

Data Input Forms

Submitter name: _____

General Information

General header information

Case number _____
Court name _____
Court circuit _____
Court location _____
Petitioner/Plaintiff name _____
Respondent/Defendant name _____
Case name _____
Submitter name _____
Submitter address _____
Submitter city, state, zip _____
Submitter telephone _____
Submitter fax _____
Submitter role _____
Marriage date _____
Marriage dissolution date _____
Submitter birth date _____
Submitter Soc Sec No _____
Submitter employed? _____
Submitter retired? _____
Date submitter retired _____
Marriage has children? _____

Unemployment information

Unemployment explanation _____
Efforts to find work _____
Expected employment date _____
Expected employment pay _____

Job(s)

Submitter's job #1 Occupation _____
employer _____
employer address _____
employer city, state, zip _____
employer telephone _____
pay rate _____
Submitter's job #2 Occupation _____
employer _____

Submitter name: _____

employer address _____
 employer city, state, zip _____
 employer telephone _____
 pay rate _____
 Submitter's job #3 Occupation _____
 employer _____
 employer address _____
 employer city, state, zip _____
 employer telephone _____
 pay rate _____

Job(s) Retired From

Submitter's retired job #1 employer _____
 employer address _____
 employer city, state, zip _____
 employer telephone _____
 Submitter's retired job #2 employer _____
 employer address _____
 employer city, state, zip _____
 employer telephone _____

Children from this marriage

Name	Date of Birth	Residing With
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other minor children living in household

Name	Date of Birth	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Income and Deductions

Income

Description of income source (job)	Weekly	or Monthly	or Annual
Gross salary or wages	_____	_____	_____
Bonus	_____	_____	_____
Commission	_____	_____	_____
Allowances	_____	_____	_____
Overtime	_____	_____	_____
Tips	_____	_____	_____
Business/Self-employment	_____	_____	_____
Disability	_____	_____	_____
Workers comp.	_____	_____	_____
Unemployment	_____	_____	_____
Pension	_____	_____	_____
Other retirement	_____	_____	_____
Annuity	_____	_____	_____
Social Security	_____	_____	_____
Interest	_____	_____	_____
Dividends	_____	_____	_____
Net rental income	_____	_____	_____
Royalties	_____	_____	_____
Trust	_____	_____	_____
Estate	_____	_____	_____
Alimony - this case	_____	_____	_____
Alimony - other cases	_____	_____	_____
Child support - this case	_____	_____	_____
Child support - other cases	_____	_____	_____
Other income item #1 desc _____	_____	_____	_____
Other income item #2 desc _____	_____	_____	_____
Other income item #3 desc _____	_____	_____	_____
Other income item #4 desc _____	_____	_____	_____
Other income item #5 desc _____	_____	_____	_____

Deductions

Tax filing status _____
Number of dependents claimed _____

Description	Weekly	or Monthly	or Annual
Federal tax	_____	_____	_____
State tax	_____	_____	_____
Local tax	_____	_____	_____
FICA or Self-Emp tax	_____	_____	_____
Medicare tax	_____	_____	_____
Mandatory union dues	_____	_____	_____
Mandatory retirement	_____	_____	_____
Health insurance premium	_____	_____	_____
Alimony - this case	_____	_____	_____
Alimony - other cases	_____	_____	_____
Child support - this case	_____	_____	_____
Child support - other cases	_____	_____	_____
Other deductions #1 description _____	_____	_____	_____
Other deductions #2 description _____	_____	_____	_____
Other deductions #3 description _____	_____	_____	_____
Other deductions #4 description _____	_____	_____	_____
Other deductions #5 description _____	_____	_____	_____

Living Expenses

Household Expenses

Description	Weekly	or Monthly	or Annual
Mortgage	_____	_____	_____
Rent	_____	_____	_____
Home equity loan	_____	_____	_____
Real estate tax	_____	_____	_____
Condo fees/assessments	_____	_____	_____
Home/rental insurance	_____	_____	_____
Heating oil	_____	_____	_____
Natural gas	_____	_____	_____
Electricity	_____	_____	_____
Telephone	_____	_____	_____
Cable TV	_____	_____	_____
Water	_____	_____	_____
Sewer	_____	_____	_____
Trash	_____	_____	_____
Other utilities	_____	_____	_____
Lawn care	_____	_____	_____
Maid/Cleaning	_____	_____	_____
Laundry/dry cleaning	_____	_____	_____
Food/groceries	_____	_____	_____
Meals out	_____	_____	_____
Other household exp #1 desc _____	_____	_____	_____
Other household exp #2 desc _____	_____	_____	_____
Other household exp #3 desc _____	_____	_____	_____
Other household exp #4 desc _____	_____	_____	_____
Other household exp #5 desc _____	_____	_____	_____

Transportation Expenses

Description	Weekly	or Monthly	or Annual
Gas/Oil	_____	_____	_____
Auto repair	_____	_____	_____
Auto loan payments	_____	_____	_____
Auto tags/emissions	_____	_____	_____
Auto rental/replacements	_____	_____	_____
Tolls	_____	_____	_____
Parking	_____	_____	_____
Public/other Transportation	_____	_____	_____
Car insurance	_____	_____	_____
Other transportation exp #1 desc _____	_____	_____	_____
Other transportation exp #2 desc _____	_____	_____	_____
Other transportation exp #3 desc _____	_____	_____	_____

Submitter name: _____

Other transportation exp #4 desc _____

Other transportation exp #5 desc _____

Personal Expenses

Description	Weekly	or Monthly	or Annual
Personal clothing	_____	_____	_____
Personal grooming	_____	_____	_____
Medical insurance	_____	_____	_____
Dental insurance	_____	_____	_____
Term life insurance	_____	_____	_____
Whole life insurance	_____	_____	_____
Unreimbursed Medical/prescriptions	_____	_____	_____
Unreimbursed Dental	_____	_____	_____
Cosmetics, toiletries, sundries	_____	_____	_____
Mandatory retirement	_____	_____	_____
Voluntary retirement	_____	_____	_____
Personal education	_____	_____	_____
Entertainment	_____	_____	_____
Club dues	_____	_____	_____
Sports/hobbies	_____	_____	_____
Vacation	_____	_____	_____
Periodicals/Books/Tapes/CD's	_____	_____	_____
Gifts	_____	_____	_____
Pets	_____	_____	_____
Religious	_____	_____	_____
Other personal exp #1 desc _____	_____	_____	_____
Other personal exp #2 desc _____	_____	_____	_____
Other personal exp #3 desc _____	_____	_____	_____
Other personal exp #4 desc _____	_____	_____	_____
Other personal exp #5 desc _____	_____	_____	_____

Children's Expenses

Description	Weekly	or Monthly	or Annual
Childrens nursery, babysitting, day care	_____	_____	_____
Childrens clothing	_____	_____	_____
Childrens grooming	_____	_____	_____
Childrens tuition/books	_____	_____	_____
Childrens lessons/clubs/camps	_____	_____	_____
Childrens entertainment	_____	_____	_____
Childrens life insurance	_____	_____	_____
Childrens medical/dental insurance	_____	_____	_____
Childrens unreimbursed medical/dental	_____	_____	_____
Other child exp #1 description _____	_____	_____	_____
Other child exp #2 description _____	_____	_____	_____

Submitter name: _____

Other child exp #3 description _____	_____	_____	_____
Other child exp #4 description _____	_____	_____	_____
Other child exp #5 description _____	_____	_____	_____
Children other relationship exp #1 desc _____	_____	_____	_____
Children other relationship exp #2 desc _____	_____	_____	_____
Children other relationship exp #3 desc _____	_____	_____	_____
Children other relationship exp #4 desc _____	_____	_____	_____
Children other relationship exp #5 desc _____	_____	_____	_____

Miscellaneous Expenses

Description	Weekly	or Monthly	or Annual
Alimony this case _____	_____	_____	_____
Alimony other cases _____	_____	_____	_____
Child support this case _____	_____	_____	_____
Child support other cases _____	_____	_____	_____
Other expense #1 description _____	_____	_____	_____
Other expense #2 description _____	_____	_____	_____
Other expense #3 description _____	_____	_____	_____
Other expense #4 description _____	_____	_____	_____
Other expense #5 description _____	_____	_____	_____

Property Assets

Homes

Address, city, state, and zip	Market value	Total debt	Title if not joint hus wife	NonMarital hus wife
_____	_____	_____	h h h	h h h
_____	_____	_____	h h h	h h h
_____	_____	_____	h h h	h h h
_____	_____	_____	h h h	h h h
_____	_____	_____	h h h	h h h

Other Real Property

Address, city, state, and zip	Market value	Total debt	Title if not joint hus wife	NonMarital hus wife
_____	_____	_____	h h h	h h h
_____	_____	_____	h h h	h h h
_____	_____	_____	h h h	h h h
_____	_____	_____	h h h	h h h
_____	_____	_____	h h h	h h h

Automobiles

Year, make, and model	Market value	Total debt	Title if not joint hus wife	NonMarital hus wife
Car #1 year _____	_____	_____	h h h	h h h
Car #2 year _____	_____	_____	h h h	h h h
Car #3 year _____	_____	_____	h h h	h h h
Car #4 year _____	_____	_____	h h h	h h h
Car #5 year _____	_____	_____	h h h	h h h

Other Personal Property

Description	Value	Title if not joint hus wife	NonMarital hus wife
Other personal property #1 desc _____	_____	h h h	h h h
Other personal property #2 desc _____	_____	h h h	h h h
Other personal property #3 desc _____	_____	h h h	h h h
Other personal property #4 desc _____	_____	h h h	h h h
Other personal property #5 desc _____	_____	h h h	h h h
Other personal property #6 desc _____	_____	h h h	h h h
Other personal property #7 desc _____	_____	h h h	h h h
Other personal property #8 desc _____	_____	h h h	h h h
Other personal property #9 desc _____	_____	h h h	h h h
Other personal property #10 desc _____	_____	h h h	h h h

Financial Assets

Cash

Description	Value	Title if not joint hus wife	NonMarital hus wife
_____	_____	///	///
_____	_____	///	///
_____	_____	///	///
_____	_____	///	///
_____	_____	///	///

Bank Accounts

Description	Type (checking, savings, etc.)	Value	Title if not joint hus wife	NonMarital hus wife
_____	_____	_____	///	///
_____	_____	_____	///	///
_____	_____	_____	///	///
_____	_____	_____	///	///
_____	_____	_____	///	///
_____	_____	_____	///	///
_____	_____	_____	///	///
_____	_____	_____	///	///
_____	_____	_____	///	///
_____	_____	_____	///	///

Types of bank accounts include:
 Savings, Checking, CD, Money Market, Other (please specify)

Stocks

Description	Date of valuation	Shares	Price/Share	Title if not joint hus wife	NonMarital hus wife
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///
_____	_____	_____	_____	///	///

Submitter name: _____

_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Life Insurance

Company	Name of insured	Policy amt	Cash value	Loan amt	Title if not joint hus wife	NonMarital hus wife
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Retirement/Deferred Compensation

Description	Value	Title if not joint hus wife	NonMarital hus wife
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other Financial Assets

Description	Value	Title if not joint hus wife	NonMarital hus wife
Other financial asset #1 desc _____	_____	_____	_____
Other financial asset #2 desc _____	_____	_____	_____
Other financial asset #3 desc _____	_____	_____	_____
Other financial asset #4 desc _____	_____	_____	_____
Other financial asset #5 desc _____	_____	_____	_____
Other financial asset #6 desc _____	_____	_____	_____
Other financial asset #7 desc _____	_____	_____	_____
Other financial asset #8 desc _____	_____	_____	_____
Other financial asset #9 desc _____	_____	_____	_____
Other financial asset #10 desc _____	_____	_____	_____

Miscellaneous Assets

Business Interest Assets

Description	Value	Title if not joint hus wife	NonMarital hus wife
_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ

Other Miscellaneous Assets

Description	Value	Title if not joint hus wife	NonMarital hus wife
Other asset #1 desc _____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
Other asset #2 desc _____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
Other asset #3 desc _____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
Other asset #4 desc _____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
Other asset #5 desc _____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
Other asset #6 desc _____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
Other asset #7 desc _____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
Other asset #8 desc _____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
Other asset #9 desc _____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
Other asset #10 desc _____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ

Contingent Assets

Description	Value	Title if not joint hus wife	NonMarital hus wife
_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ

Assets Transferred to Other People in Past Year

Description	Person to whom transferred	Relationship	Value	Title if not joint hus wife	NonMarital hus wife
_____	_____	_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
_____	_____	_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
_____	_____	_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
_____	_____	_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ
_____	_____	_____	_____	ℳ ℳ ℳ	ℳ ℳ ℳ

Liabilities

Credit Card debts

Description	Payment	Period	Balance	Title if not joint	
				hus wife	NonMarital hus wife
_____	_____	_____	_____	£ £ £ £	£ £ £ £
_____	_____	_____	_____	£ £ £ £	£ £ £ £
_____	_____	_____	_____	£ £ £ £	£ £ £ £
_____	_____	_____	_____	£ £ £ £	£ £ £ £
_____	_____	_____	_____	£ £ £ £	£ £ £ £

Bank/Credit union loans

Description	Payment	Period	Balance	Title if not joint	
				hus wife	NonMarital hus wife
_____	_____	_____	_____	£ £ £ £	£ £ £ £
_____	_____	_____	_____	£ £ £ £	£ £ £ £
_____	_____	_____	_____	£ £ £ £	£ £ £ £
_____	_____	_____	_____	£ £ £ £	£ £ £ £
_____	_____	_____	_____	£ £ £ £	£ £ £ £

Other Debts

Description	Creditor name	Original debt	Payment	Period	Balance	Title if not joint	
						hus wife	NonMarital hus wife
_____	_____	_____	_____	_____	_____	£ £ £ £	£ £ £ £
Date incurred: _____							
_____	_____	_____	_____	_____	_____	£ £ £ £	£ £ £ £
Date incurred: _____							
_____	_____	_____	_____	_____	_____	£ £ £ £	£ £ £ £
Date incurred: _____							
_____	_____	_____	_____	_____	_____	£ £ £ £	£ £ £ £
Date incurred: _____							
_____	_____	_____	_____	_____	_____	£ £ £ £	£ £ £ £
Date incurred: _____							
_____	_____	_____	_____	_____	_____	£ £ £ £	£ £ £ £
Date incurred: _____							
_____	_____	_____	_____	_____	_____	£ £ £ £	£ £ £ £
Date incurred: _____							

Submitter name: _____

_____	_____	_____	_____	_____	_____	RS RS RS	RS RS RS
Date incurred:	_____						
_____	_____	_____	_____	_____	_____	RS RS RS	RS RS RS
Date incurred:	_____						
_____	_____	_____	_____	_____	_____	RS RS RS	RS RS RS
Date incurred:	_____						
_____	_____	_____	_____	_____	_____	RS RS RS	RS RS RS
Date incurred:	_____						
_____	_____	_____	_____	_____	_____	RS RS RS	RS RS RS
Date incurred:	_____						

Contingent Liabilities

Description	Creditor name	Debt amount	Payment	Period	Balance	Title if not joint	
						hus wife	NonMarital hus wife
_____	_____	_____	_____	_____	_____	RS RS RS	RS RS RS
Date incurred:	_____						
_____	_____	_____	_____	_____	_____	RS RS RS	RS RS RS
Date incurred:	_____						
_____	_____	_____	_____	_____	_____	RS RS RS	RS RS RS
Date incurred:	_____						
_____	_____	_____	_____	_____	_____	RS RS RS	RS RS RS
Date incurred:	_____						
_____	_____	_____	_____	_____	_____	RS RS RS	RS RS RS
Date incurred:	_____						