QUESTIONNAIRE FORM

Tel # 714-229-1322 Fax # 714-849-5497
3001 Red Hill Ave Building 6 suite 210, Costa Mesa, CA 92626
info@divorce-paralegals.com

I. YOUR PERSONAL INFORMATION:

Full Name:	
Do you like to change your Last Name? If yes, write your Last Name:	
Date of Birth:	
Place of Birth:	
Complete Home Address:	
County of Home Address:	
Date lived at address since:	
E-Mail:	
To which address do you wish correspondence sent, or if you wish to have it sent to another address, provide that address here:	
Please list any other home addresses you have had for the past six (6) months:	

Telephone Numbers:			
Cell #:		Work:	
Please indicate any directions/restrictions in calling you:			
How would you like documents sent to you:	☐ By Email (Printer required) ☐ By USPS Mail ☐ Come in Person to our office		

II. INFORMATION ABOUT SPOUSE:

Full Name:	
Date of Birth:	
Place of Birth:	
Complete Home Address:	
County of Home Address:	
Date lived at address since:	

Telephone Numbers:			
Cell #:		Email:	

III. HISTORY OF THIS MARRIAGE:

Date of Marriage:	
Place of marriage:	
City:	
State:	
Country:	
Including this marriage, how many times have you been married?	
Including this marriage, how many times has your spouse been married?	
Are you and your spouse living together now?	
If not, when did you separate?	
Where were you living at the time of your separation?	
When was the last time you had sexual relations with your spouse?	

If separated, and if all your addresses since the separation are not listed above, please list all other addresses since the separation here:

	from		to	
	from		to	
	from		to	

Other than what is listed above, have you and your spouse lived together continuously throughout the marriage?	
If not, please explain:	

IV. INFORMATION ABOUT YOUR CHILDREN:

Full Name	Gender	Date of Birth	Place of Birth	Resides with

All addresses the children have lived for the past 5 years and with whom they lived:

Address	Lived with	From	To

Do any of your children have any physical or other problems that will be a factor in this case (i.e., learning disability, physical impairment, etc.)? If so, please explain:	
Do you anticipate a dispute about custody of the children?	

V. INFORMATION ABOUT YOUR EMPLOYMENT:

Are you employed?	
If yes, state your employer Name:	
State your employer complete Address:	
Job title:	
Type of job:	
Employed since:	
Gross yearly salary:	
Please state your education and vocational training (including numbers of years you attended high school and college, if applicable):	

VI. INFORMATION ABOUT YOUR SPOUSES'S EMPLOYMENT:

Is your spouse employed?	
If yes, state their employer Name:	
State employer complete Address (If known):	
Job title:	
Type of job:	
Employed since:	
Gross yearly salary:	
Please state his/her education and vocational training (including numbers of years he/she attended high school and college, if applicable):	

VII. INFORMATION ABOUT YOUR PRIOR MARRIAGE(S):

If you or your spouse have been married before this marriage, state name(s) of prior spouse(s) and how, when, and where prior marriage(s) were terminated:	
If there are any children from prior marriage(s) of you and/or your spouse, please list the names and ages of any children and state with whom such children live:	

VIII. PRIOR PROCEEDINGS:

Have there been any legal or other proceedings between you and the opposing party? If so, please describe:	

IX. RECONCILIATION:

Do you have an interest in reconciliation?	
Does your spouse, as far as you know?	
Have you tried marriage counseling? If so, when and with whom?	

X. OTHER:

Has your spouse consulted an attorney regarding this matter? If so, please indicate his/her name and address, if known:	
Have you consulted other attorneys regarding this matter? If so, please state who you have seen and when:	
Do you have a Will? If so, who are the beneficiaries?	
Do you have an accountant or have you ever used an accountant? If so, please state his/her name and address:	
Are there bank accounts, lines of credit, stock and investment accounts or other accounts to which your spouse has access? If so, please clarify:	
Does your spouse have in his or his possession credit cards for which you are responsible? If so, please specify:	
Have you ever signed anything which may affect the case, including prenuptial or postnuptial agreement(s), or other documents presented by your spouse? If so, please describe what you signed:	
Have you or your spouse sold any real property in the last five (5) years? If so, please specify:	

XI. COURT FEE WAIVER (ONLY FOR PEOPLE WITH NO OR LOW INCOME):

Employer Name	
Employer Address	
Do you receive any	☐ Food Stamps ☐ SSP ☐ Medical ☐ County Relief ☐ Cash AID
	☐ Other Please Explain
Gross monthly income	
How much cash you have	

Bank Name	Amount

Car, Boat / Other Vehicles			
Year Make and Model		Value	$
Year Make and Model		Value	$
Year Make and Model		Value	$

Any Real Estate Property		
Address	Value	How much you still owe
	$	
	$	
	$	

Monthly Expenses / Deduction	
1. Rent	$
2. Food	$
3. Utilities	$
4. Clothing	$
5. Laundry Cleaning	$
6. Medical Dental	$
7. Insurance – Life, Health etc	$
8. School, Child Care	$
9. Child Support (Another Marriage)	$
10. Spousal Support	$
11. Transportation, Gas, Repair, Auto Insurance	$
12. Any Other Payment List Below	

A		$	
B		$	
C		$	

13. Wages withheld by court orders	
Total Monthly Expenses	

XII. PLEASE EXPLAIN YOUR CASE IN DETAILS (SUCH AS):

Alimony	
Child Support	
Visitation	
Community Property	
Separate Property	
Medical Insurance	
Any other issue that you would like to include in your case	

Disclsoure:

- We are NOT Attorneys
- AFRIDI LEGAL AND FINANCIAL SVC, and AFRIDI IMMIGRATION AND LEGAL SVC is NOT a law firm.
- We cannot represent you in court.
- We cannot advise you about your legal rights or the law.
- We are Legal Document Assistant and Registered with County of Orange, California as an LDA.

Email or Call us for any question or information.