
Financial Information



Banfield
divorce financial advisors

Family Information Sheet

PARTY#1'S BACKGROUND INFORMATION:

Name (First, Middle, Last): _____

Social Security Number: _____ Gender: Male. Female.

Date of Birth: _____ Date of Marriage: _____ Date Separated: _____

Address: _____

City, state Zip: _____, _____

Phone: _____ Cell Phone: _____

E-mail: _____

PARTY#2'S BACKGROUND INFORMATION:

Name (First, Middle, Last): _____

Social Security Number: _____ Gender: Male. Female.

Date of Birth: _____

Address: _____

City, state Zip: _____, _____

Phone: _____ Cell Phone: _____

E-mail: _____

CHILDREN

Child's Name	Date of Birth	Custody Husband or Wife (H/W)	Exemption Husband or Wife (H/W)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Income and Expenses

WAGES FOR PARTY#1

Annual wage and salary income, before taxes: _____

WAGE-LIKE INCOME FOR PARTY#1

Use this sheet to specify income that is not covered on any other sheet.
Specify an amount in whichever column (Week, Month, or Year) is most convenient.

Item	Amount per...		
	Week	Month	Year
Child support from previous relationship	_____	_____	_____
Alimony from previous relationship	_____	_____	_____
Unemployment Compensation	_____	_____	_____
Public Assistance	_____	_____	_____
Bonuses	_____	_____	_____
Commissions	_____	_____	_____
Tips	_____	_____	_____
Overtime	_____	_____	_____
Disability Benefits	_____	_____	_____
Workers' Compensation	_____	_____	_____
Royalties	_____	_____	_____
Rent from Spouse	_____	_____	_____
Deferred Compensation	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Expense List

On this data sheet, specify the household, child, and personal expenses of everyday life. The list tries to be comprehensive, but there is no need to fill in every line.

Note: We suggest that you specify mortgage and/or rental expenses on the data sheets on "Real Estate," not on this data sheet. Specify alimony and support for this spouse on the "Alimony & Support" sheets. Specify education tuition as a "Major Expense," not here.

Enter the amount spent on this item, per week, or per month, or per year (not all three).

Enter Expenses for Party#1	Weekly	Monthly	Annual
DEDUCTIONS			
A. Mandatory Deductions			
Local Income Tax	_____	_____	_____
PERA/Civil Service	_____	_____	_____
Union Dues	_____	_____	_____
Other	_____	_____	_____
B. Voluntary Deductions			
Insurance Premiums (if not paid by employer)			
Health Insurance	_____	_____	_____
Dental Insurance	_____	_____	_____
Child care	_____	_____	_____
Retirement & Deferred compensation	_____	_____	_____
Disability Insurance	_____	_____	_____
Stocks / Bonds	_____	_____	_____
Other	_____	_____	_____
MONTHLY EXPENSES			
A. Housing			
Rent Paid	_____	_____	_____
Insurance Real property taxes			
Real Estate Taxes, Assessments	_____	_____	_____
Homeowners insurance	_____	_____	_____
Renters insurance	_____	_____	_____

Enter Expenses for Party#1

Weekly

Monthly

Annual

Enter Expenses for Party#1	Weekly	Monthly	Annual
Condo & Homeowner assoc. fees	_____	_____	_____
Other	_____	_____	_____
B. Utilities and Miscellaneous Housing Services			
Gas & Electricity, etc.			
Gas and Propane	_____	_____	_____
Electricity	_____	_____	_____
Heating Fuel Oil	_____	_____	_____
Other Utilities	_____	_____	_____
Water, Sewer & Trash			
Water and Sewer	_____	_____	_____
Trash Removal	_____	_____	_____
Telephone, cell phone and e-mail			
Phone (local & long distance)	_____	_____	_____
Cell Phone & Pager	_____	_____	_____
Property Care			
Painting and Wallpapering	_____	_____	_____
Repairs & Maintenance	_____	_____	_____
Lawn & Garden	_____	_____	_____
Snow Removal	_____	_____	_____
Maid / Cleaning Service	_____	_____	_____
Furniture & Appliance Repair	_____	_____	_____
Internet, Cable & Satellite TV			
Cable / Satellite TV	_____	_____	_____
Internet Service Provider	_____	_____	_____
Other	_____	_____	_____

Enter Expenses for Party#1

Weekly

Monthly

Annual

C. Food & Supplies

Groceries

Groceries _____

Food for children _____

Liquor _____

Non-prescription medications _____

Cigarettes _____

Eating Out _____

D. Health Care Costs (Co-pays, Premiums, etc.)

Doctor & Vision Care

Doctor (for adults) _____

Optical (for adults) _____

Doctor (for children) _____

Optical (for children) _____

Medicine & RX Drugs

Medication (for adults) _____

Medication (for children) _____

Dentist & Orthodontist

Dental (for adults) _____

Dental (for children) _____

Orthodontic _____

Therapist _____

Premiums (if not paid by employer)

Health Insurance _____

Dental Insurance _____

Other _____

Enter Expenses for Party#1

Weekly

Monthly

Annual

E. Transportation & Recreation Vehicles (Motorcycles, Motor Homes, Boats, ATV, etc.)

Primary Vehicle Payments _____

Other Vehicle Payments _____

Fuel, Parking and Maintenance

Gasoline _____

Repairs and Maintenance _____

Parking _____

Bus & Commuter Fees

Public Transportation _____

Tolls _____

Insurance Registration

Insurance _____

License / City Stickers _____

Other _____

F. Children's Expenses and Activities

Clothing & Shoes _____

Extraordinary Expenses _____

Tuition _____

Child care

Child care _____

Sitters _____

Misc. Expenses

Books / Fees _____

Education Supplies _____

School lunch _____

School Transportation _____

School-sponsored activities _____

Enter Expenses for Party#1

Weekly

Monthly

Annual

School room and board	_____	_____	_____
Grooming	_____	_____	_____
Clubs / Summer Camps	_____	_____	_____
Entertainment	_____	_____	_____
Allowance	_____	_____	_____
Other	_____	_____	_____

G. Education

Full-time student [] Part-time student []

Education Expenses

Tuition, Books Supplies, Fees	_____	_____	_____
Unreimbursed Employment Education	_____	_____	_____
Other	_____	_____	_____

H. Maintenance & Child Support

Prior Spousal Maintenance	_____	_____	_____
Prior Child Support	_____	_____	_____

I. Miscellaneous (Please list on-going expenses not covered in the sections above)

Recreation / Entertainment

Entertainment	_____	_____	_____
Horseback	_____	_____	_____
Lottery	_____	_____	_____

Club dues and membership	_____	_____	_____
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Legal / Accounting Fees

Legal and Accounting	_____	_____	_____
Bank charges/credit card fees	_____	_____	_____
Personal Property Insurance	_____	_____	_____

Charity/Worship

Charitable	_____	_____	_____
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Enter Expenses for Party#1

Weekly

Monthly

Annual

Religious organizations _____

Vacation/Travel/Hobbies

Travel _____

Vacations (not including children) _____

Vacations (children only) _____

Employment Unreimbursed Travel _____

Pet expenses _____

Personal Care

Hair _____

Manicure, Pedicure _____

Clothing for adults _____

Employment Uniforms _____

Laundry _____

Dry Cleaning _____

Newspapers, magazines, books _____

Movie & Video Rentals _____

Savings _____

Home Furnishing _____

Sports Events / Participation _____

..... _____

..... _____

..... _____

..... _____

..... _____

..... _____

..... _____

..... _____

5. REAL ESTATE:

Basic Info:	1st Property	2nd Property	3rd Property
Address:	_____	_____	_____
	_____	_____	_____
Current Value:	_____	_____	_____
Original Cost:	_____	_____	_____
Title (H, W, J)*:	_____	_____	_____
1st Mortgage:			
Balance:	_____	_____	_____
Interest Rate (%):	_____	_____	_____
Monthly Payment*:	_____	_____	_____
Statement Month/Year:	_____	_____	_____
Who will pay (H/W/Both):	_____	_____	_____
2nd Mortgage:			
Balance:	_____	_____	_____
Interest Rate (%):	_____	_____	_____
Monthly Payment*:	_____	_____	_____
Statement Month/Year:	_____	_____	_____
Who will pay (H/W/Both):	_____	_____	_____

* For monthly payment include interest & principal only, do NOT include taxes or insurance.

* Title (H-Husband, W-Wife, J-Joint)

