

# Beaufort/Jasper Community Conflict Resolution Center

2015 Boundary Street  
Suite 300  
Beaufort, South Carolina 29920  
BJCCRC.org

**Instructions: Please provide all of the following information to the best of your ability, even though it may duplicate what the other party may provide.**

*Please use ink to fill out this questionnaire.*

Today's Date \_\_\_\_\_

1. Your Full Name: \_\_\_\_\_ (Maiden Name) \_\_\_\_\_  
Birth date: \_\_\_\_\_ Place of birth \_\_\_\_\_  
Street address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
County \_\_\_\_\_ Zipcode \_\_\_\_\_  
Home phone \_\_\_/\_\_\_/\_\_\_\_ Work phone \_\_\_/\_\_\_/\_\_\_\_ Cell phone \_\_\_/\_\_\_/\_\_\_\_  
Place of employment \_\_\_\_\_ Work phone \_\_\_/\_\_\_/\_\_\_\_  
Employment address \_\_\_\_\_  
Continuous Residence in this state since: \_\_\_\_\_ Social Security Number \_\_\_/\_\_\_/\_\_\_\_  
Confidential Email address \_\_\_\_\_

2. Marriage Date: \_\_\_\_\_ Place \_\_\_\_\_  
Date of Separation \_\_\_\_\_

### 3. CHILDREN:

Full Name ( First, Middle, Last):	Birth Date:	Age:	Presently Living With:
_____	_____	___	_____
_____	_____	___	_____
_____	_____	___	_____
_____	_____	___	_____

4. Are you and the other party living together at the present time? \_\_\_Yes \_\_\_No

Are you currently paying support for these children? \_\_\_Yes \_\_\_No

Are you currently paying alimony or support for your current spouse? \_\_\_Yes \_\_\_No

(For Women) Are you pregnant? \_\_\_Yes \_\_\_No

5. Are you employed Full Time? \_\_\_Yes \_\_\_No Part Time \_\_\_Yes \_\_\_No Unemployed at present \_\_\_Yes \_\_\_No

If employed either full or part time, what is your position

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Continuous employment since: \_\_\_\_\_

Do you foresee any changes in your present employment within the next two years? \_\_\_Yes \_\_\_No

If (yes) how will it affect your earning capacity?

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6. List all prior marriages. ( Include name or prior spouse, and when and where marriage was terminated):

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7. List names and ages of any children from prior marriages and state with whom such children live.

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Are you currently paying support for these4 children? \_\_\_Yes \_\_\_No

Are you currently paying alimony or support to your former spouse? \_\_\_Yes \_\_\_No

Other than your children and/or your spouse

are there any other persons living with you now? \_\_\_Yes \_\_\_No

If yes, List their names and relationship with you \_\_\_\_\_

8. Do you have an interest in reconciliation? \_\_\_Yes \_\_\_No

As far as you know, does your spouse have an interest in reconciliation? \_\_\_Yes \_\_\_No

9. Is there a dispute involving the children? \_\_\_Yes \_\_\_No

10. Have you tried marriage and/or family counseling? \_\_\_Yes \_\_\_No

If yes, with whom?

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11. Are you presently in therapy or counseling \_\_\_Yes \_\_\_No

If yes, with whom?

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12. Do you presently have an attorney representing you \_\_\_Yes \_\_\_No

If yes, Name of law firm \_\_\_\_\_

Name of Attorney representing you : \_\_\_\_\_

Attorney's address :

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Attorney's phone number \_\_\_\_\_

13. Are there joint bank accounts to which your spouse has access? \_\_\_Yes \_\_\_No

14. Does your spouse have credit cards for which you are responsible? \_\_\_Yes \_\_\_No

If yes, specify \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15. Marital residence: Private home \_\_\_ Condominium \_\_\_ Apartment \_\_\_

Occupied by: Husband \_\_\_ Wife \_\_\_

Owned free and clear \_\_\_ Mortgage \_\_\_ Lease \_\_\_ Rent \_\_\_ Other \_\_\_\_\_

16. Who referred you to Mediation? \_\_\_\_\_

17. Do you have any objection to our acknowledging this referral? \_\_\_Yes \_\_\_No

18. Date you completed this form \_\_\_/\_\_\_/20\_\_\_

**ASSETS AND LIABILITIES:** Please list the value of each of the following items of property. If you are unable to obtain the exact present value, estimate what you think the value may be. If any item is located in a state other than that in which you live, indicate where such item is located, and if necessary, give details on a separate sheet. Please indicate items acquired by gift, inheritance, or prior to marriage by marking with a star (\*). Be sure to list the names and account numbers of all of the items, and the legal descriptions of real estate. This information is important in identifying the items, and is necessary for inclusion in your final agreement settlement.

**LIST APPROPRIATE INFORMATION AS COMPLETELY AS POSSIBLE**

**ASSETS:**

**A. BANK ACCOUNTS:**

Bank Name:	Account #:	Checking/Savings	Balance:	Owner:
_____	_____	_____	_____	
_____				
_____	_____	_____	_____	
_____				
_____	_____	_____	_____	
_____				
_____	_____	_____	_____	
_____				
_____	_____	_____	_____	
_____				

B. ACCOUNTS RECEIVABLE, NOTES, LOANS MADE TO OTHERS, ETC:

Due from:	Monthly payment	Balance	Owner
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

C. STOCKS, BONDS, LIQUID INVESTMENTS:

(list company, # of shares, price per share today, and the total value of stock, and owner of investment)

List on separate sheet excess investment holdings not able to list below)

Company name	Number of shares	Value/ share	Total	Owner
_____	_____	_____	_____	
_____				
_____	_____	_____	_____	
_____				
_____	_____	_____	_____	
_____				

D. REAL ESTATE:

**Marital Residence:**

Address: \_\_\_\_\_

Legal description: \_\_\_\_\_  
\_\_\_\_\_

Date of purchase \_\_\_\_\_

Purchase price \_\_\_\_\_

Monthly payment excluding property taxes and homeowners insurance \_\_\_\_\_

Real estate taxes per year \_\_\_\_\_

Homeowners' insurance premiums per year \_\_\_\_\_

Mortgage company that presently holds note \_\_\_\_\_

Mortgage company account number \_\_\_\_\_

Amount Owed since last payment \_\_\_\_\_

Estimated value \_\_\_\_\_

Second mortgage or loans secured by real estate Note holder \_\_\_\_\_

Account number \_\_\_\_\_ Monthly payment \_\_\_\_\_ Balance \_\_\_\_\_

Balance due by \_\_\_\_\_

Special information not list here

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**Other Real Estate:**

Address: \_\_\_\_\_

Legal description: \_\_\_\_\_  
\_\_\_\_\_

Date of purchase: \_\_\_\_\_

Purchase price \_\_\_\_\_

Monthly payment excluding real estate taxes and homeowners insurance \_\_\_\_\_

Real estate taxes per year \_\_\_\_\_

Real estate insurance premium per year \_\_\_\_\_

Mortgage company that presently holds note \_\_\_\_\_

Mortgage company account number \_\_\_\_\_

Amount Owed since last payment \_\_\_\_\_

Estimate value \_\_\_\_\_

Second mortgage or loans secured by real estate Note holder \_\_\_\_\_

Account number \_\_\_\_\_ Monthly payment \_\_\_\_\_ Balance \_\_\_\_\_

Balance due by \_\_\_\_\_

Special information not listed here \_\_\_\_\_

**Other Real Estate:**

Address: \_\_\_\_\_

Legal description: \_\_\_\_\_  
\_\_\_\_\_

Date of purchase: \_\_\_\_\_

Purchase price \_\_\_\_\_

Monthly payment excluding real estate taxes and homeowners insurance \_\_\_\_\_

Real estate taxes per year \_\_\_\_\_

Real estate insurance premium per year \_\_\_\_\_

Mortgage company that presently holds note \_\_\_\_\_

Mortgage company account number \_\_\_\_\_

Amount Owed since last payment \_\_\_\_\_

Estimate value \_\_\_\_\_

Second mortgage or loans secured by real estate Note holder \_\_\_\_\_

Account number \_\_\_\_\_ Monthly payment \_\_\_\_\_ Balance \_\_\_\_\_

Balance due by \_\_\_\_\_

Special information not listed here \_\_\_\_\_

**Other Real Estate:**

Address: \_\_\_\_\_

Legal description: \_\_\_\_\_  
\_\_\_\_\_

Date of purchase: \_\_\_\_\_

Purchase price \_\_\_\_\_

Monthly payment excluding real estate taxes and homeowners insurance \_\_\_\_\_

Real estate taxes per year \_\_\_\_\_

Real estate insurance premium per year \_\_\_\_\_

Mortgage company that presently holds note \_\_\_\_\_

Mortgage company account number \_\_\_\_\_

Amount Owed since last payment \_\_\_\_\_

Estimate value \_\_\_\_\_

Second mortgage or loans secured by real estate Note holder \_\_\_\_\_

Account number \_\_\_\_\_ Monthly payment \_\_\_\_\_ Balance \_\_\_\_\_

Balance due by \_\_\_\_\_

Special information not listed here \_\_\_\_\_

(Any additional real estate please list on separate sheet following above format)

E. LIFE INSURANCE

Company	Account#	Face value	Cash value	Insured/Beneficiary
_____	_____	_____	_____	
_____				
_____	_____	_____	_____	
_____				
_____	_____	_____	_____	
_____				
_____	_____	_____	_____	
_____				

F. BUSINESS INTERESTS:

Please furnish last balance sheet, P&L statement, tax return, buy-sell agreement, etc.

Name of Business \_\_\_\_\_ Location of business \_\_\_\_\_  
Owned since \_\_\_\_\_ Percent of ownership \_\_\_\_\_  
Last date appraised \_\_\_\_\_ Last appraised value \_\_\_\_\_  
Last appraised by \_\_\_\_\_ Number of employees \_\_\_\_\_

G. MISCELLANEOUS PROPERTY

(Patents, trademarks, copyrights, royalties, etc. – Please furnish last statement and description booklet)

Description	Value	Monthly income	Owner
_____	_____	_____	
_____	_____	_____	_____
_____	_____	_____	_____

H. AUTOMOBILES AND OTHER VEHICLES: (including boats (motorized and other), RV's, water sport vehicles, ATV's, airplanes, racing vehicles of all types, vintage automobiles, motorcycles of all types, etc.

Vehicle make and year \_\_\_\_\_ NADA Value \_\_\_\_\_  
Loan with \_\_\_\_\_  
Monthly payment \_\_\_\_\_ Account number \_\_\_\_\_  
Balance due \_\_\_\_\_ Insurance premiums yearly \_\_\_\_\_

Vehicle make and year \_\_\_\_\_ NADA Value \_\_\_\_\_  
Loan with \_\_\_\_\_

Monthly payment \_\_\_\_\_ Account number \_\_\_\_\_

Balance due \_\_\_\_\_ Insurance premiums yearly \_\_\_\_\_

Vehicle make and year \_\_\_\_\_ NADA Value \_\_\_\_\_

Loan with \_\_\_\_\_

Monthly payment \_\_\_\_\_ Account number \_\_\_\_\_

Balance due \_\_\_\_\_ Insurance premiums yearly \_\_\_\_\_

Vehicle make and year \_\_\_\_\_ NADA Value \_\_\_\_\_

Loan with \_\_\_\_\_

Monthly payment \_\_\_\_\_ Account number \_\_\_\_\_

Balance due \_\_\_\_\_ Insurance premiums yearly \_\_\_\_\_

I. PENSION, PROFIT SHARING, IRA'S, 401k PLANS, KEOGH PLAN, OR OTHER RETIREMENT PLANS

Plan Name	Account #	Present value	Owner
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

J. PERSONAL PROPERTY, FURNISHINGS, ETC

(Attach lists stating items which were purchased jointly during the marriage that you wish to retain. Specify items that were purchased prior to the marriage that you wish to retain also inherited items that you consider your property).

Items could include: Jewelry, Furs, Horses and tack, other livestock, farm and lawn/landscape equipment, antiques, coins, stamps, silver and gold or other precious metals, art, collections, furniture, heirlooms, plants, pets, computer and electronic equipment, or other items of value.

K. INCOME TAX REFUNDS/ AMOUNTS DUE:

		Refund Due	Amount Owed
State _____	Year _____	_____	_____
Federal _____	Year _____	_____	_____



Special information \_\_\_\_\_  
\_\_\_\_\_

L. LIABILITIES: (Attach lists if necessary)

Personal loans owed to: (state joint) applicable)	Account #	Monthly payment	Balance due	Party Liabile if
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	

Credit cards and store cards joint	Account #	monthly payment	Balance due	Party liable (state if applicable)
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	

List separately addition credit card obligations if necessary

M. OTHER DEBTS, MEDICAL, DENTAL, STUDENT LOANS, CHILD SUPPORT FROM PREVIOUS MARRIAGE OTHER UNSECURED LOANS OR CREDIT, PERSONAL BANK LOANS, LIENS AND JUDGMENTS

Unsecured Debt applicable)	Monthly obligation	Balance	Responsible Party (state joint if applicable)
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_____	_____	_____	
_____			
_____	_____	_____	
_____			
_____	_____	_____	
_____			

The above statement and attached information is in your opinion is your best estimate of your present assets and liabilities as of this date. You will be asked prior to your final agreement to sign a verified (notorized) statement as to the true reflection of these accounts and statements.