



# Financial Questionnaire

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Preferred Contact Number  Home  Work  Cell

Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Spouse Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Email \_\_\_\_\_

Children Name(s)	Date of Birth	Currently Lives With			
		You	Spouse	Both	Other
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Current Marital Situation

Years Married \_\_\_\_\_ Date of Marriage \_\_\_\_\_

Currently Separated?  Yes  No Date of Separation \_\_\_\_\_

Filed for Divorce?  Yes  No Date of Filing \_\_\_\_\_

Who Filed?  You  Spouse Attorney Engaged?  Yes  No

Attorney Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Email \_\_\_\_\_

### Other Professionals ( CPA, Therapist, etc )

Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please initial here to give me permission to speak to these professionals \_\_\_\_\_





## Financial Questionnaire

### Was the separation or divorce expected?

- Yes, long over due
- Yes, only recently
- No, it was a completely unexpected
- No, but I had my suspicions

### Do you want this divorce?

- Not at all
- No, but I'm resigned to it
- No, for religious reasons
- I feel it's for the best
- Yes

### Previous Marriages

Where you previously married?  Yes  No

Marriage Date \_\_\_\_\_ Divorce Date \_\_\_\_\_

Do you pay alimony?  Yes  No

Do you receive alimony?  Yes  No

Was your spouse previously married?  Yes  No

Does your spouse pay alimony?  Yes  No

Does your spouse receive alimony?  Yes  No

### Factors Contribution to Marital Problems (check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Always had difficulty communicating       | <input type="checkbox"/> Recently had difficulty communicating        |
| <input type="checkbox"/> Always fighting                           | <input type="checkbox"/> Abusive relationship                         |
| <input type="checkbox"/> Difference in expectations about marriage | <input type="checkbox"/> Difference in expectations about family life |
| <input type="checkbox"/> Outside relationships                     | <input type="checkbox"/> Differences in handling finances             |
| <input type="checkbox"/> Work commitment                           | <input type="checkbox"/> School commitment                            |

Other (please explain) \_\_\_\_\_

### Major Financial Events / Changes in the last 12 months

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Lost job                    | <input type="checkbox"/> Job Security                   | <input type="checkbox"/> Relocation for job                |
| <input type="checkbox"/> Legal problems              | <input type="checkbox"/> Credit problems                | <input type="checkbox"/> Bankruptcy                        |
| <input type="checkbox"/> Foreclosure                 | <input type="checkbox"/> Childcare changes              | <input type="checkbox"/> Undertaken major expense          |
| <input type="checkbox"/> Outstanding debt            | <input type="checkbox"/> Parent / In-Law care           | <input type="checkbox"/> Death in family                   |
| <input type="checkbox"/> Empty Nest                  | <input type="checkbox"/> College Educational Costs      | <input type="checkbox"/> Started School / Training Program |
| <input type="checkbox"/> Graduated School / Training | <input type="checkbox"/> Child's Special Needs expenses | <input type="checkbox"/> Child / Support changes           |

Other (please explain) \_\_\_\_\_





## Financial Questionnaire

### Financial Management

Do you have an understanding of your financial situation?  Completely  I think so  Not sure  No

Who manages the checkbook?  You  Spouse  We have separate

Do you have credit cards in  Your name  Joint with spouse

Who pays the bills?  You  Spouse  Both  Bills are separate

Who is the Saver:  You  Spouse  Both  Neither

Who is the Spender?  You  Spouse  Both  Neither

#### Strategies for Saving Money (check all that apply)

- Saving Account
- Annuity
- 401(K)
- 457
- Pension
- S Corporation
- Online Banking
- Real Estate Investment Trusts
- Do without
- Emergency Fund
- IRA
- 401(A)
- Separate Accounts
- LLC's
- Limited Partnerships
- Automated Savings
- Real Estate
- Coupons
- CD's
- Roth IRA
- 403(B)
- College Funds
- C Corporation
- Health Savings Account
- Off-shore Accounts
- Written Budget
- Stocks / Bonds / Mutual Funds

#### Strategies for Spending Money (check all that apply)

- Spend within a budget
- It was on sale!
- I saw it, I liked it, I bought it!
- Coupons
- Spending based on future income
- Spending based on future worries
- Retirement Plans
- Only if we have cash for it
- Charge it, then worry about paying
- Determine budget based on spending (raise, bonus, winning lottery, etc.)
- Rigid Financial Management
- Live paycheck to paycheck
- Arbitrary Spending

#### When making financial decisions we:

- Discuss the pros & cons
- By Dictate
- Clear roles defined
- Negotiate
- Avoiding
- Accommodating
- Arguing, one wins
- Arguing, resolution
- Arguing, no resolution





# Financial Questionnaire

## Personal Career History

Homemaker For how long? \_\_\_\_\_

Position Prior to Homemaker? \_\_\_\_\_  Paid  non-Paid

For how long? \_\_\_\_\_ Annual Income \_\_\_\_\_

Employed Employment Length \_\_\_\_\_ (# years contiguous employment)

Position \_\_\_\_\_ Annual Income \_\_\_\_\_

% Household Income \_\_\_\_\_

My biggest financial concern is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

It's important financially to me that: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

My biggest financial concern for my spouse is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I worry financially my spouse will: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Regardless of age) My biggest financial concern for our children is: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

