

THOMPSON LAW OFFICE
DIVORCE QUESTIONNAIRE NO CHILDREN

REQUIRED INFORMATION FROM CLIENT:

Full Name: _____

Telephone Number: (_____) _____

Email Address: _____ Best Contact: _____

Social Security Number: _____

Present Home Address: _____

Date of Birth: _____ Age: _____

Place of Birth: _____

Race: _____

Length of Residency in Kentucky more than 180 days? _____

Occupation: _____

Type of Industry: _____

Prior Marriages, how many _____; How terminated _____

Date of Present Marriage: _____

What County: _____ What State: _____

Date of Separation (Month/Year): _____

Is there an Emergency Protective Order in effect? _____

Is there a Domestic Violence Order in effect? _____

Is a Domestic Violence Order requested in this proceeding? _____

Are You or Your Spouse on Active Duty in the Military Service? _____

If you are Wife: Maiden name: _____

Do you wish for maiden name to be restored: _____

REQUIRED INFORMATION FOR SPOUSE:

Does spouse have an attorney? (Circle one) YES NO UNKNOWN

If yes, what is attorney's name and address: _____

Full Name: _____

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Telephone Number: (_____) _____

Social Security Number: _____

Present Home Address: _____

Date of Birth: _____ Age: _____

Place of Birth: _____

Race: _____

Spouse's Length of Residency in Kentucky more than 180 days? _____

Spouse's Occupation: _____

Type of Industry: _____

Spouse's Prior Marriages, how many _____; How terminated _____

If Respondent is Wife: Maiden Name: _____

Does she wish for maiden name to be restored? _____