

FULLER, HADEED, & ROS-PLANAS P.L.L.C.

ATTORNEYS AT LAW —

RITA ROS-PLANAS, ESQUIRE

DOMESTIC RELATIONS FORM

DATE:				
CLIENT'S NAME:				
	FIRST	FULL MIDDLE	MAIDEN	LAST
DATE OF BIRTH:		PLACE OI	BIRTH:	
SSN:		RACE*	, ,	d State or Country if not USA)
LAST GRADE COMPLET	ED IN HIGH SO	CHOOL (1-12)	GED?	YESNO
NUMBER OF YEARS OF	COLLEGE CON	MPLETED	DEGREES:	
				 1S, PhD.) Major
NUMBER OF THIS PRES	SENT MARRIA	GE	• • •	
If previously married,	how many ma	rriages ended by:	,	, ,
	,	,		
Death	divorce	annulmer	nt	
NUMBER OF CHILDREN	I BORN OR AD	OOPTED OF THIS (PRES	FNT) MARRIAGF:	
NAME			ATES OF BIRTH AND	
	_	_		
NUMBER OF CHILDREN	N BORN OR AD	OPTED OF ANY PREVI	OUS MARRIAGE OR	RELATIONSHIP:
NAME			ATES OF BIRTH AND	
	_	_		

DI FASE NOTE THE F	OLLOWING INFO	ORMATION IS ABOUT Y	OUR SPOUSE		
		_	OOK SI OOSE.		
SPOUSE'S NAME:	FIRST	FULL MIDDLE	MAIDEN	LAST	
DATE OF BIRTH:		PLACE OF		 nd State or Country if	
*This information is requ Hispanic, Asiatic or Nativ	•	Department of Vital Statistics	, ,	,	,
SSN:		RACE*			
AST GRADE COMPL	ETED IN HIGH S	CHOOL (1-12)	GED?	?YES	NO
NUMBER OF YEARS (OF <u>COLLEGE</u> CO	MPLETED	DEGREES	i:	
			(AA, BA, N	1S, PhD.) Major:	
NUMBER OF <u>THIS</u> PR	RESENT MARRIA	GE	("First"	, "Second", etc.)	
f <u>previously</u> married	d , how many ma	arriages ended by:			
Death	divorce	annulment	·		
		OOPTED OF ANY <u>PREVIC</u>			
NAN	<u>/IES</u>	<u>DA</u>	TES OF BIRTH AND	PRESENT AGE(<u>5).</u>
CITY/COUNTY AND	STATE (<u>AND</u> CO	UNTRY, <u>IF NOT USA</u>) IN	WHICH YOU WER	RE MARRIED:	••••
CITY/COUNTY AND S	STATE (<u>AND</u> CO	UNTRY, <u>IF NOT USA</u>) IN	I WHICH YOU WER	RE MARRIED:	••••
CITY/COUNTY AND	STATE (<u>AND</u> CO	UNTRY, <u>IF NOT USA</u>) IN	WHICH YOU WER	RE MARRIED:	• • • • •
			I WHICH YOU WER	RE MARRIED:	••••
			WHICH YOU WER	RE MARRIED:	••••
DATE OF MARRIAGE	:			RE MARRIED:	••••
DATE OF MARRIAGE	: ON (SEPARATE RI	ESIDENCES):			
DATE OF MARRIAGE DATE OF SEPARATIO LIVING IN SAME HOL	: ON (SEPARATE RI USE, SLEEPING II	ESIDENCES): N <u>SEPARATE ROOMS</u> SII	NCE:		
DATE OF MARRIAGE DATE OF SEPARATIO LIVING IN SAME HOL LIVING IN SAME HOL	: ON (SEPARATE RI USE, SLEEPING II USE, STILL SLEEP	ESIDENCES):	NCE:	(DATI	
DATE OF MARRIAGE DATE OF SEPARATIO LIVING IN SAME HOL LIVING IN SAME HOL	: ON (SEPARATE RI USE, SLEEPING II USE, STILL SLEEP	ESIDENCES): N <u>SEPARATE ROOMS</u> SII PING IN <u>SAME ROOM</u> :	NCE:	(DATI	=

RANK	YEARS.	RATF	NO
RANK	YEARS.	————— RATF	NO
	YES	RATF	NO
		RATE	
	_		
	YES		NO
RANK		RATE	
	_		
E:			
			ESIDED FOR
THIS OR IN AN	Y OTHER ST	ATE?	
	EACH PERSON RS: IN ANY OTHER THIS OR IN ANY	E: EACH PERSON OTHER THATES: IN ANY OTHER CAPACITY THIS OR IN ANY OTHER ST	RESS?

NAME:		
ARE YOU REQUESTING SPOUSAL SUPPORT?	IESO HOW MUCH (OO YOU EXPECT TO RECEIVE?
\$ IS YOUR SPOUSE REQUES		
. 10 10 010 0 002 112 0 01		
UPON WHAT GROUNDS DO YOU BASE YOU	ID DIVODCES	
6 MONTHS SEPARATION WITH SIGNED SEPA		
12 MONTHS SEPARATION WITH SIGNED SEP		
12 MONTHS WITHOUT SIGNED SEPARATION		
DESERTION/ABANDOMENT		
ADULTERY SPOUSE IN IAIL A	NID CONVICTED OF FELONIV	
ADULTERY SPOUSE IN JAIL A	THE CONVICTED OF TELONI	
DOES THE WIFE WISH TO RESUME HER MAI	DEN NAME? IF SO,	PLEASE PRINT FULL MAIDEN
NAME:		
DO EITHER YOU OR YOUR SPOUSE HOLD A L	ICENSE, CERTIFICATE, REGIST	RATION OR OTHER
AUTHORIZATION TO ENGAGE IN A PROFESSI	ION, TRADE, BUSINESS OR OT	THER OCCUPATION, ISSUED BY
THE COMMONWEALTH OF VIRGINIA?		
IF VES AMIFE. #	TVDE OF WORK	
IF YES, WIFE: #	TYPE OF WORK:	
HUSBAND: #		
IF YOU HAVE SEPARATION AGREEMENT SIGNAND DO NOT COMPLETE THIS SECTION:	GNED BY BOTH PARTIES, GIV	E US A COPY <u>IMMEDIATELY</u>
		
LIST OF PROPERTY/ASSETS		
1 a) DEAL ESTATE OWNED		
I. a) <u>REAL ESTATE OWNED</u>		
1. ADDRESS:		
DATE PURCHASED:	AMOUNT OF PURCHAS	E PRICE: \$
PRESENT VALUE: \$	TITLED TO: HUSBAND _	WIFE JOINT
[City tax assessment or appraisal		
MORTGAGES IN THE NAME OF: HUSBAND	WIFE JOIN	т
1 ST MORTGAGE BALANCE: \$	AND MONTHLY PAYN	MENT OF: S
2 ND MORTGAGE BALANCE: \$	AND MONTHLY PAYN	VIENT OF: \$
	2.475(0)	
REFINANCED? YESNO		
EQUITY TAKEN OUT? \$	DATE(S):	
b) LEASED RESIDENCE OR APARTMENT:	IOINT HUSDAND ONLY	WIEE ONLY
DATE LEASE ENDS AMOUNT C		
DITTE LEADE LINDS AIVIOUNT C	الا	

NAME:								

[SEE PAGE 8 IF ADDITIONAL REAL ESTATE, TIME SHARES, IF MORE THAN 3 VEHICLES \underline{OR} IF ANY BOATS ARE OWNED.]

II. <u>VEHICLES</u>					
1. MAKE/MODEL/YEA	\R:			WHO DRI	VES?
TITLED TO: H		_ JOINT	LOAN: H	_ w	VES? JOINT
LOAN BALANCE: \$			_ MONTHLY PAYMENTS	S: \$	PAID:
2. MAKE/MODEL/YEA	۸R:			WHO DRI	VES?
TITLED TO: H	_W	_ JOINT	LOAN: H	_ W	JOINT
LOAN BALANCE: \$			_ MONTHLY PAYMENTS	S: \$	PAID:
3. MAKE/MODEL/YEA	۸R:			WHO DRI	VES?
TITLED TO: H	_W	_ JOINT	LOAN: H	_ W	VES? JOINT
LOAN BALANCE: \$_			_ MONTHLY PAYMENTS	S: \$	PAID:
4. LEASED VEHICLES:	WHO DI	RIVES?			
COST PER MONTH: \$			EMPLOYER PAYS: \$		
III. <u>DEBTS</u>					
A. BANK OR FINANCIA	AL COMP	ANY LOANS	<u>)</u>		
MORTGAGE(S)					
NAME OF BANK OR N	/IORTGAC	GE COMPAN	NIES:		
B. 1. NAME OF BANK:	:				
2. PURPOSE OF LOAN	l:				
5. PRESENT BALANCE	:				
			USE OTHER		
7. MONTHLY PAYMEN	NTS: \$				
C. <u>CREDIT CARDS OF </u>	HUSBANI	D AND/OR \	WIFE: (EVEN IF IN THE I	NAME OF O	NLY ONE PARTY)
1. NAME OF BANK:					
3. PRESENT BALANCE	:				
4. JOINT: INI					
5. MONTHLY PAYMEN					
6. WHO HAS CARD:					

NAME:		
7. BALANCE AT TIME OF MARRIAGE: \$	AND RAI	_ANCE AT TIME OF SEPARATION: \$
8. IF ACCOUNT CLOSED, ON WHAT DATE WA		
	.5 626625	
1. NAME OF BANK:		
2. WHEN ACQUIRED:		
3. PRESENT BALANCE:		
4. JOINT: INDIVIDUAL:		
5. MONTHLY PAYMENTS:		
6. WHO HAS CARD: H W		
		ANCE AT TIME OF SEPARATION: \$
8. IF ACCOUNT CLOSED, ON WHAT DATE WA	S IT CLOSED? _	
1. NAME OF BANK:		
2. WHEN ACQUIRED:		
3. PRESENT BALANCE:		<u></u>
4. JOINT: INDIVIDUAL:		
5. MONTHLY PAYMENTS:		
6. WHO HAS CARD: H W	AND DAI	LANCE AT TIME OF SEPARATION: \$
7. BALANCE AT TIME OF MARKIAGE: \$	AND BAI	LANCE AT TIME OF SEPARATION: \$
8. IF ACCOUNT CLOSED, ON WHAT DATE WA	IS II CLOSED! _	
D. PERSONAL LOANS/PROMISSORY NOTES:		
D. PERSONAL EGANSY PROMISSION PROFES.		
1. NOTE SIGNED: YES NO	ву н	BY W
AMOUNT OWED \$	MONTHLY PA	YMENTS \$
WHEN DEBT WAS ACQUIRED:		
TO WHOM OWED:		
2. NOTE SIGNED: YES NO	BY H	BY W
AMOUNT OWED \$		
WHEN DEBT WAS ACQUIRED:		
TO WHOM OWED:		
E. BANKRUPTCY: YESNO_		
DATE DISCHARGED:		
CHAPTER 7 (NO PAYMENT TO BANKRUPTCY	COURT):	
CHAPTER 13 (MONTHLY PAYMENTS TO BAN	KRUPTCY COUR	XT):
CHAPTER 11:		
NAME OF BANKRUPTCY ATTORNEY:		
YOU SPOUSE JOINT		

NAME:			
IV INTANGIBLE PERSONAL PROPERTY	<u>'</u>		
A. <u>LIFE</u> INSURANCE COMPANY		WHOLE/TERM (Cash Value/No Cash Value)	BENEFICIARIES
1. ON YOUR LIFE:			
2. ON SPOUSE'S LIFE:	\$		
3. OTHER:	\$		
B. <u>STOCK:</u> (SPECIFY NAME, AMOUNT, C. <u>BONDS:</u> (SPECIFY NAME, AMOUNT, D. <u>TRUSTS:</u> (SPECIFY NAME, AMOUNT	, OWNERSHIP) Acquired	d during marriage?	
E. <u>SAVINGS ACCOUNTS:</u> (SPECIFY BAN	IK NAME, AMOUNT, OV	VNERSHIP)	
1. BANK:			
BALANCE:			
2. BANK:BALANCE:			
JOINT H W			
3. BANK:			
JOINT H W			

 $\mathsf{F.}\,\,\underline{\mathsf{CDS}}\,(\mathsf{SPECIFY}\,\,\mathsf{BANK}\,\,\mathsf{NAME},\,\mathsf{AMOUNT},\,\mathsf{OWNERSHIP})$

1. BANK: _______
BALANCE: ______
JOINT _____ H ____ W _____

NAME:								
2 BANK.								
Z. DAINK RΔΙ ΔΝ(F·								
IOINT	Н							
		_						
3. BANK:								
BALANCE:								
JOINT	H	W						
G. <u>RETIREME</u>	NT/PENSION	<u> </u>						
	Name of	Retirement P	<u>lan</u>	Present Va	<u>lue</u>		ars at that em	<u>oloyment</u>
						/ and du	<u>ıring marriage</u>	
LUICDAND								
HO2RAND: _								
\ \ / E E•								
WIFE:								
H. <u>IRAS</u>								
11. <u>110.15</u>								
Н	E	BALANCE: \$						
W	 E	BALANCE: \$						
V. <u>ADDITION</u>	IAL VEHICLES	S, BOATS, REA	L ESTAT	E AND TIME	SHARE	:		
A. CARS:								
							IVES?	
							JOINT	
LOAN BALAN	ICE: \$		МО	NTHLY PAYN	MENTS: S	Ş	PAID: _	
2	DEL MEAD.				,	WILO DD	IV/ECO	
Z. MAKE/IVIC	JDEL/YEAK: _	LOINT				WHO DRI	IVES?	
							JOINT PAID: _	
LUAN BALAN	ICE: \$		เงเบ	NITEL PATIV	IEIN I S. S	→	PAID:	
В. ВОАТS:								
D. <u>DOA13.</u>								
MAKE/MODI	EL/YEAR:				WI	HO DRIVE	ES?	
TITLED TO: H	-, · <u>-</u> , · · <u>-</u> H W	JOINT		LOAN: H		W	JOINT	
							PAID:	
PURCHASE P	RICE: \$		PRESEN	T VALUE: \$				
	-			_				

NAME:					
DATE ACQUIRED:					
C. <u>REAL ESTATE:</u>					
1. ADDRESS:					
DATE PURCHASED:		_ AMOUNT OF PUR	CHASE PR	RICE: \$	
PRESENT VALUE: \$					
[City tax assessment	or appraisal	as of		(date).]
MORTGAGES IN THE NAME OF:	HUSBAND	WIFE	JOINT		
1 ST MORTGAGE BALANCE: \$		AND MONTHLY	PAYMEN	T OF: \$	
2 ND MORTGAGE BALANCE: \$		AND MONTHLY	/ PAYMEN	IT OF: \$_	
REFINANCED? YES	NO	DATE(S):			
EQUITY TAKEN OUT? \$		DATE(S):			
2. ADDRESS:					
DATE PURCHASED:		_ AMOUNT OF PUR	CHASE PR	RICE: \$	
PRESENT VALUE: \$					
[City tax assessment	or appraisal	as of		(date).]
MORTGAGES IN THE NAME OF:	HUSBAND	WIFE	JOINT		
1 ST MORTGAGE BALANCE: \$		AND MONTHLY	PAYMEN	T OF: \$	
2 ND MORTGAGE BALANCE: \$					
REFINANCED? YES	NO	DATE(S):			
EQUITY TAKEN OUT? \$		DATE(S):			
		(-7			
D. <u>TIME SHARE:</u>					
NAME:		DATE ACQUIRED:	:		
JOINT: INDIVIDUAL:					
PURCHASE PRICE: \$	PRE	SENT VALUE:			
BALANCE: \$	MONT	HLY PAYMENTS: \$			-
OTHER VALUABLES: PLEAES BE	SPECIFIC. (EXAI	MPLES: Art works, ar	ntiques, je	welry of	both parties, etc.

<u>SEPARATE PROPERTY:</u> (items or assets acquired before the marriage, after the separation, by inheritance and gifts from any person other than spouse.)

NAME:	
DOMESTIC RELATIONS EMPLOYMENT	/INCOME QUESTIONNAIRE:
CLIENT'S EMPLOYER'S NAME:	
GROSS (NOT "TAKE HOME PAY") INCO	ME PER PAY CHECK:
HOW LONG AT JOB: YEARS	MONTHS
PERIODS: weekly bi-wee	MONTHS ekly twice per month once per month
NUMBER OF HOURS WORKED PER WE	
USUAL LINE OF WORK/TRADE/PROFES	SION:
COMMISSION OR BONUS OR OVERTIM	TE PAY/AVERAGE GROSS AMOUNTS?
3 HIGHEST AMOUNT OF GROSS YEARL	Y INCOME FROM ALL SOURCES IN PAST 3 YEARS:
AMOUNT: \$	YEAR:
AMOUNT: \$	YEAR:
AMOUNT: \$	YEAR:
RETIREMENT, SUPPORT, DISABILITY, SI	OUNTS PER MONTH (INTEREST, DIVIDENDS, RENTAL, ECOND JOB)? ***********************************
SPOUSE'S EMPLOYER'S NAME:	
	ME PER PAY CHECK:
HOW LONG AT JOB: YEARS	MONTHS
	twice per month once per month
NUMBER OF HOURS WORKED PER WE	<u>EK</u> :
JOB DESCRIPTION:	
	SION:
COMMISSION OR BONUS OR OVERTIM	TE PAY/AVERAGE GROSS AMOUNTS?
3 HIGHEST AMOUNT OF GROSS YEARL	Y INCOME FROM ALL SOURCES IN PAST 3 YEARS:
AMOUNT: \$	YEAR:
AMOUNT: \$	YEAR:
AMOUNT: \$	YEAR:
	OUNTS PER MONTH (INTEREST, DIVIDENDS, RENTAL,
RETIREMENT, SUPPORT, DISABILITY, SI	ECOND JOB)?

NAME:			
WHO PAYS: MEDICAL PROBLEMS C	OF EITHER PARTY?) AMOUNT PAID: \$	/MONTH
IF CHILDREN:	DS AND <u>AVERAGE COS</u>	<u>ST</u> OF SAME ON MONTHLY BASIS	
CHILD CARE COSTS:	\$\$	/MONTH FOR SCHOOL YE	AR ACATION MONTHS
PROVIDERS:			
SCHOOL YEAR:SUMMER:			