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BILL TURNER, ESQ.

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UNCONTESTED DIVORCE QUESTIONNAIRE WITH CHILDREN

Please write clearly and legibly and bring this with you to your consultation with us. Thank you.

Your Full Legal Name: _____ DOB _____

Maiden Name (if applicable): _____

Present Address:

(County) _____

Other persons living with you at your present address:

Name	Relationship to you
------	---------------------

_____	_____
_____	_____
_____	_____

Employed by:

Company: _____

Address: _____

Position/Title: _____ Wages/Salary (before taxes) \$ _____

Other income you receive:

_____	\$ _____
_____	\$ _____

This is your _____ (1st, 2nd, etc.) marriage.

Date of Marriage: _____

Married at (city, county, state): _____

Date of Separation: _____
(when you stopped living as husband and wife – not necessarily when one moved out)

Spouse's Full Legal Name: _____

Maiden Name (if applicable): _____

Date of Birth: _____

Spouse's Present Address:

Other persons living with your spouse at his/her present address:

Name Relationship to spouse

Employed by:

Company: _____

Address: _____

Position/Title: _____ Wages/Salary (before taxes) \$ _____

Other income he/she receives:

_____ \$ _____
_____ \$ _____

This is his/her _____ (1st, 2nd, etc.) marriage.

I (or my spouse) want(s) to be restored to my maiden name

I (or my spouse) want(s) to be restored to my previously married name

WRITE CLEARLY THE FULL NAME TO BE RESTORED

CHILDREN:

Children born of this marriage:

Name:	Sex	Age:	Date of Birth:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do the children have medical insurance? Y / N

Cost of medical insurance for the children (children only, not family policies): \$ _____/mo.

Who pays for the medical insurance: _____

Do the children have dental insurance? Y / N

Cost of dental insurance for the children (children only, not family policies): \$ _____/mo.

Who pays for the dental insurance: _____

Do the children have vision insurance? Y / N

Cost of vision insurance for the children (children only, not family policies): \$ _____/mo.

Who pays for the vision insurance: _____

Average daycare/afterschool costs for the child(ren): \$ _____/mo.

Any extraordinary costs for the child(ren): If so, explain: _____

Your other minor children:

Name:	Sex	Age:	Date of Birth:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do these children live with you? Y / N

Do you pay child support for these children?: Y / N If yes, how much per month: _____

Do you receive support for these children?: Y / N

If yes, how much per month: _____

If no, has a court ever ordered child support be paid? Y / N

Spouse's other minor children (not your biological children):

Name:	Sex	Age:	Date of Birth:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do these children live with spouse? Y / N

Does your spouse pay child support? Y / N If yes, how much per month: _____

Does your spouse receive child support? Y / N

If yes, how much per month: _____

If no, has a court ever ordered child support be paid? Y / N

(must provide a copy of any court order to be given credit for that child support)

CUSTODY:

MOM / DAD is the primary physical custodian

Joint legal custody

Mom has sole legal custody

Dad has sole legal custody

Primary physical custodian gets final decision making authority as to major matters

Other: _____

VISITATION:

Regular weekend visitation:

Every other weekend from _____ on Friday until _____ on Sunday

Every 1st and 3rd Friday at _____ until _____ on Sunday.

Alternate the 5th weekends (occurs 4 times per year)

Every 2nd and 4th Friday at _____ until _____ on Sunday

Alternate the 5th weekends (occurs 4 times per year)

Other: _____

Mid-week visitation:

None

Each week from _____ until _____

Only before weekend he/she does not have a weekend visitation from _____

_____ until _____

Other: _____

Summer Visitation:

- Week on / week off
 - Two weeks on / two weeks off
 - Non-custodial parent gets 1st -15th of June and July and custodial gets the second half of each month
 - Two weeks provided he/she gives me notice by _____ of each year.
 - Weeks can be put together
 - Weeks cannot be put together
 - Other: _____
-

Christmas (Winter) Break:

- We will exchange the child(ren) on December ____ at _____. I get the first half of the break (from end of school) during [EVEN / ODD] years and they get the second half (until the day before school starts back). We will alternate the next year.
 - We will exchange the child(ren) on December ____ at _____. I get the [FIRST / SECOND] half EACH year.
 - Other: _____
-

Thanksgiving:

- I get the whole break during [EVEN / ODD] years, they get the next year.
 - I get the first part of the break (from end of school) during [EVEN / ODD] years and they get the second part (until the day before school starts back). We will alternate the next year. We will exchange the child(ren) on _____.
 - Other: _____
-

Spring Break; Fall Break; Mid-Winter Break:

- We will alternate these breaks. [I / He] will get the first break after the divorce.
 - We will split each break as follows: _____
 - Other: _____
-

Monday holidays (MLK, Memorial Day, etc.) just attach to the weekend and whoever had the weekend gets the holiday too.

I want to specifically outline the holidays: _____

Birthdays:

Let them fall where they fall, each of us will have a weekend before or after anyway.

Visitation for the child's birthdays as follows: _____

Mom always gets Mother's Day

entire weekend

just the day from _____ until _____

Dad always gets Father's Day

entire weekend

just the day from _____ until _____

Restrictions or specifics for telephone contact: _____

Neither parent is to drink alcohol when they have the child(ren).

Neither parent is to have overnight guests of the opposite sex when the child(ren) are present

Responsibility of pick-up and drop-off: MOTHER or FATHER (circle one)

Other: _____

Do you want your spouse's visitation to be restricted/limited/supervised in any way? Y / N

If yes, explain: _____

(use additional pages if necessary)

REAL ESTATE:

Address of your home:

Do you rent or own your home: _____

If renting, name of landlord and amount of rent: _____ \$ _____ mo.

If owning:

When was real estate purchased: _____

Deed is in the name of: _____

Who holds the mortgage: _____

Monthly payments on the mortgage: \$ _____

Approximate value of the real estate: \$ _____

Approximate amount owing on mortgage: \$ _____

Other matters you feel I need to know about your real estate:

OTHER REAL ESTATE OWNED:

Address: Approximate Agerage: _____

When was real estate purchased: _____

Deed is in the name of: _____

Who holds the mortgage: _____

Monthly payments on the mortgage: \$ _____

Approximate value of the real estate: \$ _____

Approximate amount owing on mortgage: \$ _____

Other matters you feel I need to know about your real estate:

VEHICLES (including motorcycles, RVs and boats):

Year _____ Make: _____ Model: _____
When Purchased: _____
If owned free and clear, when was the last payment made: _____
Title in the name(s) of: _____
---I want this and will pay for it
---Spouse can have it if he/she pays for it
---other: _____

Year _____ Make: _____ Model: _____
When Purchased: _____
If owned free and clear, when was the last payment made: _____
Title in the name(s) of: _____
---I want this and will pay for it
---Spouse can have it if he/she pays for it
---other: _____

Year _____ Make: _____ Model: _____
When Purchased: _____
If owned free and clear, when was the last payment made: _____
Title in the name(s) of: _____
---I want this and will pay for it
---Spouse can have it if he/she pays for it
---other: _____

Year _____ Make: _____ Model: _____
When Purchased: _____
If owned free and clear, when was the last payment made: _____
Title in the name(s) of: _____
---I want this and will pay for it
---Spouse can have it if he/she pays for it
---other: _____

Year _____ Make: _____ Model: _____
When Purchased: _____
If owned free and clear, when was the last payment made: _____
Title in the name(s) of: _____
---I want this and will pay for it
---Spouse can have it if he/she pays for it
---other: _____

RETIREMENT ACCOUNTS

- Each of us will keep our own retirement accounts
- We need to divide the accounts as follows:

DEBTS:

WIFE WILL PAY FOR THE FOLLOWING DEBTS:

Name of Debt: (Chase Visa, Car note)	Approx. Debt Amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

HUSBAND WILL PAY THE FOLLOWING DEBTS:

Name of Debt: (Chase Visa, Car note)	Approx. Debt Amount
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

OTHER DEBT MATTERS: _____

PERSONAL PROPERTY (pots, pans, computer, etc.):

- We have already divided our stuff.
- We need to list some stuff in the divorce

WIFE WILL GET THE FOLLOWING:

HUSBAND WILL GET THE FOLLOWING:
