

PRE-MEDIATION QUESTIONNAIRE FOR MARRIAGE DISSOLUTION

Instructions: Both spouses should fill out the questionnaire. To the extent that the information is available to you, please fill out all the information, even though your spouse may be providing the same information. Please use ink or a dark pencil so that a photocopy will be readable.

PERSONAL AND MARITAL INFORMATION

1. Full legal name (first, middle and last):

Any other names you have ever used: _____

Birth Date: _____ Place of birth: _____

Home Address: _____ City, State _____

Home phone: _____ Work phone: _____

Continuous residence in Minnesota since: _____

Social Security #: _____

2. Marriage: Date: _____ Place: _____ County: _____

3. Separation: Are you still living with your spouse? _____ If not, when did you separate: _____

4. Please list dates and termination of any prior marriages and state whether terminated through dissolution or death:

5. Children:			
Full name:	Date of birth:	Age:	
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

6. Pregnancy: If you are the wife, are you pregnant? Yes ____ No ____
If you are the husband, is your wife now pregnant? Yes ____ No ____

7. Please list names and birth dates of any children through other relationships.

8. Military Service: Is either spouse now in the military? Yes ____ No ____
Has either spouse ever been in the military? Yes ____ No ____
(If yes, please consult with a lawyer regarding health benefits which may be available to one or both of you)

9. Immigration: Did either spouse receive an immigrant visa based upon this marriage? Yes ____ No ____

10. Your employment: Employed since _____ in the position of _____
Employer and work address: _____
Amount and structure of pay:
Salary: _____ Hourly wage: _____
Commission and/or bonus structure: _____

11. Your spouse's employment: Employed since _____ as a _____
Employer and work address: _____
Amount and structure of pay:
Salary: _____ Hourly wage: _____
Commission and/or bonus structure: _____

12. Your Educational Background:
Highest level obtained: H.S. Diploma _____ Some college _____
College Degree (Degree, Institution & year) _____
Professional Degree (Degree, Institution & year) _____

13. Your Spouse's Educational Background:
Highest level obtained: H.S. Diploma _____ Some college _____

College Degree (Degree, Institution & year) _____

Professional Degree (Degree, Institution & year) _____

14. Your non-vocational interests: When you are not working, what do you like to do? _____

15. Have you retained a lawyer? _____ If yes, what is your lawyer's name, phone, fax and email: _____

ASSETS AND LIABILITIES

Please list all assets owned by your and your spouse or either of you. **If you are claiming that an item is non-marital (for example, on the basis that it was acquired before the marriage, through a gift to you personally from someone other than your spouse, through inheritance or through a personal injury award for pain and suffering), please check the NM column for non-marital claims.** If necessary, attach additional pages.

1. BANK ACCOUNTS:

Bank Name	Acct. #	Balance	Title Holder	NM?
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2. MONEY OTHERS OWE YOU THROUGH ACCOUNTS RECEIVABLE, NOTES, LOANS, ETC.

Due from	Balance Due	Title Holder	NM?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. HOMESTEAD NM?
Address: _____

Legal Description: (If metes and bounds, please bring photocopy)

Date of purchase: _____ Purchase price: _____

Fair market value (FMV): _____ How was FMV determined:

Mortgage holder: _____ Mortgage Balance: _____

4. OTHER REAL ESTATE NM?
Address: _____

Legal Description: (If metes and bounds, please bring photocopy)

Date of purchase: _____ Purchase price: _____

Fair market value (FMV): _____ How was FMV determined:

Mortgage holder: _____ Mortgage Balance: _____

5. OTHER REAL ESTATE NM?
Address: _____

Legal Description: (If metes and bounds, please bring photocopy)

Date of purchase: _____ Purchase price: _____

Fair market value (FMV): _____ How was FMV determined:

Mortgage holder: _____ Mortgage Balance: _____

6. BUSINESS INTERESTS: Please be prepared to share relevant financial statements. An appraisal may be necessary.

Spouse with business interest: _____

Name of business: _____

Form of business: _____

Percentage owned: _____ Names of other owners: _____

Estimated Fair market value of business interest: _____

What is estimated FMV based on: _____

7. OTHER BUSINESS INTERESTS: Please be prepared to share relevant financial statements. An appraisal may be necessary.

Spouse with business interest: _____

Name of business: _____

Form of business: _____

Percentage owned: _____ Names of other owners: _____

Estimated Fair market value of business interest: _____

What is estimated FMV based on: _____

8. INTELLECTUAL PROPERTY: (Patents, trademarks, copyrights, royalties)

Type and description of intellectual property	Value	Title Holder	NM?
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9. STOCKS AND BONDS NOT IN RETIREMENT ACCOUNTS

Company name	# Shares	Value	Title Holder	NM?
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

10. RETIREMENT ACCOUNTS

Plan name and type	Account#	Value	Title Holder	NM?
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

11. LIFE INSURANCE ON HUSBAND'S LIFE

Company & Account #	Amt/Death benefit	Cash Value	Owner/Beneficiary	NM?
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

12. LIFE INSURANCE ON WIFE'S LIFE

Company & Account #	Amt/Death benefit	Cash Value	Owner/Beneficiary	NM?
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

13. VEHICLES INCLUDING BOATS AND RECREATIONAL VEHICLES

Make & Year	Value	VIN #	Loan Amt	Title Holder	NM?
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

14. FURNISHINGS AND PERSONAL PROPERTY SUCH AS CLOTHING, JEWELRY AND ART: You may wish to divide these items without listing them, or to make extensive lists. If there are a few key items to discuss, please list them here:

Item	Value	Title Holder	NM?
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BUDGETS

Please fill this portion out for yourself and your children (if any) based on where you expect to be living after the marriage is dissolved or you are separated from the other parent. You may break out the children's expenses or simply include them in your (the middle) column. Some categories may not apply to you.

ITEM	YOUR OWN EXPENSES	CHILDREN'S EXPENSES YOU EXPECT TO PAY
Housing Categories		
Mortgage/Rent		
Owner's/Renter's Insurance		
Real Estate Taxes		
Association Fees		
Utilities		
Electricity		
Heat		
Water & Sewer		
Garbage		
Telephone		
Cell Phone		
Cable		
Internet		
Home Maintenance Categories		
Dock Service		
Cleaning		
Lawn		
Snow Removal		
Average Repairs		
Food		
Groceries		
Eating Out		
Work/School Lunches		
Clothing		
Clothing & Shoes		
Laundry/Dry Cleaning		
Health-Related		
Medical Insurance		

Dental		
Orthodontia		
Uncovered Dental		
Co-pay/Doctor		
Prescriptions		
Optical: Contacts, Glasses, etc		
Counseling		
Automobile Expenses		
Lease & Loan Payments		
Gas & Oil		
Maintenance & Repair		
Licensure (tabs)		
Automobile Insurance		
Medical & Life Insurance		
Long-Term Care Insurance		
Life Insurance		
Insurance on Children's Lives		
Recreation & Entertainment		
Season Tickets		
Club Memberships		
Hobbies		
Vacations & Travel		
Adult Education		
Newspapers & Magazines		
Books, Tapes, CDs & Videos		
Personal		
Hair Care		
Other Grooming		
Incidentals		
Child Care		
Day Care		
Babysitting		
Children's Activities		
Books		
Pictures/Yearbooks		
Field Trips		

School Dances		
Non-school Classes such as Music & Swimming		
Children's Car Expenses		
Summer Camps & Summer Schooling		
Home-Out of pocket for Children		
Children's Sports		
College Funds		
Pets		
Food		
Veterinarian		
Miscellaneous Expenses		
Gifts		
Parties		
Charitable Contributions & Tithes		
Debt Payments		
Household Supplies		
Postage		
Charitable Contributions & Tithes		
TOTALS:		

Documents to Bring

Any existing court orders regarding the dissolution

Pay stubs

If it includes commission or bonus, a written explanation of how they are calculated

3 prior years of income taxes

Recent statements regarding assets

Legal description of real property