# WESTMONT LAW OFFICES, S.C.

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## **GENERAL INSTRUCTIONS**

**Need for Information**. In the course of this case, we will be required as your attorneys to submit complete and extensive information about your financial matters. To help us, we have prepared this Master Information List. Although we realize that you may not be able to obtain some of this information immediately, we are requesting that you contact the necessary sources of information promptly to complete the form to the best of your ability. Failure to provide this information can only harm your divorce case and in the end will add to its costs and increase the time it takes us to complete your case. The completed form must be returned to us before we can take any action on your behalf. While some of this information might seem unimportant to you, it is essential to our proper handling of your case. If you have any questions about the information requested, please contact our office.

**The Law Requires a Full and Complete Disclosure**. The law provides that if a person deliberately or negligently fails to disclose any asset with a fair market value of \$500 or more, the court can impose penalties. The law further provides that if any asset with a fair market value of \$500 or more was transferred for inadequate consideration, wasted, or given away within a year of or during the course of the action, or is otherwise unaccounted for, that asset is subject to financial disclosure and may be subject to a division of estate unless the transfer resulted in an exchange of assets with substantially equivalent value. Failure to disclose an asset may also undermine your credibility in the eyes of the court.

**Fair Market Value Means What You Could Now Sell the Item for**. When we ask that you estimate the value of a particular item, we are referring to fair market value, not the purchase price or replacement value. Fair market value is that price a person could obtain by selling the asset in the current market. Please use your best estimate. For example, you will be requested to estimate to the best of your knowledge the present value of household furniture, furnishings, and all other household contents. Please remember that this value refers to the price a person could obtain by selling the particular item in the current market-*not* the replacement cost or the value you personally would place on the item for personal or sentimental reasons.

**Labeling the Ownership and Source of the Assets**. When listing any assets either held by yourself personally or jointly held by you and your spouse or some other person, indicate who holds the title or how the title is held for each item as: the husband (H), the wife (W), jointly held by the husband and wife (J), held for the benefit of your children (C), inherited by the wife (I-W), inherited by the husband (I-H), gift to the wife (G-W), or gift to the husband (G-H). If the asset was owned prior to marriage, so indicate as (P-W) or (P-H). Identify assets considered as individual property by marital agreement and be sure to furnish us with a copy of the agreement or statement.

**Monthly Expenses Statement**. A detailed record of all expenses must be kept to establish a budget that will be the basis of requested maintenance/child support or personal living expense. The following are suggestions to assist you in this detailed record keeping: (1) obtain a small notebook to carry with you that can be divided into categories according to the statement of expenses form (see pages \_\_\_\_\_\_ to \_\_\_\_\_); (2) pay by check whenever possible and identify each check on the check register; (3) keep and mark all receipts when paying by cash; (4) retain charge account bills and document the basis of each

charge; (5) retain and identify charge slips; and (6) record expenses promptly in your notebook.

**Obtaining Projections for Utilities**. It would be appropriate to contact each specific utility and ask it to project for you what your average monthly expense will be for the next year. This will assist you in estimating this expense more accurately.

**Furnish Us With <u>Copies</u> of Your Records, Not Originals**. If you are unable for any reason to photocopy or obtain copies of your records, please contact our office so that we can use our facilities to obtain the copies.

These instructions are designed to enable you to furnish the financial information we need to better serve you. If you do not understand any part of the questionnaire, please contact us directly so that we may explain it to you and assist you in securing or preparing the information. *It is important that all inherited and gifted property as well as property owned by you or your spouse prior to the marriage be identified, as it may not be subject to a division of estate by the court.* Please be sure to list all such property on page of this form.

## SUPPORTING DOCUMENTS TO BE FURNISHED IF APPLICABLE

- 1. **Tax Returns**. Please furnish copies of your state and federal income tax returns for the last three years, including all schedules, K-1 forms, W-2 forms, and 1099s.
- 2. **Net Worth Statements.** Please furnish copies of any financial or net worth statements you have been required to file in the last five years to secure a loan or line of credit. The financial institution to which you submitted these statements can provide you with a copy.
- 3. **Retirement Plan**. If you are a participant in any profit-sharing, pension, or retirement plan provided by your employer, please contact the bookkeeper, plan administrator, or person responsible for the maintenance of the program to request a copy of the summary plan description and a statement of your current interest in the plan and its monetary value. Such information must be provided by your employer on request.
- 4. **Retirement Accounts**. If you or your spouse are the owners of any individual retirement accounts (IRAs), please provide us with the name of the financial institution, the account number, the beneficiary, and a current statement indicating the account balance.
- 5. **Real Estate--Legal Description**. If you or your spouse have any interest in any real estate, list the address and secure a copy of the legal description for each parcel. The lending institution with a financial interest in the real estate parcel can furnish you with the legal description, which must be included in the pertinent legal documents. The full legal description appears in the deed, mortgage, title insurance policy, or abstract of title. *Furnish us with a photocopy of the deed for our file*. In addition, if you have a mortgage on any real estate parcel, contact your lending institution and request that they furnish us with copies of the mortgage, the mortgage amortization schedule, and the mortgage note.
- 6. **Receipted Real Estate Tax Bill**. Please furnish a photocopy of the last paid tax bill for each real estate parcel either jointly or solely owned.
- 7. **Real Estate Appraisal**. If any of your property has been appraised for any reason within the last three years--such as for insurance or a mortgage loan, or in contemplation of sale--please furnish a copy of the appraisal.

- 8. **Life Insurance**. For each life insurance policy you own, please furnish a copy of the policy face sheet setting forth the name and address of the insurance company, the face amount of the policy, policy number, owner of the policy, beneficiary, annual premium, and policy terms and conditions.
- 9. **Medical Insurance**. Furnish the company name, policy or group number, and subscriber number for all health, dental, and medical insurance.
- 10. **Other Insurance**. Please furnish copies of all insurance policies you presently maintain, including, but not limited to, all homeowner, automobile, and personal property policies and any schedules or riders.
- 11. **Bank Accounts**. We need photocopies of current statements indicating your balance on deposit in all bank, savings and loan, or other financial institution accounts, along with the account number of each such account. This information can be obtained on request from the financial institution.
- 12. **Loans and Liabilities**. We need copies of and current balance information for all loans, including mortgages, on which you or your spouse are liable. We also need copies of current credit card statements, and information on any contingent liabilities affecting you or your spouse.
- 13. **Securities**. If you or your spouse own any securities, please furnish us with a list of the stocks, stock options, bonds, commodity accounts, notes, money market accounts, or mutual funds owned, the date of purchase, the purchase price, and the current owner of such securities. This information can be obtained directly from the person who handled the purchase of these securities. Provide the name of the brokerage firm and broker.
- 14. **Business Interests**. If you or your spouse have any interest in any business entity, we must receive copies of your partnership or corporate tax returns, of the appropriate schedules, and of your balance sheets and profit and loss statements for the last five years. You might find this information difficult to obtain if you are not the spouse with the controlling interest; if this is the case, please furnish us with as much information as you have or are able to obtain.
- 15. **Estate or Trust Interests**. It is important that you tell us if you or your spouse have ever been gifted or have inherited any property or have a future interest in any estate. If such is the case, please furnish a copy of the gift tax return(s), will, inventory, final account, and judgment effecting such interest. If you have an interest in any trust, we must review the actual trust agreement, the current inventory of assets, the most recent annual accounting, and the tax returns for the trust. If possible, provide us with the annual accountings and tax returns for the last three years. Please also be sure to furnish whatever information you have about your spouse's present or future interest in any gifted property, estate, or trust. It is not necessary that you identify interspousal gifts.
- 16. **Previous Marriages**. If either you or your spouse was previously married and divorced, furnish copies of the findings of fact, conclusions of law, and judgment entered in the action.
- 17. Written Agreements. If you and your spouse have entered into any written agreement concerning support, property, or other matters, furnish us with a copy of the agreement. If there is no agreement, *under no circumstances* should you enter into any agreement regarding the

proceedings or anything else without first consulting with your attorney.

- 18. **Hearing for Temporary Relief.** If we are unable to reach an agreement on temporary support and maintenance for yourself, your spouse, and your children during the pendency of the action, you will be required to attend a hearing held before the circuit court commissioner. *At the temporary hearing, it will be necessary for you to furnish a wage statement from your employer setting forth your actual gross and net earnings during the eight-week period preceding the hearing.* You will also be required to produce copies of your income tax returns for the last two years. Please have this information available and forward it to us in advance of the hearing so that we can properly represent your interests and estimate your needs.
- 19. **Safety Deposit Box**. If you or your spouse has a safety deposit box, furnish us with a list of the contents and indicate its location.
- 20. **Union Benefit Plan**. If you are a member of a union, provide us with a copy of your union benefit plan.
- 21. **Bankruptcy**. Please provide copies of all pleadings related to all bankruptcy proceedings in which you are or were a party.

# MASTER INFORMATION LIST

# YOU

Name
(Include full middle name)
Address:
Street
City
County
State, ZIP
Phone number (work)
Fax number
E-mail address
Do you check your e-mail regularly? [ ] Yes[ ] No
Phone number (home)
Social Security no.
Referred by:
How long have you been a resident of the
county?
state?
Birth surname
Date of birth
Place (state) of birth
Age
Driver's License Number
State
Current occupation
Employer name
List all states in which you have lived during the marriage:

Are you currently or were you ever a member of the U.S. Armed Forces?

If so, give branch and dates of service:

Race (specify, e.g., white, black, American Indian, Hispanic):

Name of closest living relative _	
Relationship	
Address	
Phone number	

# SPOUSE

Name
(Include full middle name)
Address:
Street
City
County
State, ZIP
Phone number (work)
Fax number
E-mail address
Does your spouse check his or her e-mail regularly? [ ] Yes[ ] No
Phone number (home)
Social Security no.
How long has your spouse been a resident of the county?
state?
Spouse's birth surname
Date of birth
Place (state) of birth
Age
Driver's License Number
State
Current occupation
Employer name
List all states in which your spouse has lived during the marriage:
Is your spouse currently or was your spouse ever a member of the U.S. Armed Forces?
If so, give branch and dates of service:
Race (specify, e.g., white, black, American Indian, Hispanic):
Name of closest living relative
Relationship
Address
Phone number

# CHILDREN OR OTHER DEPENDENTS

# Children:

Birthdate	Age	Social Security No.
f this marriage? [ ] Yes [	] No	
		Yes [] No
-	-	[]Yes []No
ustody of the children?		
		[ ] No
		[ ] No
		lo
	a of this marriage	a of this marriage

The places where each child has lived during the past *five* years are as follows, together with the names and present addresses of the persons with whom the child has lived during that period:

Ha	ve	e you o	or your spouse partie	ipated as a party, a witness, or in any other capacity in any litigation
co	nc	erning	any of the above-na	amed children in this or any other state?
[	]	Yes	[ ] No	If so, explain
	-			•

Do you or your spouse have any information about custody proceedings concerning any of the children now pending in a court of this or any other state?[ ] Yes [ ] No If so, explain

\_\_\_\_\_

Besides you and your spouse, is there any other person who has or has had physical custody of any child or claims to have legal custody, physical placement, or visitation rights with the child? [ ] Yes [ ] No If so, explain

## MARITAL STATUS

Date of this marriage		
Place of this marriage (city or villag	ge, county, and sta	te)
Number of this memiane.	Van	<u>Concernen</u>
Number of this marriage:		
Previous marriage ended by (death,		
You Spo	ouse	Date(s)
If not, who left?		
Date you separated		
Names of marriage counselors, relig	gious or otherwise	, you have consulted
Have either of you previously starte	d an action for div	vorce, legal separation, annulment, or support
against the other? [] Yes		
Year commenced		
In what court (state and cou	intv)	Case no.
Disposition of action (that i	s was a divorce/s	eparation granted or was action dismissed?)
Disposition of action (that i	s, was a divorce/s	eparation granted of was action distinssed ()
Date of dismissal or decree		
Respective attorneys involv	red: You	
Ţ		
If either you or your spouse was pre-		for each divorce state the following:
	You	÷
Names of parties to the action:	104	Spouse
ivanies of parties to the action.	VC	7/6
Court (state and county):	VS	VS
•		
Court case no.:		
Date decree or divorce granted:		
Respective attorneys involved:	(H)	
	(W)	

## WRITTEN AGREEMENTS

Have you entered into any written agreement either prior to or during marriage concerning support, custody, physical placement/visitation of the children, maintenance payments, or property division?

If yes, please attach a copy of any agreement(s). If there is no agreement, *under no circumstances* should you enter into any agreement about the proceedings or anything else without first consulting your attorney.

# **REASON FOR DIVORCE**

Does your spouse intend to oppose your petition for divorce? [ ] Yes	[ ] No
Have you and your spouse voluntarily lived apart for 12 continuous month	s or more?
[] Yes       [] No         Do either of you desire reconciliation?       You       S         Have you discussed divorce with your spouse?       F	
Do either of you desire reconciliation? You S	Spouse
Have you discussed divorce with your spouse? F	Response
Please state your view of the causes of the marriage's breakdown	
If space is insufficient, attach a separate sh	eet
MEDICAL STATUS	
MEDICAL STATUS	
When was the last time you consulted a physician?	
Physician's name	
For what condition(s) were you treated at that time?	
For what condition(s) have you been treated by a doctor or dentist within t	he last three years?
Your major health problems during marriage	
Date of last hospitalization for a condition other than childbirth	
For what condition?	
Your present condition of health	
Do you have any major health or dental problem or any particular physical           [] Yes         [] No         If so, explain	
Does your spouse have any major health or dental problem or any particular         disability?       [] Yes       [] No       If so, explain	
Is wife pregnant? [] Yes [] No	
Are you or your spouse currently taking any medication on a regular basis [ ] Yes [ ] No If so, list medication and by whom taken a it is being taken.	

# EDUCATION AND EMPLOYMENT SKILLS

What level of education do you and your spouse have?		
You Your What level of education did you each have at the time	Spouse	- 10
Vou	you were marr	led?
You Your Did either of you help finance the other's education? If so, who?		
How?		
To what extent?		
If you are unemployed, date of last employment		Salary \$
Employer	Occ	supation
Employer Describe your employment skills or job training and w	ork experience	
Do you wish to pursue an education or job training?		[ ] No
If so, in what field of study or program?		
How long will it take to complete the field of study or	program?	
What is the estimated expense to complete such study	or program?	
List the last three jobs held by you and your spouse (ir	iclude employe	r's name and dates of employment):
You		Spouse
(1)	(1)	
(2)	(2)	
(2)	(2)	
(3)	(3)	
What type of work have you and your spouse done due business or industry?	ring most of yc	ur working lives, including type of
You		Spouse
Current occupation	Current occ	upation
Date of hire		
Are you or were you ever a member of a union? [ ]	Yes []	No
Is your spouse or was your spouse ever a member of a	union? [ ]	Yes [] No
If so, give full name and address of union(s)		

# YOUR APPRAISERS AND PROFESSIONAL ADVISORS

Name	Address	Phone Number
Accountant:		
Stockbroker (broker and firm name):		
Insurance Agent:		
Appraiser:		
Financial Adviser:		
Family/Marriage Counselor:		
Family Physician:		
Medical Specialist:		

## SCHEDULE OF DEBTS AND OBLIGATIONS

Do you or your spouse owe any mortgages, liens, or other debts and obligations, or have any contingent liabilities? (Include any cosigned or guaranteed payments or lawsuits pending against you.) [ ] Yes [ ] No If yes, please complete the following schedule in as much detail as possible. If space is insufficient, attach a separate sheet. Be sure to include charge accounts, automobile payments, personal loans, education loans, notes, and bills.

## Mortgages, Liens, or Other Debts

(Please supply copies of any notes evidencing the transaction)								
<b>Creditor's Nam</b>	e	Date	Original	Current	Monthly	Int.	Who	
and Address	Property	Payable	Amount	Balance	Payment	Rate	Pays?	

## **Open End Debts**

(Credit cards, charge accounts, and other lines of credit)

Creditor's Name and Address	Account Number	No. of Cards & Who Has Them		Current Balance	Monthly Payment	
		Continger	nt Liabilities	s		
	(Potential de	ebts, including cosi		0	payments	,
	(Dlagga gu	pending laws		· ·	neaction)	
	(Flease suj	Date	Current	U	,	Int.
Creditor's Name		Date	Current	WION	uny	1110

## SCHEDULE OF ASSETS

Please reread the general instructions and checklist at the beginning of the Master Information List. As requested in the general instructions, attach to each schedule whatever supporting documents are available. If no assets of a particular category are owned by you or your spouse (e.g., neither of you has an interest in any profit-sharing, pension, or retirement account), please be sure to so indicate.

Ownership for all assets should be indicated by inserting H for husband, W for wife, J for joint, C for children, I-H for inherited by husband, I-W for inherited by wife, G-W for gift received by wife, and G-H for gift received by husband. Also, if any assets were owned prior to the marriage, indicate as P-H for property owned by husband prior to marriage and P-W for property owned by wife prior to marriage.

## Household Items, Personal Effects, and Miscellaneous Property

Please furnish the following information on household items, personal property, valuable collections, sporting or other equipment, mortgages or notes receivable, interests in trusts, wills or estates, contract rights, judgments, livestock or pets, or other miscellaneous property owned by you or your spouse. *If no items within a given category are owned, please state "None."* 

If either of you owns any interest in mortgages or notes receivable, obtain a photocopy of the mortgage or note, the debtors' addresses, the due date, the present balance, and the monthly payments, if any. If either of you owns a contract right, obtain a photocopy of the agreement, the names and addresses of the parties involved, and the date of the contract.

If either of you has an interest in any trust, obtain a photocopy of the trust instrument and trust tax returns and accountings for the last three years. Furnish the name of the trust, the type of interest you have in the trust, and the date of the trust instrument, and specify whether you have a present or future interest in the trust. If either you or your spouse has an interest in a judgment, obtain the following information from the clerk of court where the judgment was docketed: name of judgment debtor, date of judgment, docket number, principal amount of judgment, and accrued interest to date.

If either you or your spouse owns personal property other than what has been listed, indicate the type of personal property and any pertinent information relative to the property.

Furnish detailed information about individual contributions made by you or your spouse toward the purchase of any particular personal property. If either you or your spouse has an interest in any lawsuit, describe fully.

Description	Current Value	Date of Valuation	Basis of Valuation	Individ. Contri- bution	Bal- ance Owed	Owner (H/W)
Furniture, furnishings in W's possession in H's possession China, silver, crystal Objects of art Antiques/heirlooms Books Jewelry Furs Sporting or other equipment such as boats; snowmobiles; skiing, fishing, or camping equipment; guns; cameras	\$ \$ \$ \$ \$ \$ \$				\$ \$ \$ \$ \$ \$ \$	
(specify):	\$ \$				\$ \$	
other valuable collections Personal computer Sound equipment Mortgages, notes, land contracts	\$ \$ \$				\$ \$ \$	
receivable Interest in trust Contract rights Liens and judgments owed to H or W	\$ \$ \$				\$ \$ \$	
Livestock and pets Interest in unsettled estates Other future interest Other (specify)	\$ \$ \$ \$				\$ \$ \$ \$	

## Automobiles

Do either you or your spouse own any automobile or other vehicle? [] Yes [] No If yes, list the detailed information requested for each vehicle in the following schedule. If there is a lien on any vehicle, indicate the lien amount and the creditor's name. If you or your spouse have the use of any car leased or furnished by a corporation or employer, please describe.

Year Make	Model
Design (2-door, 4-door, station wagon, hatch- back, other)	
Name on title	
Indicate which party has present use:	Approximate mileage and condition
Current market value \$	Basis of valuation
Date of valuation	<u> </u>
Lien \$	Name of creditor
Lien \$ Individual contributions \$	Give specific details
Furnish details	
	Who pays for losso?
Year Make Design (2-door, 4-door, station wagon, hatch-	Model Optional equipment (air conditioning, power
back, other)	equipment, stereo, other)
Name on title	
Indicate which party has present use:	Approximate mileage and condition
Current market value \$	
Date of valuation	
Lien \$	Name of creditor
Individual contributions \$	Give specific details
Furnish details	If leased: Monthly payment \$
	Who pays for lease?

### Securities

Do either you or your spouse own any stocks, bonds, commodities, mutual funds, or other securities?

If yes, list the information requested for all securities on the following schedule. In addition, furnish a statement from your broker regarding all current transactions, along with photocopies of all bonds. Please supply the appropriate information concerning individual contributions made by you or your spouse toward the purchase of any stocks or bonds. List United States Savings Bonds separately. Please reread paragraph 13 on page \_\_\_\_. If you own additional securities, please attach a schedule. If you or spouse has an interest in any stock option or phantom stock plan, furnish a copy of the plan/agreement.

## Stocks

No of	Name	Com	non/	Date	Cert		Dat	te of	Orig	Owner
Shares									0	
<u> </u>										
			1							
	ptions or pha	antom sto	ock							
Bonds	ptions or pha	antom sto	ock							
Bonds Face	Name of		Date	Matu	rity	Cur	rent	Date o	f Or	ig. Owne
Bonds Face	Name of		Date	Matu	rity	Cur	rent	Date o	f Or	ig. Own
Bonds Face	Name of		Date	Matu	rity	Cur	rent	Date o	f Or	ig. Ov
Bonds Face	Name of		Date	Matu	rity	Cur	rent	Date o	f Or	ig. Own
Bonds Face	Name of		Date	Matu	rity	Cur	rent	Date o	f Or	ig. Own

## **U.S. Savings Bonds**

Face Value	Series	No.		Current Value	Date of Orig. Valuation	Owner Cost	(H/W)	
Please state	details of individual	contri	bution towar	d the purcha	ase of any securi	ties		
	Ν	Iutua	l Funds and	Commodit	y Accounts			
Current Value	Name of Institu	tion	Account N	Date o No. Valua			Orig. Cost	Owner (H/W)

## **Cash and Deposit Accounts**

Do either you or your spouse own any cash or deposit accounts? [] Yes [] No If yes, list the information requested in the following schedule. Be sure to include checking and savings, certificates of deposit, money market, and credit union accounts. Provide photocopies of the passbooks, certificates, or other statements indicating the current balances. Please reread paragraph 11 on page

Name of institution		Account no.
In whose name held		Interest rate
Type of account	Current balance \$	as of (date)
Individual contributions		
Who has use		
	* * * * * * * * * *	
Name of institution		Account no.
In whose name held		Interest rate
Type of account	Current balance \$	as of (date)
Individual contributions		
Who has use		
	* * * * * * * * * *	
Name of institution		Account no
In whose name held		Interest rate
Type of account	Current balance \$	as of (date)
Individual contributions		
Who has use		

\* \* \* \* \* \* \* \* \* \*

Name of institution		Account no.
In whose name held		Interest rate
Type of account	Current balance \$	as of (date)
Individual contributions		
Who has use		
	* * * * * * * * * *	
Name of institution		Account no.
In whose name held		Interest rate
Type of account	Current balance \$	Interest rateas of (date)
Individual contributions		
Who has use		
	* * * * * * * * *	
Name of institution		Account no.
In whose name held		Interest rate
Type of account	Current balance \$	as of (date)
Individual contributions		
Who has use		
	* * * * * * * * * *	
Name of institution		Account no.
In whose name held		Interest rate
Type of account	Current balance \$	as of (date)
Individual contributions		
Who has use		

#### Life Insurance

Do either you or your spouse own any life insurance or are you aware of the existence of any life insurance on either of your lives? [] Yes [] No If yes, for each policy furnish the information requested in the following schedule. Furnish photocopies of the face sheets of all life insurance policies, or bring the policies in and we will photocopy them.

Indicate the type of each policy (i.e., whole life, term, or annuity). Be sure to include any insurance you have through employment. If there are any loans outstanding against any of the policies, furnish the details including the loan's date and purpose. Please reread paragraph 8 on page \_\_\_\_\_.

Name of Insurance Co.	Insured (H/W)	•	Face Amount		• 1	Owner (H/W)

Are you aware of any loans outstanding against any of the above policies?

If yes, furnish the details concerning each policy loan:

## Profit-Sharing Plans, Pension Plans, Retirement Accounts, Employee Stock Options or Ownership Plans, Deferred Compensation Plans

Do either you or your spouse have any interest in any profit-sharing plan, pension plan, Keogh plan, annuity plan, employment stock option plan, employee stock purchase plan, deferred income, phantom stock, 401(k) plan, or individual retirement account (IRA)? [] Yes [] No If yes, furnish the following information for each plan. Be sure to list all plans even if there is no vested interest. Include plan interests through any prior employment. Please reread paragraphs 3 and 4 on page \_\_\_\_\_.

Name of company		Name of plan
Type of plan		
Administrator's name and address		
		Identification no.
Value of interest \$		Date of valuation
		Ownership
	* * * * * *	* * * * *
Name of company		Name of plan
Type of plan		
Administrator's name and address		
		Identification no.
Value of interest \$		Date of valuation
	% vested	Ownership

\* \* \* \* \* \* \* \* \* \*

Name of company	Name of plan
Type of plan	
Type of plan Administrator's name and address	
	Identification no.
Value of interest \$	Date of valuation
% vested	Ownership
Individual Retirement Accounts and Keogh Plans	
For each account, furnish the following information:	
Name of institution	Account no.
Name on account (owner)	Beneficiary
Current amount on deposit \$	As of (date)
Current amount on deposit \$ Check if [] regular IRA [] Roth IRA	10 01 (dille)
* * * * * * *	* * * *
Name of institution	Account no
Name on account (owner)	Beneficiary
Current amount on deposit \$	As of (date)
Check if [] regular IRA [] Roth IRA	
* * * * * * *	* * * *
Name of institution	Account no.
Name on account (owner)	Beneficiary
Current amount on deposit \$	As of (date)
Check if [] regular IRA [] Roth IRA	

#### **Real Estate**

Do either you or your spouse own or have any interest in any real estate? [] Yes [] No If yes, for each parcel furnish the information requested in the following schedule. Mortgages should be noted with full details as to the mortgage balance and the monthly mortgage payments. Obtain copies of all appraisals, deeds, land contracts, leases, and other pertinent real estate documents and attach to this schedule. If any of the properties are income properties, obtain copies of current leases. Include any leasehold interests other than your residence. Also supply a copy of your most current real estate tax bill. Indicate in the schedule individual contributions by yourself or your spouse. At a future date it may be necessary for you to furnish proof of contributions, such as canceled checks. We will advise you should this be necessary. *It is imperative that you furnish a copy of the legal description for each real estate parcel.* If there is a mortgage on the property, the lending institution will have a copy of the deed and/or the mortgage and will furnish you with a copy on request. Please reread paragraphs 5, 6, and 7 on pages \_\_\_\_\_\_.

Type of property (homestead, farm, income, vacant land, commercial, industrial, recreational,

vacation time-share)				
Other (explain)				
If income-producing, indicate total annual incom	me from property	\$		
Expenses for same period (less depreciation) \$_		Cash flow		
Number of residential units (1, 2-7, 8 or more)				
Street address				
City	County	ZIP code		
Tax key number	Attach most rece	ent property tax bill		
Date of acquisition	Original cost (tax basis) \$			
Exact name(s) and how real estate is held	Cost of additions \$			
on deed (individual, joint tenants, tenants				
in common)	Total cost \$			
Institution or individual holding mortgage				
Mortgage balance \$		nts \$		
Taxes (yr) \$	Other liens (spec	cify to whom and amount)		
Assessed valuation \$				
Equity \$				

Current market value \$	Individual contributions (specify):
Date of valuation	
Basis of valuation	
Lot size x	or total acres (estimated)
Individual contributions	
* *	* * * * * * *
Type of property (homestead, farm, income, var vacation time-share) Other (explain)	
If income-producing, indicate total annual income	me from property \$
Expenses for same period (less depreciation) \$_	
Number of residential units (1, 2-7, 8 or more)	
Street address	
City	County ZIP code
Tax key number	Attach most recent property tax bill
Date of acquisition	Original cost (tax basis) \$
Exact name(s) and how real estate is held	Cost of additions \$
on deed (individual, joint tenants, tenants	
in common)	Total cost \$
Institution or individual holding mortgage	
Mortgage balance \$	Monthly payments \$
Taxes (yr) \$	Other liens (specify to whom and amount)
Assessed valuation \$	
Equity \$	
Current market value \$	Individual contributions (specify):
Date of valuation	
Basis of valuation	
Lot size x	or total acres (estimated)
Individual contributions	· · · ·

\* \* \* \* \* \* \* \* \* \*

Type of property (homestead, farm, income, v				
vacation time-share) Other (explain)				
If income-producing, indicate total annual inco	ome from property \$			
Expenses for same period (less depreciation) \$				
Number of residential units (1, 2-7, 8 or more)				
Street address				
City	County	ZIP code		
Tax key number	Attach most recent prop			
Date of acquisition	Original cost (tax basis) \$			
Exact name(s) and how real estate is held on deed (individual, joint tenants, tenants				
in common)	Total cost \$			
Institution or individual holding mortgage				
Mortgage balance \$	Monthly payments \$			
Taxes (yr) \$	Other liens (specify to v	whom and amount)		
Assessed valuation \$				
Equity \$				
Current market value \$	Individual contributions	s (specify):		
Date of valuation				
Basis of valuation				
Lot size x	or total acres (estimated	1)		
Individual contributions				

#### **Business Interests**

 Do either you or your spouse have an interest in any business or partnership?

 [] Yes
 [] No

 If yes, furnish the following information for each business entity:

Name and Address		Nature of Business	f Own (H/W		Percentage of Ownership
Do either you or your [ ] Yes [ ] N If yes, furnish the follo	lo	Which spouse?	<b>v</b> 1	ration?	
Corporation's Name and Address	No. of Shares	Percentage of Ownership	Current Market Value	Date of Valuation	Basis of Valuation

Also, for each corporation, partnership, or other business entity in which you or your spouse has any interest, furnish copies of the tax returns, year-end profit and loss statements, and balance sheets for the last three years, and any partnership, buy-sell, or other written agreements pertaining to the same. Please reread paragraph 13 on page \_\_\_\_.

## **Tax Shelters**

For each limited partnership in which you and/or your spouse participates (e.g., real estate, equipment leasing, oil and gas), provide the prospectus, subscription agreement, and notes executed, along with copies of year-end financial statements, tax returns, and K-1 schedules for the last five years.

If you are unable to provide the statements or prospectus, provide the following for each such partnership (attach additional pages if needed):

Partnership name	
Business address	
Name of general partner	
Date of your investment	
Date of your investmentAmount of your original investment \$	
If subsequent investment: When	Amount \$
Percentage ownership interest held by you%	By your spouse%
Name and address of investment dealer	
Claims Against Spouse	
Do you or your spouse have any potential claims against the other (or the marital estate (e.g., for dissipation of the marital estate, breach of t unauthorized gifts of marital property to third parties)? [] Yes	the duty of good faith, waste,
If yes, furnish details	
Do you or your spouse have any other potential claims against the oth violence, assault, battery, infliction of mental distress, transmission of	

[ ] Yes [ ] No

If yes, furnish details including dates \_\_\_\_\_

## **Property Acquired By Gift or Inheritance**

Did either you or your spouse (1) inherit any property or funds; (2) receive a gift during the marriage from a third party; or (3) acquire any property purchased with money that was gifted or inherited? (This does not include gifts from your spouse.) [] Yes [] No If yes, furnish the information requested for each such asset on the following schedule. Furnish copies of any gift tax returns filed. If either you or your spouse has received or will receive an inheritance in any estate, obtain a photocopy of the will, inventory, final account, and judgment. Indicate if you or your spouse owns any future interests in any property (e.g., trust interests). If there are any assets you or your spouse inherited or received as a gift prior to or during the marriage, and if you have not already done so, *please be sure to go back through the schedules and label each asset* so acquired as follows: (I-W) inherited by wife, (I-H) inherited by husband, (G-W) gift to wife, (G-H) gift to husband. In addition, list these assets separately on the following schedule:

Description		
When acquired		
How acquired		
Where located		
Value when inherited/when received \$		
Current market value \$	Date of valuation	
Basis of valuation		
	* * * * * * * * * *	

Description		
When acquired		
How acquired		
Where located	Ownership	
Value when inherited/when received \$	-	
Current market value \$	Date of valuation	
Basis of valuation		

#### \* \* \* \* \* \* \* \* \* \*

Description	
When acquired	
How acquired	
Where located	Ownership
Value when inherited/when received \$	-
Current market value \$	Date of valuation
Basis of valuation	

## Property Owned Prior to Marriage Having a Value in Excess of \$500

Did either you or your spouse own any assets having a value over \$500 acquired prior to your marriage or owe any debts of \$500 or more at that time? [] Yes [] No. If yes, furnish the information requested for each asset/liability on the following schedule. If you have not already done so and if the asset(s) are still owned, *please be sure to go back through the asset schedules and label each asset* so acquired as follows: (P-H) owned by husband prior to marriage, (P-W) owned by wife prior to marriage.

Description	
When acquired	
How acquired	
Where located	Ownership
Value at time of marriage \$	•
Current market value \$	Date of valuation
Basis of valuation	

#### \* \* \* \* \* \* \* \* \* \*

Description		
When acquired		
How acquired		
Where located	Ownership	
Value at time of marriage \$	-	
Current market value \$	Date of valuation	
Basis of valuation		

#### \* \* \* \* \* \* \* \* \* \*

Description		
When acquired		
How acquired		
Where located	Ownership	
Value at time of marriage \$	-	
Current market value \$	Date of valuation	
Basis of valuation		

## List Debts at the Time of Marriage

Description	
When acquired	
What financial institution	
Amount of debt at the time of marriage \$	
	* * * * * * * * *
Description	
When acquired	
What financial institution	
Amount of debt at the time of marriage \$	
Balance currently owed on this debt $\frac{1}{2}$	
	* * * * * * * * *
Description	
When acquired	
Balance currently owed on this debt §	

## **Custodial Assets**

Do either you or your spouse hold any assets (such as bank accounts or government savings bonds) as custodians for your minor children? [] Yes [] No If yes, furnish the information requested for each asset on the following schedule. Provide photocopies of the passbooks, certificates, or other statements indicating the current balances.

Deposit Accounts

		No
	Current balance \$	as of (date)
	* * * * * * * * * *	
		No
	Current balance \$	as of (date)
	* * * * * * * * * *	
	Account	No
	Current balance \$	as of (date)
	* * * * * * * * * *	
	Account	No
	Current balance \$	as of (date)
	* * * * * * * * * *	
Date	Owner	
Issued	(Custodian and C	hild's Names)
	Date	Current balance \$

#### Medical, Casualty, Disability, and Other Insurance

(Life insurance scheduled separately on page \_\_\_\_\_)

Do either you or your spouse own medical, casualty, disability or other insurance? [] Yes [] No If yes, list the information required for each policy on the following schedule. Please furnish photocopies of the face sheets of all medical, casualty, disability, or other insurance policies. If there is casualty (homeowners) insurance covering personal property, be sure to supply photocopies of the schedules or riders including the property values listed. If you are covered under any health or medical insurance, it is particularly important that you obtain and provide us with a statement from the company spelling out the policy's provisions for conversion after divorce. Under state and federal law, the divorced spouse may be entitled to elect to continue group coverage or to convert to an individual health insurance policy issued upon payment of the premium. These matters should be checked into promptly. If the conversion terms are undesirable, other insurance companies and coverages can be investigated during the pendency of the action to avoid any lapse in coverage.

Name of company	Address	
If issued through employment, name of employe	er or other group policyholder	
Type of insurance		
Policy no.	Group no	
Date the policy was issued or renewed		
Owner of policy		
* * *	* * * * * * *	
Name of company	Address	
If issued through employment, name of employe	er or other group policyholder	
Type of insurance		
Policy no.	Group no	
Individual subscriber no.	-	
Date the policy was issued or renewed		
Owner of policy		

## **Disposal of Assets**

Have you or your spouse disposed of any assets having a fair market value in excess of \$500 within the last year? [] Yes [] No If yes, if there is any question about the legitimacy of the transfer or about the proceeds, furnish below a complete description of each item and its disposition, including the nature of the property, its value, the

amount received, to whom transferred or sold, and any other pertinent information.

# STATEMENT OF INCOME

	Husband	Wife
Gross Current <u>Monthly</u> Income from:		
Salary and wages, including commissions,	\$	
allowances, and overtime, payable		
(weekly, biweekly, monthly, semimonthly):		
<b>Note:</b> To arrive at monthly income figure if paid		
weekly, multiply weekly income by 4.3; if paid		
biweekly, multiply biweekly income by 2.15		
Pension and retirement benefits:		
Social Security:		
Disability and unemployment insurance:		
Public assistance (i.e., welfare, AFDC payments):		
Maintenance/alimony from any prior marriage:		
Child support from any prior marriage:		
Dividends and interest:		
Estates, trusts, royalties:		
Rents:		
Bonuses (annual, semiannual, quarterly):		
All other sources (specify)		
Total Gross Monthly Income:	\$	\$
Itemize Monthly Deductions from Gross Income:		
Number of exemptions claimed:		
By husband () By wife ()		
State income taxes:	\$	\$
Federal income taxes:		
Social Security:		
Medicare:		
Medical or other insurance (describe):		
Union or other dues:		
Retirement or pension fund:		
Mandatory contribution:		
Optional contribution:		
Savings plan:		
Credit union (explain)		
Other (specify)		
Total Monthly Deductions:	\$	\$
Net Monthly Income (Take-Home Pay):	\$	\$

# Last Year's (\_\_) Income Tax Refunds

	Husband	Wife
Federal	\$	\$
State	\$	\$

\_\_\_\_\_

**Fringe Benefits** (i.e., company car, gas credit cards, travel, entertainment): (Indicate husband's or wife's) \_\_\_\_\_

## STATEMENT OF EXPENSES

Specify the number of members in each household whose expenses are included and list the members' names and relationships:

Husband ( )\_\_\_\_\_\_ Wife ( )\_\_\_\_\_\_

Estimated Monthly Expenses of Living Apart for:		Husband	Wife
1.	Rent or home mortgage payments for residence (including parking space):	\$	\$
2.	Real property taxes (residence) (separate if		
	more than one property):		
3.	Real property insurance (residence):		
4.	Maintenance (e.g., home, yard, snow, furnace, appliances, furniture, service contracts, condo charges):		
5.	Food and household supplies (include work/school		
5.	lunches, coffee breaks, tobacco, wine and spirits, and all items purchased at the grocery store)		
6.	Utilities (include water, electricity, gas, oil, trash collection):		
7.	Telephone:		
8.	Laundry and dry cleaning:		
9.	Clothing (include shoes and accessories for work and leisure, children's needs):		
10.	Medical and drug expenses not covered by insurance		
	(include over-the-counter meds, eyeglasses):		
11.	Dental expenses not covered by insurance:		
12.	Insurance (life, health, accident, comprehensive, liability, disability) (exclude payroll deducted):		
13.	Child care expenses		
	(include baby-sitting and day care):		
14.	Payment of child/spousal support from		
	prior marriage/paternity determination:		
15.	School (expenses for child and/or adult; e.g., tuition, fees, books, supplies, transportation,		
16.	tutors):		
10.	Entertainment (e.g., clubs, social obligations, recreation, camp, sports, restaurants, self-		
	improvement, cable TV):		
17.	Incidentals (beauty/personal hygiene,		
1/1	newspapers, periodicals, pets, hobbies,		
	collections at home or office):		

		Husband	Wife
18.	Transportation (other than automobile):		
19.	Auto expenses (gas, oil, repairs, insurance,		
	depreciation):		
20.	Auto payments:		
21.	Installment payment(s) (e.g., student loans,		
	personal loans) (insert total and attach itemized		
	schedule):		
22.	Professional expenses (e.g., professional		
	memberships not deducted, journals):		
23.	Gifts:		
24.	Donations and charitable contributions:		
25.	Other expenses (e.g., other expenses of real		
	properties owned not listed above, payments for		
	support of dependents not living at home not		
	already listed, retirement investments (IRAs),		
	counseling, legal fees, and financial/tax advice)		
	(insert total and attach itemized schedule):		
Total	Monthly Expenses:	\$	\$

List upcoming extraordinary expenses; indicate anticipated amount and specify the nature of the expense, such as higher education, medical, dental, or home repairs. If none, check here: []

## BANKRUPTCY

Have you ever filed for bankruptcy?	[] Yes	[ ] No
Case No.		Court
Debtors in Action		
Date of Final Hearing		

## ADDITIONAL FINANCIAL DATA

If there is any additional information we should be aware of that you have not referred to in your answers, please furnish the details below. Include any retirement or employment benefits, expense accounts, and the like not previously mentioned.

We need the information requested on this form in order to properly represent you. The court will require most of this information as well. Failure to complete this Master Information List can only harm you in your divorce and delay the progress of your case. Please check to see that you have completed each and every item.

\* \* \* \* \* \* \* \* \* \*

\* \* \* \* \* \* \* \* \* \*

I have completed this document to the best of my ability from whatever information I have available to me at this time, and it is true and correct to the best of my knowledge.

I further understand that it is imperative that I keep my attorneys advised during the pendency of this action of any change in assets, liabilities, or income.

Dated:

(Client's name)

# MISCELLANEOUS NOTES AND COMMENTS