-7411

prosepsp@sbcglobal.net