

INFORMATION NEEDED FOR DIVORCE

PERSONAL:

Wife's Information

Husband's Info

Full Name (no initials)-

(Wife's maiden name)-

Address-

phone number-

date of birth-

place of birth-

race-

Social Security #-

occupation(title)-

Employer-

Employer's address-

work phone #-

work schedule-

employed there since-

monthly income before deductions (gross)-

monthly income after deductions (net)-

Highest grade completed-

Hawaii resident since-

Date and State/County of marriage-

(date of separation)-

prior marriage(s) from/to, state of marriage

Children's full names and dates of birth-

Children's schools and grade-

Children's present address-

Places and people with whom children lived during last five years-

Is wife pregnant?

FINANCIAL: # of dependents claimed:
paid every- [] week [] 2 weeks [] twice a month [] month [] other
taxes taken out:(per period)
Fed. - \$
State- \$
FICA- \$
Health Insurance- \$
Retirement- \$

Other regular monthly income- \$

Housing Expenses per month:

rent/mortgage- \$
utilities (gas, water, electric, phone)- \$

Transportation Expenses per month:

Car payment- \$
insurance- \$
maintenance- \$
gas/oil- \$

Personal Expenses per month:

	Wife	Husband	Children (#)
Food.....			
Clothes.....			
medical and dental.....			
laundry/cleaning.....			
personal articles.....			
Recreation.....			
School (include food)....			
Household.....			
Bus.....			
Childcare.....			
other ().....			

Information for Both

Assets:

Credit Union Accounts- (branch, balance, who's name **H**usband, **W**ife, **J**oint)

Checking and Savings Accnts- (bank, checking / savings, balance, **H** **W** **J**)

Stocks, Bonds, CD's: (company, type, **H** **W** **J**, date acquired, value)

Cars, Trucks, Motorcycles, Boats, Campers:

year make Title (**H** **W** **J**) Current market value Debt owed on

Real Property:

address **H W J** fee/lease date acquired cost value debt owed

Life Insurance:

company insured face amount Beneficiary cash value debt owed

Retirement; Pension; Profit Sharing accounts:

company type years in benefits payable when vested value

all other Major Assets:

description (**H W J**) value debt owed on

Property held in trust or by third persons:

All Outstanding Debts:

Creditor (**H W J**) date incurred balance owed / min. monthly payment

PLEASE COMPLETE THIS FORM AND MAIL OR EMAIL TO

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