

T H E L A W O F F I C E S O F

**PAUL V. MOYER, P.L.**

A P R O F E S S I O N A L A S S O C I A T I O N

815 ORIENTA AVENUE, SUITE SIX, POST OFFICE BOX 151058, ALTAMONTE SPRINGS, FLORIDA 32715-1058  
Telephone: 407.331.5505 Facsimile: 407.331.6308 Web: www.moyerlawyer.com

## **CONFIDENTIAL DIVORCE QUESTIONNAIRE**

**P**lease complete this questionnaire and return it to the office before your appointment. If you will spend the time to complete all items, you will give us the necessary background information to begin to understand the complexity of the personal aspects of your marriage. All information will be held in strict confidence.

1. Please give us your full name, date and place of birth, and social security number.
  - a. Name \_\_\_\_\_
  - b. Date of birth \_\_\_\_\_
  - c. Place of birth \_\_\_\_\_
  - d. Social security number \_\_\_\_\_
  - e. Highest degree of education \_\_\_\_\_Portion completed before marriage \_\_\_\_\_
  
2. Where are you now living and what is your telephone number?
  - a. Street address \_\_\_\_\_
  - b. City, state, and zip code \_\_\_\_\_
  - c. Home telephone number \_\_\_\_\_

d. How long have you lived in Florida? \_\_\_\_\_

e. Other residences during the last five years:

\_\_\_\_\_  
\_\_\_\_\_

3. If you are not now living with your spouse, give an approximate date of separation.

\_\_\_\_\_

Have there been prior separations? \_\_\_\_\_ How many? \_\_\_\_\_

Approximately when and for how long? \_\_\_\_\_

\_\_\_\_\_

4. Please give the date and place of your marriage.

Date \_\_\_\_\_ Place \_\_\_\_\_

5. Please complete the following concerning your employment and income.

a. Employer \_\_\_\_\_

b. Street address \_\_\_\_\_

c. City, state, and zip code \_\_\_\_\_

d. Telephone number \_\_\_\_\_

e. Job title \_\_\_\_\_

f. Gross salary \_\_\_\_\_

g. Other sources of income (describe) \_\_\_\_\_

h. Average monthly income from all sources \$ \_\_\_\_\_

6. Please provide the following information for your spouse.

a. Name \_\_\_\_\_

b. Date of birth \_\_\_\_\_

c. Place of birth \_\_\_\_\_

d. Social security number \_\_\_\_\_

- e. Highest degree of education \_\_\_\_\_  
Portion completed before marriage \_\_\_\_\_

7. Where is your spouse now living?

- a. Street address \_\_\_\_\_
- b. City, state, and zip code \_\_\_\_\_
- c. Residence telephone number \_\_\_\_\_
- d. How long has your spouse resided in Florida? \_\_\_\_\_

8. Please complete the following regarding your spouse's employment

- a. Employer \_\_\_\_\_
- b. Street address \_\_\_\_\_
- c. City, state, and zip code \_\_\_\_\_
- d. Telephone number \_\_\_\_\_
- e. Job title \_\_\_\_\_
- f. Gross salary \_\_\_\_\_
- g. Other sources of income (describe) \_\_\_\_\_
- h. Average monthly income from all sources \$ \_\_\_\_\_

9. Have there been prior court proceedings between you and your spouse? \_\_\_\_\_  
If so, please bring copies of all related documents. Who was your previous attorney? \_\_\_\_\_

10. Are there any children? \_\_\_\_\_ If so, please provide the following information. If a child is adopted, please indicate. If a child is from a previous marriage, please indicate.

Name	Sex	Date and place of birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. Where are the children living at this time? \_\_\_\_\_

Would you like to have custody of the child(ren)? \_\_\_\_\_ yes \_\_\_\_\_ no

List all of the addresses for the children during the last five years starting the their current address. If any child lived with anyone other than you and your spouse, give the name and address of the custodian and the dates the child resided with that person.

Child	Custodian/Address	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

12. List all property, if any, owned by the children.  
\_\_\_\_\_

13. How long have you and your spouse been having marital difficulties?  
\_\_\_\_\_

Has there been domestic violence? \_\_\_\_\_ If so, date of most recent incident  
\_\_\_\_\_

Were the police called? \_\_\_\_\_ Did either spouse receive medical attention? \_\_\_\_\_

Names, addresses and phone numbers of any witnesses to incidents of domestic violence.  
\_\_\_\_\_

14. Have you and your spouse tried counseling? \_\_\_\_\_ If so, with whom and for how long? \_\_\_\_\_

15. Do you want counseling for yourself? \_\_\_\_\_ Your spouse? \_\_\_\_\_ Both you and

your spouse? \_\_\_\_\_ Your children? \_\_\_\_\_

16. Do you see divorce as the only solution? \_\_\_\_\_

17. Is your spouse in favor of this divorce? \_\_\_\_\_

18. Do you want a reconciliation? \_\_\_\_\_

19. Do you want a maiden or prior name to be restored? \_\_\_\_\_ If yes, please give the name \_\_\_\_\_

20. What is the condition of your mental and physical health?

\_\_\_\_\_

21. Indicate your priorities on the following issues by assigning numbers, with one being the highest priority:

___ Visitation	___ Child custody
___ Child support	___ Property distribution
___ Alimony	___ Attorneys' fees
___ Restraining abusive spouse	
___ Other (specify): _____	

22. List all real estate owned by street address, indicating ownership and approximate value:

Street address	Value	H/W/Joint
_____	_____	_____
_____	_____	_____

24. List all present bank, savings, money market, and credit union accounts.

Bank	Acct. No.	Balance	H/W/Joint
_____	_____	_____	_____
_____	_____	_____	_____

25. List all present stocks and bonds:

\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

26. Life Insurance: List company, face value, cash surrender value, policy number, amount of premium and beneficiary. Also indicate where the policies are located and if any loans are on the policies:

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_
- D. \_\_\_\_\_
- E. \_\_\_\_\_

27. Health Insurance: List company, policy number, amount of premium and who is covered:

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_
- D. \_\_\_\_\_
- E. \_\_\_\_\_

28. Miscellaneous Property: (patents, trademarks, copyrights, royalties, employee benefits, etc.):

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_
- D. \_\_\_\_\_
- E. \_\_\_\_\_

29. Personal Effects: List automobiles, principal driver, in whose name the vehicle is titled, present value and balance owned; List any antiques, jewelry, art furs, or any other tangible personal property:

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_
- D. \_\_\_\_\_
- E. \_\_\_\_\_
- F. \_\_\_\_\_
- G. \_\_\_\_\_
- H. \_\_\_\_\_

30. Liabilities: List any notes to banks, loans from companies and others, including mortgages:

<u>Notes of Banks, Loans &amp; Others</u>	<u>Who Signed</u>	<u>Amount Owed</u>	<u>Monthly Payments</u>

31. If applicable, have you and your spouse decided how you will divide any property the both of you have acquired during the marriage, personal or real?

\_\_\_\_ yes      \_\_\_\_ no

32. If applicable, have you and your spouse decided how you will divide any liabilities that the both of you may have incurred during the marriage, regardless of who acquired the debt?

\_\_\_\_ yes      \_\_\_\_ no

33. Describe any special contributions you feel you have made to your spouse's career, education, or assets. \_\_\_\_\_  
\_\_\_\_\_

34. Were you referred to our office by someone? \_\_\_\_\_. If so, please indicate the name of the referring party. \_\_\_\_\_  
\_\_\_\_\_

35. Fill out the attached financial affidavit, using your current financial situation. This will be used at your temporary support hearing.

36. Identify any matters you believe require emergency or immediate attention.  
\_\_\_\_\_  
\_\_\_\_\_

I represent that the foregoing information is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature  
Date: \_\_\_\_\_



# DOCUMENTS REQUIRED TO BE PRODUCED AUTOMATICALLY

---

Pursuant to Rule 12.285 of the *Florida Family Law Rules of Procedure*, effective March 1, 1998, there is mandatory/automatic disclosure of documents and information for dissolution of marriage proceedings, and other family law matters.

Such mandatory/automatic disclosure must be completed within 45 days of service of the initial pleading (i.e., the Petition for Dissolution of Marriage) on the respondent unless temporary relief is sought (e.g. request for temporary child support, temporary alimony or temporary attorney's fees). In the event of an order for temporary relief, the time within which to make required disclosure is reduced. The party requesting the relief must serve the required documents on the other party with the notice of the temporary relief hearing. The responding party then must serve the required documents within two (2) business days before the temporary relief hearing date if served by personal delivery (or 7 days before if served by mail) with the caveat that the responding party shall have no less than 12 days within which to serve the required documents (unless otherwise ordered by the court). Although the disclosure required for temporary relief is limited at that time, the remainder of the listed items must nevertheless be produced within the 45 days.

This is by rule of the Florida Supreme Court and there can be no exceptions. Our Judge may impose sanctions (including monetary fines and jail) on you and us if we do not comply.

Pursuant to Rule 12.285, the documents, information, etc., which **MUST** be automatically produced are as follows:

1. A financial affidavit [to be prepared by our office using information provided by you as requested in our form being provided to you simultaneously herewith]. The financial affidavit will be in substantial conformity with Family Law Form 12.901(e), which requirement **cannot** be waived by the parties.
2. All federal and state income tax returns, gift tax returns, and intangible personal property tax returns filed by your (and/or your spouse if you have them) or on your behalf for the past three (3) years;
3. Your W-2 form(s), 1099, and any K-1 forms you may have if your tax returns for the last three years has not been prepared;
4. Your pay stubs or other evidence of you earned income for the past three (3)

months;

5. A list of any and all income you have received in the last three (3) months (including the source of the income) from any source, other than your pay stubs you have already provided pursuant to number four (4).

6. All of your loan applications and financial statements for the last three (3) years (i.e. car loan applications, mortgage applications, financial statements provided for business or personal loans, etc).

7. Corporate, partnership and trust tax returns for the last three tax years, if you have an interested in a corporation, partnership or trust greater than or equal to 30%.

8. Complete answers to the interrogatories (written questions) we will provide you with;

9. All documents showing reimbursed expenses and in-kind payments that reduce your personal living expenses that were received by or made available to you for the last three (3) years;

10. All deeds, mortgages, promissory notes and closing statements pertaining to real estate in which you own or owned and interest within the last three (3) years, whether held in your name individually, in your name jointly with any other person, in your name as trustee or guardian or any other person, or in someone else's name on your behalf;

11. All periodic statements and passbooks from the last three (3) years for all checking accounts, savings accounts, money market funds, certificates of deposit, and credit union accounts (regardless of whether or not the account has been closed), including those held in your name individually, in your name jointly with any other person, in your name as trustee or guardian or any other person, or in someone else's name on your behalf;

12. All brokerage account statements in which you or your spouse held within the last three (3) years or hold an interest including those held in your name individually, in your name jointly with any other person, in your name as trustee or guardian or any other person, or in someone else's name on your behalf;

13. All title certificates, lease agreements, and registration certificates for all motor vehicles, boats, airplanes, and any other vehicle requiring registration that you regularly use, own, or owned in the last three (3) years;

14. The most recent statement for any profit sharing, retirement, or pension plan in which you are a participant or alternate payee and the summary plan description for any retirement, profit sharing, or pension plan in which you are a participant or alternate payee;

15. All documents pertaining to any money owed to you or your spouse;
16. All life insurance policies insuring your life or your spouse's life;
17. Corporate, partnership and trust tax returns for the last three (3) years if you have an ownership or interest in a corporation, partnership, or trust greater than or equal to thirty percent (30%);
18. Periodic statements, amortization schedules, or other records showing your indebtedness as of the date of the filing of the action and for the last three (3) years;
19. All written premarital or marital agreements entered into any time between the parties to this marriage, whether before or during the marriage;
20. All documents and tangible evidence supporting your claim of special equity or non-marital status of an asset or debt for the time period from the date of acquisition of the asset or debt to the date of production or from the date of the marriage, if based on premarital acquisition; and
21. Any court orders directing you or your spouse to pay or receive spousal or child support.

# DRAFT FINANCIAL AFFIDAVIT

Please complete this draft Financial Affidavit to best of your knowledge and ability. The information you provide us on this form will be placed in the Financial Affidavit which you will have to sign under oath attesting to the truthfulness of your answers, filed with the Court and served upon the opposing party.

## EMPLOYMENT AND INCOME

OCCUPATION:  
EMPLOYED BY:  
ADDRESS:  
SOC. SEC. #:  
DATE OF BIRTH:  
PAY PERIOD:  
RATE OF PAY:

If you are employed, but expecting soon to become unemployed or change jobs, describe the change you expect and why and how it will affect your income. If currently unemployed, describe your efforts to find employment, how soon you expect to be employed, and the pay you expect to receive.

N/A

### LAST YEAR'S INCOME

	<u>Yours</u>	<u>Other Party's (if known)</u>
1. Gross earned income last calendar year		\$
2. All other income (same year)	\$	\$
3. Total income taxes paid on above income (incl. Fed., FICA)	\$	\$
4. Net Income	\$	\$

**AVERAGE GROSS MONTHLY INCOME FROM EMPLOYMENT**

Present gross income from employment \_\_\_\_\_

Bonuses, commissions, allowances, overtime, tips and similar payments \_\_\_\_\_

Business income from sources such as self-employment, contracts (gross receipts minus ordinary and necessary expenses required to produce income) \_\_\_\_\_

Disability benefits \_\_\_\_\_

Workers' Compensation \_\_\_\_\_

Unemployment Compensation \_\_\_\_\_

Pension, retirement or annuity payments \_\_\_\_\_

Social Security benefits \_\_\_\_\_

Spousal support received from previous marriage \_\_\_\_\_

Interest and dividends \_\_\_\_\_

Rental income (gross receipts minus ordinary and necessary expenses required to produce income) \_\_\_\_\_

Income from royalties, trust or estates \_\_\_\_\_

Reimbursed expenses and in kind payments to the extent that they reduce personal living expenses \_\_\_\_\_

Gains derived from dealing in property (not including nonrecurring gains) \_\_\_\_\_

Itemize any other income of a recurring nature \_\_\_\_\_

**TOTAL MONTHLY INCOME** \_\_\_\_\_

**LESS MONTHLY DEDUCTIONS:** \_\_\_\_\_

Federal, state and local income taxes (corrected for filing status and actual number of withholding allowances) \_\_\_\_\_

FICA or self-employment tax (annualized) \_\_\_\_\_

Mandatory union dues \_\_\_\_\_

Mandatory retirement	_____
Health insurance payments	_____
Court ordered support payments for the children actually paid	_____
<b>TOTAL DEDUCTIONS</b>	_____
	_____
<b>TOTAL NET INCOME</b>	_____

**AVERAGE MONTHLY EXPENSES**

HOUSEHOLD:	_____
Mtg. or rent payments	_____
Property taxes & insurance	_____
Electricity	_____
Water, garbage & sewer	_____
Telephone	_____
Fuel oil or natural gas	_____
Repairs and maintenance	_____
Lawn and pool care	_____
Pest control	_____
Misc. household	_____
Food and grocery items	_____
Meals outside home	_____
Other:	_____
N/A	_____
AUTOMOBILE:	_____
Gasoline and oil	_____
Repairs	_____

Auto tags and license	_____
Insurance	_____
Other:	_____
Car Payments	_____
CHILDREN' S EXPENSES:	_____
Nursery or babysitting	_____
School tuition	_____
School supplies	_____
Lunch money	_____
Allow ance	_____
Clothing	_____
Medical, dental, prescription	_____
Vitamins	_____
Barber/beauty parlor	_____
Cosmetics/toiletries	_____
Gifts for special holidays	_____
Other expenses:	_____
N/A	_____
INSURANCES:	_____
Health	_____
Life	_____
Other Insurance	_____
N/A	_____
OTHER EXPENSES NOT LISTED ABOVE	_____
Dry cleaning and laundry	_____

Affiant's clothing	_____
Affiants medical, dental prescriptions	_____
Affiant's grooming	_____
Affiant's gifts	_____
Pets:	_____
Grooming	_____
Veterinarian	_____
Membership dues	_____
Professional dues	_____
Social dues	_____
Entertainment	_____
Vacations	_____
Publications	_____
Religious organizations	_____
Charities	_____
Bank charges/credit card fees	_____
Miscellaneous	_____
OTHER EXPENSES	_____
N/A	_____
<b>TOTAL ABOVE EXPENSES</b>	_____

**PAYMENTS TO CREDITORS**

<u>TO WHOM</u>	<u>BALANCE</u> <u>DUE</u>	<u>MONTHLY</u> <u>PAYMENTS</u>
----------------	------------------------------	-----------------------------------

---



**TOTAL MONTHLY PAYMENTS TO CREDITORS**

---

---

**TOTAL MONTHLY EXPENSES:**

---

---

**ASSETS** (OWNERSHIP: IF MARITAL, PUT ONE-HALF OF THE TOTAL VALUE UNDER PETITIONER AND ONE-HALF UNDER RESPONDENT NO MATTER WHOSE NAME THE ITEM IS IN.)

<u>DESCRIPTION</u>	<u>VALUE</u>	<u>PETITIONER</u>	<u>RESPONDENT</u>
--------------------	--------------	-------------------	-------------------

Cash on hand 

---

Cash in banks 

---

Stocks/bonds 

---

Notes 

---

Real estate: 

---

    Home: 

---

Automobiles: 

---

---

Other personal property: 

---

Contents of home 

---

Jewelry 

---

Life ins./cash surrender value 

---

Other assets: 

---

---

---

**TOTAL ASSETS:** 

---

**LIABILITIES**

Creditor

Security

Balance

Husband

Wife

<b>TOTAL</b>				

**NET WORTH**

Total Assets:

Less: Total Liabilities:

(excluding contingent liabilities)\*

**NEW WORTH**


\* If there is a claim for contingent liabilities, it should be set forth in a separate schedule attached.

# **DRAFT FAMILY LAW INTERROGATORIES**

**Please complete this Draft Family Law Interrogatories. While this document is not required to be served upon the other party, they have every right to request that you answer the following questions (and we have the right to ask the opposing party to answer the following questions) and it has been our experience that normally such a request is made. If such a request is made, it is our obligation to furnish the requestor the answers to these questions within 30 days. Accordingly, we would like for you complete this form so that we may have it prepared in anticipation of such a request. The information you provide us on this form will be placed in the Family Law Interrogatories which you will have to sign under oath attesting to the truthfulness of your answer and will be served upon the opposing party.**

PLEASE SUBMIT YOUR ANSWERS DIRECTLY ON THIS FORM.  
IF MORE SPACE IS NEEDED, PLEASE ATTACH YOUR ANSWER ON  
A SEPARATE PIECE OF PAPER AND INDICATE SUCH ACTION  
ON THIS FORM.

1. BACKGROUND INFORMATION:
  - a. State your full legal name and any other name by which you have been known.
  - b. State your present residence and employment or business addresses and telephone numbers.
  - c. State your Social Security number.
  - d. State your birth date.
  - e. List all business, commercial, and professional licenses which you now hold or which you have held in the last 3 years.
  - f. List all of your education after high school, including but not limited to, vocational or specialized training, including the following information:
    - (1) Name and address of each educational institution.
    - (2) Dates of attendance.
    - (3) Degrees or certificates obtained.

2. EMPLOYMENT:

- a. For each place of your employment or self-employment during the last 3 years state the following information:
- (1) Name, address, and telephone number of your employer.
  - (2) Dates of employment.
  - (3) Job title and brief description of job duties.
  - (4) Starting and ending salaries.
  - (5) Name of your direct supervisor.
  - (6) All benefits received, including, for example, health, life, and disability insurance, expense account, use of automobile or automobile expense reimbursement, reimbursement for travel, food, or lodging expenses, payment of dues in any clubs or associations, and pension or profit sharing plans.

If you have been unemployed at any time during the last 3 years, show the dates of unemployment. If you have not been employed at any time in the last 3 years, give the requested information for your last period of employment.

- b. If you have been engaged in or associated with any business, commercial, or professional activity within the last 3 years that was not detailed above, state the following information for each such activity:
- (1) Name, address, and telephone number of each activity.
  - (2) Dates you were connected with such activity.
  - (3) Position title and brief description of activities.
  - (4) Starting and ending salaries.
  - (5) Name of your direct supervisor.
  - (6) All benefits received, including, for example, health, life, and disability insurance, expense account, use of automobile or automobile expense reimbursement, reimbursement for travel, food, or lodging expenses, payment of dues in any clubs or associations, and pension or profit sharing plans.

If you have not been engaged in any such activities at all in the last 3 years, give the requested information for your last period of such activities.

3. INCOME:

- a. For each of the last 3 years, state the following information:
  - (1) Each source of your income.
  - (2) The amount of income you received from each source, including earned, passive, and investment income and capital gains.
- b. For each of your present employment, self-employment, business, commercial, or professional activities, state the following information:
  - (1) How often and on what days you are paid.
  - (2) An itemization of your gross salary, wages, and income, and all deductions from that gross salary, wages, and income.
  - (3) Any additional compensation or expense reimbursement, including, but not limited to, overtime, bonuses, profit sharing, insurance, expense account, automobile or automobile allowance that you have received or anticipate receiving.

(For the purpose of these questions, the definition of income shall be that as contained in section 61.30, Florida Statutes.)

4. ASSETS:

- a. State the street address and legal description of all real property that you own, use, or hold under a deed, lease, or contract. For each property, state the following information:
  - (1) The percentage and type interest you hold.
  - (2) The names and addresses of any other persons or entities holding any interest.
  - (3) The date of your acquisition of your interest.
  - (4) The purchase price, the cost of any improvements made since it was purchased, and the amount of any depreciation taken.
  - (5) The present market value.

- (6) The market value on the date of your separation from your spouse.
  - (7) The market value on the date of the filing of the petition for dissolution of marriage.
- b. List all of the items of tangible personal property, that are owned by you or in which you have had any interest during the last 3 years, including but not limited to, motor vehicles, tools, furniture, boats, jewelry, art objects or other collections, and collectibles. For each item, state the following information:
- (1) The percentage and type interest you hold.
  - (2) The names and addresses of any other persons or entities holding any interest.
  - (3) The date of your acquisition of your interest.
  - (4) The purchase price.
  - (5) The present market value.
  - (6) The market value on the date of your separation from your spouse.
  - (7) The market value on the date of the filing of the petition for dissolution of marriage.
- c. Other than the financial accounts listed in the answer to interrogatory 5 below, list all of the items of intangible personal property that are owned by you or in which you have had any ownership interest within the last 3 years, including but not limited to, partnership and business interests, (including good will), stocks, bonds, receivables, choses in action, and debts owed to you by another entity or person. For each item state the following information:
- (1) The percentage and type interest you hold.
  - (2) The names and addresses of any other persons or entities holding any interest, and the names and addresses of the persons and entities who are indebted to you or against whom you are claiming a chose in action.
  - (3) The date of your acquisition of your interest.
  - (4) The purchase price.

- (5) The present market value or the amounts you claim are owed as receivables, chooses in action, or debts.
  - (6) The market value or the amounts you claim are owed as receivables, chooses in action, or debts, on the date of your separation from your spouse.
  - (7) The market value, or the amounts you claim are owed as receivables, chooses in action, or debts, on the date of the filing of the petition for dissolution of marriage.
- d. List all policies of insurance that you hold, own, or in which you have any interest. If the owner of any policy is anyone other than yourself, state the name and address of such person or entity. For each policy, state the following information:
- (1) The name of the insurance carrier and the name, address, and telephone number of the agent.
  - (2) The policy number.
  - (3) The type of insurance.
  - (4) The face value of any life insurance or annuity policy.
  - (5) The date the policy was acquired.
  - (6) The beneficiary.
  - (7) The cash surrender value.
  - (8) The loan value.
  - (9) The amount and nature of any loans outstanding against the policy.
- e. If you are the beneficiary of any estate, trust, insurance policy, or annuity state the following information for each one:
- (1) Identification of the estate, trust, insurance policy, or annuity.
  - (2) The nature and amount of the benefit.
  - (3) The value of the benefit.
  - (4) Whether the benefit is vested or contingent.

- f. If you have established any trusts, state the following information:
- (1) The date the trust was established.
  - (2) The names and addresses of the trustees.
  - (3) The names and addresses of the beneficiaries.
  - (4) The names and addresses of the persons or entities who possess the trust documents.
  - (5) Each asset that is held in each trust, with its present fair market value.
- g. Other than the financial accounts listed in your answer to interrogatory 5 below, list all other assets that you own, in which you have any interest, or of which you have the use and benefit that has not already been listed. For each asset, state the following:
- (1) The name of the asset.
  - (2) The date you acquired the asset or the date you first obtained the use or benefit of it.
  - (3) The name and address of the person or entity from whom the asset was acquired or who allows you the use and benefit of it.
  - (4) The fair market value on the date you acquired the asset or the use or benefit of it.
  - (5) The fair market value on the date of your separation from your spouse.
  - (6) The fair market value on the date of the filing of the petition for dissolution of marriage.
  - (7) The present fair market value.

5. FINANCIAL ACCOUNTS:

- a. Are you an owner, participant, or alternate payee in any pension, profit sharing, deferred compensation, or retirement plan? If so, please state the following:
- (1) The precise legal name of the plan, and the name and address of the plan administrator or trustee.



- (2) A description of the type of plan, whether profit sharing, defined benefit, defined contribution, IRA, Keogh, or other.
  - (3) The account balance of any money held for your benefit or to which you are entitled, and your accrued monthly benefit.
  - (4) The location and last valuation date of said asset, the amount currently vested, and the schedule of vesting.
  - (5) An itemization of any loans that you have made against the plan during the last 5 years, the outstanding balance of the loans, and the amounts of the loans.
- b. List all accounts, including checking, money market, brokerage, or any other investments that you have had any legal or equitable interest in, regardless of whether the interest is or was held in your own name individually, in your name with another person, or in any other name, within the last 3 years. Give the name and address of each institution, the name in which each account is or was maintained, the account numbers, and the names of each person authorized to make withdrawals from the accounts. State the present balance in each account, giving the largest balance during the last 12 months.
- c. State whether, during the past 3 years, you have prepared any financial statements, loan applications, or lists of your assets and liabilities. If so, for each document state: the date of preparation; the purpose for which the document was prepared; the name and address of the person or firm who prepared the document; and the names and addresses of any persons or financial institutions to whom the statements, applications, or lists were presented.

- d. State the names, addresses, and telephone numbers of your accountant and any other persons who possess your financial records, and as to each state which records they possess.
- e. State the location of all safes, vaults, or other similar depositories in which you maintained property at any time during the period commencing 1 year before the initiation of the action pending before this court until the date of furnishing answers to this interrogatory. State the names and addresses of all banks or other depositories where you had a safe deposit box; where you were a signatory or co-signatory on a safe deposit box; where you have access to a safe deposit box; or where you maintained property in a safe deposit box at any time during the period commencing 1 year before the initiation of the action before this court until the date of your answering this interrogatory. Provide the name and address of each other person who has had access to any such depository during the same time period. List any items removed from any depository by you or your agent during that time, together with the present location and fair market value of each item.

6. LIABILITIES:

- a. List all of your liabilities, debts, and other obligations, indicating for each: the name and address of the creditor; the nature of the security, if any; the payment schedule; the current status of your payments; and the total amount of arrearage, if any.
- b. List all charge accounts and credit cards upon which you are a signatory, which you use, or which are issued to you. For each account listed give the account number, the current status of your payments, the balance presently owed, and the minimum monthly payments.

7. MISCELLANEOUS:

- a. List all other assets that you own, have an interest in, or have the use or benefit of, setting forth for each your interest in the asset and its value. For each, set forth the date of your acquisition, receipt, or inheritance, or the date of your first being given use or benefit; the party from whom it was received; the value on the date of your acquisition or use; the value on the date of marriage; the value on the date of the filing of the petition for dissolution of marriage; and the present value.

- b. If you are claiming a special equity in any assets, list the asset, the amount claimed as special equity, and all facts upon which you rely in your claim.
  
- c. If the mental or physical condition of a spouse or child is an issue, identify the person and state the name and address of all health care providers involved in the treatment of that person.

## **MANDATORY DISCLOSURE DUTY TO SUPPLEMENT**

\_\_\_\_\_ Pursuant to the Family Law Rules as stated by the Supreme Court of Florida, **YOU HAVE A CONTINUING DUTY TO SUPPLEMENT (UPDATE) THE DOCUMENTS PRODUCED, WHENEVER A MATERIAL CHANGE IN YOUR FINANCIAL STATUS OCCURS.**

This means you **MUST** provide us with any new documents you receive showing a material change in your finances. Copies of these documents **MUST** be produced to our office as soon as you receive them. If you have **ANY QUESTIONS** as to what constitutes a material change, call us immediately. Again, our Judge may impose sanctions (including monetary fines and jail) on you and us if we do not comply on a timely basis.

## ACKNOWLEDGMENT FROM CLIENT

This will acknowledge that I have received the document from the offices of MOYER, STRAUS & PATEL, P.A. entitled "DOCUMENTS REQUIRED TO BE PRODUCED AUTOMATICALLY", together with a form of Family Law Financial Affidavit and Standard Family Law Interrogatories. I have discuss same with this law firm and I understand my obligations to produce the required documents and information, to complete the Financial Affidavit and most probably, to answer all of the Standard Family Law Interrogatories.

I further understand that it is my obligation, under the *Florida Family Law Rules of Procedure*, that I have continuing duty to supplement the documents whenever a material change in my financial status occurs. I am further under a duty to mend prior responses or disclosures if I obtain information or otherwise determine that the prior response or disclosure was incorrect when made or if I obtain information or otherwise determine that the prior response or disclosure, although correct when made, is no longer materially true or complete.

Pursuant to Rule 12.285, *Fla. Fam. L.R.P.*, sanctions may be imposed for my failure to comply with the automatic disclosure requirements. Such sanctions may be imposed against myself and/or my attorney. I hereby agree to indemnify and hold law firm of Moyer, Straus and Patel, P.A. and its attorneys harmless for any sanctions assessed against it for my failure to comply with the automatic disclosure rules and my obligation to supplement when a material change in my financial status occurs during any litigation in which they are representing me.

DATED this \_\_\_\_\_ day \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
CLIENT SIGNATURE

Print Name:\_\_\_\_\_