

PRIMARY PARTY QUESTIONNAIRE

Party Type:

Demographics/Social History

Prefix:

First Name: *

Middle Name:

Last Name: *

Suffix:

SSN: *

DOB: *

Sex: Male Female

Interpreter Needed? *

Language/Dialect:

Currently Pregnant?* Yes No

If Yes, due date:

Number of Marriages:*

Birth Place

City:

State:

Country:

Education

Education Level:

Years in school:

Degree:

Address Information

Confidential Address: * Yes No

Address:

City, County, State

Zip/Postal Code: *

Have you been a resident of Ohio for 6 months?* Yes No

Have you been a resident of Montgomery County, Ohio for 90 days? Yes No

Contact Information

Email:

Home Phone:

Cell Phone: *

Work Phone:

Current Court Cases

Bankruptcy Case #

Location:

Domestic Violence Case #

Location:

Other Legal Cases:

Aliases or Former Names

Prefix:

First:

Middle:

Last:

Suffix:

Additional Addresses

Physical Description

Race: *

Height:

Weight:

Hair Color:

Eye Color:

Financial Information

Is Primary Party retired? Yes No

Does Primary Party receive public assistance?
 Yes No Pending

Is Primary Party currently enlisted in the
Military? Yes No

Branch:

Duty Station:

Active Duty: Yes No

Reservist: Yes No

Deployed: Yes No

Occupation/Employer

Are you currently employed? Yes No

Employer Name:

Work Position:

Employer Address:

City, County, State:

Zip/Postal Code:

Employer Phone:

Work Hours:

Gross Annual Earnings:

Pension Income:

Marriage Information

Marriage Date: *

Place of Marriage

City:

State:

Country:

Cohabiting at present?* Yes No

Date Separated:*

Who left first?*

Real Estate

Does the Primary Party or the Secondary Party
own any real estate? Yes No

Joint Holdings:

Primary Party Holdings:

Secondary Party Holdings:

Minor or Dependent Child

Child(ren) of Party? Yes No

First Name:

Middle Name:

Last Name: *

DOB: *

Sex: Male Female

Residing with Parent of this marriage?
 Yes No

Child Support paid? Yes No

Child Support received? Yes No