

William L. Hoge, III
Ext. 101

*Fellow of the
American Academy
of Matrimonial Lawyers*

*Mediator and
Collaborative Law Professional*

Law Offices of
William L. Hoge, III

200 South Seventh Street, Suite 506
Republic Plaza (formerly the Legal Arts Building)
Louisville, Kentucky 40202-2721
Facsimile: 502-583-1223
Mobile: 502-419-6316
Telephone: 502-583-2005

Paralegals:

Lois M. Mauk,
Ext. 104

Carolyn Coburn,
Ext. 106

DivorceInKentucky.com

DIVORCE DATAPACK

Dear Prospective Family Law Client:

If you are considering a divorce, we know this can be a very difficult time for you. We would be happy to talk to you if you need sound legal advice on your Family Law problems. We cannot, however, offer anyone free legal advice.

Your case will require an initial personal consultation so that I can understand the facts of your case and advise you on your rights and duties. I charge \$300 for an initial consultation, during which I expect to give you a really good idea of what you can expect to happen in your divorce.

Before we can begin representing you, the Bar Association and this firm require (1) a signed contract which explains our respective obligations and (2) a legal engagement fee plus initial costs prior to instituting any action except the initial consultation. The size of the engagement fee required will be determined after our initial consultation and will be based on my estimation of the amount of my time needed to resolve your case. My standard rate in most cases is \$300 per hour.

Family Law includes simple divorces, complex divorces, child custody, child support, visitation, and paternity actions as well as post-divorce matters such as changes in custody, visitation, child support, maintenance review, compliance with court agreements or orders.

Though some of the questions or situations may not apply to your situation, your efforts to complete the attached **Divorce DataPack** and provide us with copies of any information or documents pertinent to this matter (including copies of all prior court papers, mortgages, bank statements, mortgages, loan documents, credit card statements, paycheck stubs, etc.) will go a long way to help evaluate your Family Law situation and will help to contain your legal expense.

If we are retained as your attorney, you will be billed for the amount of professional time required to adequately represent your interests in this matter. We would advise you that anything and everything you do to complete the attached questionnaire and to provide any substantiating documentation will help to reduce the amount of attorney and paralegal time required in this action. Please help us help you to contain your legal expense.

Any information you provide will, of course, be kept confidential and you are under no obligation until we each execute a written Engagement Agreement.

Very truly yours,


WILLIAM L. HOGE, III

William Lacy Hoge, III

Attorney at Law
200 South 7th Street
Republic Plaza, Suite 506
Louisville, Kentucky 40202

E-mail: BillHoge@usa.net
Website: www.DivorceInKentucky.com
Fax: (502) 583-1223
Phone: (502) 583-2005

Concentrating in Complex Family Law Representation
Dedicated to providing honest, caring, affordable, quality legal services

Education

University of Louisville
Bachelor of Science Degree (1969)
Juris Doctorate (1972)

Divorce Mediation Training with Zena Zumeta, J.D.
Mediator Certification (2002)

American Academy of Matrimonial Lawyers' Arbitration Training
Arbitrator Certification (2004)

Extensive Continuing Legal Education Awards and Teaching:

- Family Law
- Collaborative Family Law
- Alcohol and Drug Abuse
- Mediation Training
- Arbitration Training
- Domestic Violence
- Ethics
- Psychology
- Trial Technique & Demonstrative Evidence

Organizations

American Academy of Matrimonial Lawyers:
President, Kentucky Chapter (2003-2004)
Continuing Education Chair (1999-2005)

Family Law Solutions, PLLC:
Founding Member

Kentucky Bar Association:
Lawyers Helping Lawyers Committee (1981)
Family Law Section Chair (1997-1998)
Child Protection & Domestic Violence Committee (2000-2003)

Kentucky Collaborative Family Law Network, Inc.:
Founding Member and past President

International Academy of Collaborative Professionals:
Member

International Alliance of Holistic Lawyers:
Member

Louisville Bar Association:

Family Law Section Chair (1999)
Family Law Section Member
ADR Section Member

American Bar Association:

Commission on Lawyer Assistance Programs
Family Law Section Member

Jefferson County Family Court:

Family Support Center Advisory Committee
Family Court Advisory Committee (Divorce Rules Committee Chair)
Family Court Mediator Review Committee

Kentucky Academy of Trial Attorneys:

KATA Member
Family Law Editor for KATA *Advocate*

Special Recognition

Recipient of the LBA's 1999 Judge Richard A. Revell Family Law Practitioner of the Year Award
Kentucky Bar Association Continuing Legal Education Award (annually 1990-2006)
Recipient of AAML's 2007 Raising the Bar Award
Kentucky Super Lawyer 2007

Publications and Public Speaking

Co-author and publisher of
Divorce in Kentucky – The Dissolution Resolution System, an Interactive Organizer and Video, 1997
Numerous Continuing Legal Education and motivational speaking engagements including ABA, AAML, KBA and LBA
Author, UK/CLE, *Kentucky Domestic Relations Practice*, 1st Ed., Chapter 14 (2006)

Legal Experience

Assistant Jefferson County Attorney (1972-1976)
Chief Prosecutor for Jefferson County Attorney (1976-1982)
General Counsel to International Union of Electrical Workers, Local 761 at General Electric (1975-1988)
General Counsel to Kentucky State District Council of Carpenters, AFL-CIO (UBCJA) (1988-1991)
General Private Legal Practice (1972 to Present)

Admitted and Practiced before:

Kentucky Supreme Court	1972	U.S. District Court, Eastern District of Ky.	1975
Sixth Circuit Court of Appeals	1974	U.S. Supreme Court	1975
U.S. District Court, Western District of Ky.	1973		

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DIVORCE DATAPACK

Please Print

Today's Date: _____

YOUR FULL LEGAL NAME:

(First Name) (Middle Name) (Last Name) (Jr., Sr., etc.)

PRESENT ADDRESS:

(Street Address or P. O. Box)

(City) (County) (State) (Zip)

TELEPHONE:

Home -- _____ Work -- _____

Mobile Phone -- _____

E-MAIL ADDRESS:

How do you prefer we contact you?

Mobile Phone Home Phone Work Phone
 Email Other: _____

*THE SPACE BELOW IS FOR OFFICE USE ONLY
Please complete the remaining pages of this form*

Date of Initial Interview: _____ Interviewed by: _____

Engagement Agreement signed? _____ Date Signed: _____ Engagement Fee Paid: \$ _____

Initial Documents Required: _____ Draft *Petition for Dissolution of Marriage*
Service by: Sheriff Certified Mail Other: _____

_____ Draft *Response to Petition for Dissolution of Marriage*
_____ Mandatory Case Disclosure or MCD *Acknowledgment*

Initial Motions: _____ Motion for Temporary Restraining Order with Client's Affidavit

_____ Motion for Temporary Custody of Child(ren) with Affidavit

_____ Motion for Temporary Child Support with Affidavit

_____ Motion for Temporary Maintenance

_____ Motion for Hearing (with Client's Affidavit) regarding:

_____ Marital Property _____ Visitation _____ Attorney Fees

Other: _____

Discovery: _____ Interrogatories _____ Request for Admissions

_____ Request for Production of Documents

_____ Notice of Deposition of _____

Scheduled Execution

BY VIDEO OR COURT REPORTER?

Date: _____

Other: _____

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How did you learn about us?

- Referral from:
- Our website at www.DivorceInKentucky.com
- Other:

PERSONAL INFORMATION ON YOU

YOUR AGE ON LAST BIRTHDAY: _____

MAIDEN NAME (if Wife): _____

YOUR DATE OF BIRTH: _____ RACE*: _____
* Required for State's Vital Statistics Form

SOCIAL SECURITY NUMBER: _____ - _____ - _____

YOUR PLACE OF BIRTH: _____

YOUR OCCUPATION: _____

YOUR EMPLOYER: _____

YOUR W-2/1099/K-1 WAGES: As reported on your most recent tax return -- \$ _____

NATURE OF INDUSTRY: _____

RESIDENT OF KENTUCKY SINCE: _____

How long at current address? _____

PREVIOUS ADDRESS: _____

How long at that address? _____

NUMBER OF TIMES MARRIED: _____

YOUR HIGHEST LEVEL OF EDUCATION: High School GED Vocational School
 College Graduate Post-Graduate School
 Other: _____

PERSONAL INFORMATION ON YOUR SPOUSE

SPOUSE'S FULL LEGAL NAME: _____
{First Name} {Middle Name} {Last Name} {Jr., Sr., etc.}

MAIDEN NAME (if spouse is Wife): _____

SPOUSE'S PRESENT AGE: _____

SPOUSE'S DATE OF BIRTH: _____ RACE*: _____
* Required for State's Vital Statistics Form

PLACE OF BIRTH: _____

SPOUSE'S SOCIAL SECURITY NUMBER: _____

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SPOUSE'S TELEPHONE NUMBER: _____

SPOUSE'S PRESENT ADDRESS: _____

How long at current address? _____

PREVIOUS ADDRESS: _____

How long at that address? _____

SPOUSE'S OCCUPATION: _____

NATURE OF INDUSTRY: _____

SPOUSE'S EMPLOYER: _____

SPOUSE'S EMPLOYER'S ADDRESS: _____

YOUR SPOUSE'S W-2/1099/K-1 WAGES: As reported on your most recent tax return -- \$ _____

RESIDENT OF KENTUCKY SINCE: _____

NUMBER OF TIMES MARRIED: _____

SPOUSE'S HIGHEST LEVEL OF EDUCATION: High School GED Vocational School
 College Graduate Post-Graduate School
 Other: _____

YOUR MARRIAGE

DATE OF MARRIAGE: _____

WHERE WERE YOU MARRIED? _____
{City} {County} {State}

ARE YOU TWO STILL LIVING AT THE SAME ADDRESS? Yes No

ARE YOU TWO STILL SLEEPING IN THE SAME ROOM? Yes No

ARE YOU TWO STILL "LIVING TOGETHER AS MAN AND WIFE"? Yes No

DATE OF LAST SEXUAL RELATIONS WITH YOUR SPOUSE: _____

Note: The legal definition of the word "separation" refers to the date that one party left the marital home and took up residence elsewhere. A "separation" can include married parties living in the same house, so long as they are not engaging in sexual intercourse with each other. **The resumption of sexual relations between married parties during divorce proceedings can require them to recommence the 60-day waiting period generally required before official dissolution of a marriage.** [KRS 403.170(1): No decree shall be entered until the parties have lived apart for 60 days. Living apart shall include living under the same roof without sexual cohabitation.]

DATE OF SEPARATION: _____

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CIRCUMSTANCES OF SEPARATION: _____

Please describe why you feel this marriage is "irretrievably broken".

- Does the Wife want her maiden name restored? Yes No Unknown
- Are you and your spouse both U.S. Citizens? Yes No
- Do either of you have valid passports? Husband has passport Wife has passport
- Do either of you have **MySpace, Facebook, Louisville Mojo, Twitter** or other social networking accounts?
 Yes No Unknown
- If yes, do you know the password for your spouse's account(s)? Yes No N/A
- If yes, does your spouse know the password for your account(s)? Yes No N/A

We strongly urge you to change the password on all your accounts, including email, social networking sites, etc. We also highly recommend you remove from any websites or social networking accounts any postings, photographs, etc. which might be used against you in any manner (pictures of you partying or drinking, for instance). We can almost guarantee that such electronic evidence will be used against you if this matter becomes contested. Better to take it down now than to have it come up at trial a few months from now!

DOMESTIC VIOLENCE

The National Domestic Violence Hotline (www.ndvh.org) defines domestic violence as "a pattern of behavior in any relationship that is used to gain or maintain power and control over an intimate partner." According to the Kentucky Domestic Violence Association (www.kdva.org), domestic violence is "a pattern of coercive behaviors that one person exercises over another."

Regardless of the definition, if you are in an abusive relationship or situation, you must seek out the resources you need to protect yourself and your children from abuse.

You may be in a **physically abusive** relationship if your partner has ever damaged property when angry (thrown objects, punched walls, kicked doors, etc.); pushed, slapped, bitten, kicked or choked you; abandoned you in a dangerous or unfamiliar place; scared you by driving recklessly; used a weapon to threaten or hurt you; forced you to leave your home; trapped you in your home or kept you from leaving; prevented you from calling police or seeking medical attention; hurt your children or used physical force in sexual situations.

You may be in a **sexually abusive** relationship if your partner views women as objects and believes in rigid gender roles; accuses you of cheating or is often jealous of your outside relationships; wants you to dress in a sexual way; insults you in sexual ways or calls you sexual names; has ever forced or manipulated you into to having sex or performing sexual acts; held you down during sex; demanded sex when you were sick, tired or after beating you; hurt you with weapons or objects during sex; involved other people in sexual activities with you or ignored your feelings regarding sex.

You may be in an **emotionally abusive** relationship if your partner calls you names, insults you or continually criticizes you; does not trust you and acts jealous or possessive; tries to isolate you from family or friends; monitors where you go, who you call and who you spend time with; does not want you to work;

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controls finances or refuses to share money; punishes you by withholding affection; expects you to ask permission; threatens to hurt you, the children, your family or your pets or humiliates you in any way.

Have there ever been any episodes of domestic violence or abusive behavior between the two of you prior to or during this marriage?

Yes No

If yes, please explain: _____

Are any DVOs currently in effect? _____

Do you know how to take out an EPO if you need to protect yourself or your children?

Yes No. If "No", ask us or see the **Domestic Violence** section of our website.

CHILDREN OF THE MARRIAGE

Number of children (regardless of age) born of this marriage: 0 1 2 3 4 5 __

Is there any possibility the Wife is currently pregnant? _____

Religious preferences of the parties as to the raising of the children: _____

Is there any risk or potential that your spouse might take the children somewhere against your wishes or without your consent? ("**Parental abduction**" either domestically [within the United States] or internationally?)

Yes No Don't know Never thought of that

If yes, where do you think he/she would take the children? _____

If yes, how great a risk do you believe parental abduction to be? _____

Do any of your children have valid passports? Yes No

If yes, where were the children's passports issued? U.S. Elsewhere:_____

Can you provide us with copies of the children's passports? Yes No

If any children born as a result of this marriage are still minors (under 18 or unemancipated), please provide the following information required under the UCCJEA concerning any such minor child or children:

(1) Name: _____

Date of birth: _____ Present Age: _____

Child's Social Security Number: _____

Place of residence: _____

Child lives there with: _____

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Child has lived there since: _____

Previous residence: _____

Child lived there with: _____

Dates child lived at that address: _____

Child's present school: _____ Grade: _____

With which parent does this child wish to live? _____

(2) Name: _____

Date of birth: _____ Present Age: _____

Child's Social Security Number: _____

Place of residence: _____

Child lives there with: _____

Child has lived there since: _____

Previous residence: _____

Child lived there with: _____

Dates child lived at that address: _____

Child's present school: _____ Grade: _____

With which parent does this child wish to live? _____

(3) Name: _____

Date of birth: _____ Present Age: _____

Child's Social Security Number: _____

Place of residence: _____

Child lives there with: _____

Child has lived there since: _____

Previous residence: _____

Child lived there with: _____

Dates child lived at that address: _____

Child's present school: _____ Grade: _____

With which parent does this child wish to live? _____

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† The Court requires that we list all residences and individuals with whom each **minor child** has lived for the past FIVE (5) years. If more space is needed, please use the back of this page.

IF YOU HAVE MORE THAN THREE CHILDREN FROM THIS MARRIAGE, PLEASE CHECK HERE AND IDENTIFY THOSE CHILDREN ON AN SEPARATE SHEET OF PAPER.

IF YOU HAVE ANY CHILDREN OF THIS MARRIAGE WHO ARE NOW **ADULTS** (OVER 18, EMANCIPATED OR MARRIED), PLEASE IDENTIFY THOSE CHILDREN BELOW:

Adult Child #1: Name: _____
Date of birth: _____ Present Age: _____
Emancipation status: Married Living on his/her own Living in our home

Adult Child #2: Name: _____
Date of birth: _____ Present Age: _____
Emancipation status: Married Living on his/her own Living in our home

If more space is needed, please use a separate sheet of paper.

Child Custody, Support and Parenting Schedules

Do any of your children have **special needs** (physical limitations, disabilities, handicaps, learning or developmental delays, chronic medical conditions, psychiatric problems, etc.)? If so, please explain.

Have you and your spouse made any arrangements or agreements concerning custody, parenting schedules or support of the children? If so, please describe.

Do you wish to seek child support from your spouse? _____

Has any minor child of this marriage ever been involved in a custody dispute? If so, please give details.

Does anyone besides you and your spouse have any custody claim on any minor child of this marriage? If so, please identify.

Please state who (IN YOUR OPINION) is best suited to have legal custody of the children and briefly explain your position.

IMPORTANT DEFINITIONS: "**Primary Residential Custodian**" currently means the designated parent has the unilateral authority to relocate and to make all major life decisions affecting the children's religion, education and health. "**Joint Custody**" means the parties must jointly make all such major life decisions affecting the children

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(health, education and religion). **"Timesharing"** is the schedule under which the children are with their respective parents.

What **parenting schedule** are you and your spouse utilizing at the present time?

FINANCIAL HISTORY OF THE PARTIES

We recommend that you obtain a copy of your **credit report** and bring that with you on your first appointment. There are several on-line options for obtaining copies of your credit report but most require you to sign up for a monthly fee and additional services. We suggest you try **AnnualCreditReport.com**, to which we have no connection but it has come highly recommended as a free service of use to divorcing parties.

"AnnualCreditReport.com is a centralized service for consumers to request free annual credit reports. It was created by the three nationwide consumer credit reporting companies - Equifax, Experian and TransUnion. AnnualCreditReport.com provides consumers with the secure means to request and obtain a free credit report once every 12 months from each of the three nationwide consumer credit reporting companies in accordance with the Fair and Accurate Credit Transactions Act (FACT Act). AnnualCreditReport.com offers consumers a fast and convenient way to request, view and print their credit reports in a secure Internet environment. We also provide options to request reports by telephone and by mail."

MAINTENANCE ("ALIMONY")

Have you and your spouse made any arrangements or agreements concerning maintenance? If so, please describe.

Do you wish to seek maintenance from your spouse? _____

Do you expect to pay maintenance to your spouse? _____

PRIOR MARRIAGES OF THE PARTIES

Have you or your spouse had any prior marriages? If so, please indicate how such marriage(s) ended [death, divorce, annulment, etc.].

Were any children born as a result of those prior marriages? _____

To which spouse? _____

Who has custody of these children? _____

If more space is needed, please use an additional sheet of paper.

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STATUS OF LEGAL PROCEEDINGS

YES	NO	DON'T KNOW	
			Has an EPO been entered or sought by either of you? If YES, provide us with a copy immediately!
			Has your spouse consulted an attorney yet? If YES, his/her name, if known: _____
			Has a Petition for Dissolution or Petition for Legal Separation been filed yet by you or your spouse? If YES: When? _____ Where? <input type="checkbox"/> Jefferson Co. <input type="checkbox"/> Oldham Co. <input type="checkbox"/> Other: _____ By whom? _____ If YES, provide us with a copy immediately!
			Have you been served with an EPO, Petition for Dissolution, Petition for Legal Separation or other legal proceeding involving this marriage or any other legal action? If YES, when were you served ? Exact Date: _____ Please immediately provide us with a copy of everything served on you!
			Have any Court Orders been entered? If YES, describe: _____ Please provide us with a copy immediately!
			Are any Motions pending at this time? If YES, describe: _____ Please provide us with a copy immediately!
			Have you signed anything which might affect this case? A prenuptial or postnuptial agreement, for instance. If YES, please describe: _____ Please provide us with a copy immediately!
			Are there any potential or pending personal injury, workers compensation or disability claims involving either party. If YES, please describe: _____

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CHRONOLOGY

We need a brief "snapshot" of your life, before and after your marriage. Please fill this page out as best you can. We recognize this may seem redundant, but having this information on one page is very useful to us.

Client's Date of Birth: _____ Spouse's Date of Birth: _____

Previous Marriages
by Either Party
(Dates and Names): _____

Courtship began with
Current Spouse: _____

Date of Marriage: _____

Children's Names and
Birth Dates: _____ Born: _____
_____ Born: _____
_____ Born: _____
_____ Born: _____

Acquisition of Major
Assets (house, car, etc.) _____ Date: _____
_____ Date: _____
_____ Date: _____

Dates of Parties' Current
Employment and Positions: _____
Husband's Current Employer:

Position: _____
Annual Salary: _____

Wife's Current Employer:

Position: _____
Annual Salary: _____

Other significant events
during marriage: _____

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**YOUR INITIAL GOALS FOR
EVENTUAL DIVORCE SETTLEMENT**

Please outline for us what you see as your initial goals for resolution of this matter:

Custody of Child(ren): Not applicable Joint Sole Other: _____

Parenting Time with Child(ren): Not applicable
Child(ren) to reside primarily with _____
Child(ren) to spend every other weekend with other parent
Child(ren) to have portion of summer with other parent
Other arrangement --

Restoration of Non-Marital Property: Briefly identify any non-marital property (personal or real) that you feel strongly about being restored to you (*e.g.*, inheritances, gifts to you, things you owned before the marriage)

Division of Real Estate: Briefly identify any real property owned by either or both of you and who you think should have it at the conclusion of this divorce

Division of Personal Property: Briefly identify who should end up with what personal property items
Household Goods, Furniture, Furnishings, Appliances, Decor Items, Tools, etc. --

Pets -- _____

Automobiles -- _____

Bank Accounts -- _____

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Investment Accounts (stocks, bonds, mutual funds, CDs, etc.) -- _____

Pension and Retirement Accounts -- _____

Responsibility for Debts -- _____

Life Insurance Policies -- _____

Business Interests -- _____

Child Support: Both parents are obligated to contribute to the support of their minor children and the calculation of child support is a mathematical formula proscribed by the Kentucky Legislature based on the combined gross monthly income of the parties (or imputed income if a party is unemployed or voluntarily underemployed)

Do you expect to pay or receive child support? _____

Maintenance: "Maintenance" used to be called "alimony". It is not automatically awarded in divorce, and there are many, many factors which go into the court's determination of whether or not maintenance is appropriate. Included in these factors are (a) length of marriage, (b) disparity in the parties' respective incomes or abilities to earn, (c) educational and employment history of the parties, (d) age of the parties, (e) ages of the parties' minor children, etc.

Do you expect to pay or receive maintenance? _____

Attorney Fees: Generally speaking, it is difficult to negotiate the voluntary payment of your fees by the other spouse; however, if the Court is required to decide, they will reluctantly evaluate disparity in the respective parties' estates and incomes.

Do you expect to ask for a contribution toward your attorney fees from your spouse? _____

Special Factors: Are there any special factors of which we should be aware? Drug abuse, alcoholism, infidelity, child abuse, gambling addiction, mental illness, inheritance, bankruptcy, interfering in-laws, religious differences, cultural incompatibility, etc.

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Attached as **Part B** of this **Divorce Datapack** is a Mandatory Case Disclosure, which the Jefferson Family Court requires be submitted by each party in every divorce case heard in this County.

You need to fill out **Part B** to the best of your ability. At a minimum, you need to review the Mandatory Case Disclosure well enough that, at your initial meeting in our office, you can ask questions about completing it.

A few days after your initial consultation with Mr. Hoge and your engagement of him as your attorney, we will have another meeting at which time you will need to provide us with your completed Mandatory Case Disclosure, with the necessary attachments.

Any required or requested documents that you provide to us will go a long way toward controlling your legal costs in this matter. We can obtain copies of Deeds and Mortgages recorded in Jefferson County in the last 20 years or so. Any other personal documents will have to be provided by you. In the alternative, we may be able to persuade your spouse to provide these documents, but that process is usually time-consuming and expensive.

If the litigation of your case requires certain documents that you cannot or do not provide to us, we must invest a portion of the retainer you have paid to us in the acquisition of those documents.

We presume that you would prefer to be pro-actively involved in your case and that you would prefer to help control your own legal expenses.

The better the documentation provided by you, the better our opportunities to assist you in this matter.

Client Name: _____ Initial Appointment Date: _____

DOCUMENTATION CHECKLIST

Documentation Description	Mandatory?	Not applicable?	Date Requested?	Date provided?	Action Required
Recent Tax Returns (Personal, corporate, partnerships, joint ventures, or other income tax returns, <i>state and federal</i> , including W-2s, 1099s, and K-1s) -- <i>Preferably for at least the last five years</i>	YES				
Three (3) most recent paycheck stubs or other evidence of current income sources	YES				
Bank Statements and other account info					
Financial Statements					
Loan Applications					
Broker's Statements					
Stocks, Bonds, Mutual Funds, Stock Options and Investment Account statements					
Pension, Profit Sharing, Deferred Compensation Agreement, and Retirement Plans					
Wills and Trust Agreements					
Life Insurance policies					
Outstanding Debts					
Accounts Payable and Receivable					
Real Property records (<i>deeds, mortgages, etc.</i>)					
Sale and Option Agreements					
Personal Property (<i>purchase receipts, appraisals, etc.</i>)					
Motor Vehicles (<i>titles, registrations, etc.</i>)					
Corporate Interests					
Partnership and Joint Venture Agreements					
Employment Records					
Fringe Benefits documentation					
Employment Contracts					
Business Records					
Charge Accounts					
Membership Cards					
Judgments and pleadings					
Gifts and Charitable Contributions					
Medical Bills					
Telephone and Long Distance Charges					
Tapes and Photographs					
Inventory of Safe Deposit Boxes					
Other:					

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Revised 03/30/2009

NO.

JEFFERSON CIRCUIT COURT

FAMILY DIVISION _____

PETITIONER

MANDATORY CASE DISCLOSURE OF

v.

RESPONDENT

I. IDENTIFYING INFORMATION OF BOTH PARTIES

Petitioner

Respondent

Name: _____

Name: _____

Street Address: _____

Street Address: _____

City, State, ZIP: _____

City, State, ZIP: _____

DOB: _____ Age: ____ Phone#: _____

DOB: _____ Age: ____ Phone#: _____

II. INCOME AND EMPLOYMENT INFORMATION OF BOTH PARTIES

Petitioner

Respondent

Employer Name: _____

Employer Name: _____

Gross monthly income: \$ _____

Gross monthly income: \$ _____

Other income: \$ _____

Other income: \$ _____

III. MARRIAGE INFORMATION

Date of marriage: _____

Date of separation: _____

Place of marriage (city, county & state): _____

IV. CHILDREN'S INFORMATION *(If more than 3 children, continue on a separate sheet)*

A. Minor children born to parties (number: _____)

More CHILDREN attached?

Name	Date of Birth	Current Age

DISCLOSURE OF _____

CASE NO. _____

B. Monthly child care/daycare expenses: Cost \$ _____ Paid by _____

C. Medical, dental and vision insurance for children: Cost \$ _____ Paid by _____

D. Either party court-ordered to pay child support for a child born before the children born of this marriage? Paying party _____ Amount: \$ _____ Children: _____

V. SUMMARY OF ASSETS & DEBTS

A. REAL ESTATE *(If more than 3 properties, continue on a separate sheet)*
 Are you making a non-marital claim? _____ If yes, you must comply with Section IX(D)(10) below.

Address	1st Mortgage Company	1st Mortgage Payoff Amount	2nd Mortgage Company or Home Equity Loan	2nd Mortgage or Equity Loan Payoff Amount	Fair Market Value	Valuation Date	Equity	
<input type="checkbox"/> More REAL ESTATE attached?							Total Real Estate Equity:	

B. VEHICLES - Automobiles, Motorcycles, Boats, Trucks, Motor Homes, etc. *(If more than 3 vehicles, continue on a separate sheet)*
 Are you making a non-marital claim? _____ If yes, you must comply with Section IX(D)(10) below.

Primary Driver	Year, Make & Model	NADA Value	Valuation Date	Debt Owed	Lien Holder	Equity	
<input type="checkbox"/> More VEHICLES attached?						Total Vehicle Equity:	

C. BANK ACCOUNTS - Checking, Savings, CDs, Money Market accounts, etc. *(If more than 3 accounts, continue on a separate sheet)* **(Do not list complete account numbers)**
 Are you making a non-marital claim? _____ If yes, you must comply with Section IX(D)(10) below.

Owner(s)	Institution Name [NO ACCOUNT NUMBERS!]	Type of Account	Valuation Date	Current Balance	
<input type="checkbox"/> More BANK ACCOUNTS attached?				Total Current Balances:	

DISCLOSURE OF _____

CASE NO. _____

D. STOCKS, BONDS, PORTFOLIOS, MUTUAL FUNDS, ETC. *(If more than 3, continue on a separate sheet)*
 Are you making a non-marital claim? _____ If yes, you must comply with Section IX(D)(10) below.

Institution Name	Stock/Portfolio Name	Valuation Date	Current Value
<input type="checkbox"/> More INVESTMENTS attached?			Total Current Values:

E. RETIREMENT BENEFITS - IRA, Keogh, 401(k), 403(b), Pension, etc. *(If more than 3, continue on a separate sheet)*
 Are you making a non-marital claim? _____ If yes, you must comply with Section IX(D)(10) below.

Participant	Plan Name	Contrib/Non	Vested/Non	Pay Status?	Valuation Date	Balance
<input type="checkbox"/> More RETIREMENT BENEFITS attached?						Total Balances:

Have any loans been taken out against any of these Retirement Benefits? If so, describe:

F. LIFE INSURANCE *(If more than 3 policies, continue on a separate sheet)*
 Are you making a non-marital claim? _____ If yes, you must comply with Section IX(D)(10) below.

Company	Party Insured	Beneficiary	Term/Whole	Policy #	Valuation Date	Cash Surrender Value
<input type="checkbox"/> More LIFE INSURANCE attached?						Total Cash Values:

G. BUSINESS INTERESTS *(If more than 2 businesses, continue on a separate sheet)*
 Are you making a non-marital claim? _____ If yes, you must comply with Section IX(D)(10) below.

Name of Business & Owner	Percentage of Ownership	Type of Business	Corporation, Sole Proprietorship, Partnership, Etc.	Valuation Date	Business Loan(s) Balance	Value of Interest
<input type="checkbox"/> More BUSINESS INTERESTS attached?						Total Values:

DISCLOSURE OF _____

CASE NO. _____

H. HOUSEHOLD GOODS:

Are you making a non-marital claim? _____ If yes, you must comply with Section IX(D)(10) below.

Agreed Division? Yes No, but not expected to in dispute
 No, but dispute anticipated (Suggested appraiser: _____)

Attach a list of the disputed household items

I. OTHER ASSETS - Cash, Travelers Checks, Debts Others Owe You, Copyrights, Trademarks, Pets or Animals, Jewelry, Collectibles, Tools, Inventions, Other "Liquid Assets", etc. (If more than 4 items, continue on a separate sheet)

Are you making a non-marital claim? _____ If yes, you must comply with Section IX(D)(10) below.

Item Description	Who Holds Possession	Valuation Date	Fair Market Value	Amount Owed	Net Value or Equity
<input type="checkbox"/> More OTHER ASSETS attached?				Total Values:	

VI. OTHER DEBTS NOT PREVIOUSLY LISTED (Do not list complete account numbers) Includes credit card balances, credit union loans, signature loans and other unsecured debt (If more than 5 debts, continue on a separate sheet)

Creditor	Party Named on Debt	Premarital Account?	Valuation Date	Monthly Payment	Total Balance
<input type="checkbox"/> More DEBTS attached?				TOTAL DEBT BALANCES:	

VII. EXPECTED POST-DIVORCE LIVING EXPENSES SCHEDULE (Do not include debts on this page)

Not necessary if maintenance or child support are not being claimed

YES **NO** **Do the parties' combined gross incomes exceed \$15,000 per month?**

If **NO**, do not include children's personal expenses below.

If **YES**, list children's personal expenses such as private school tuition, tutors, camps, activity fees, clothing, etc. on a separate sheet. **Attached?**

A. COMMON EXPENSES FOR FAMILY (Party and any children of the marriage)	
FOOD/GROCERIES FOR FAMILY (Non-entertainment)	
HOUSING	
Cable	
Garbage collection	
Electric, gas, propane & oil utilities	
Home maintenance & repairs	
Homeowners insurance	
Household supplies	
Maid service	
Property taxes	
Rent or 1 st Mortgage	
2 nd mortgage/home equity	
Telephone	
Mobile Phone	
Vet/pet supplies	
Yard expense/maintenance	
Water/sewage	
TRANSPORTATION	
Gas and oil	
Liability insurance	
License/taxes/tag	
Payment/loan	
Repairs/maintenance	
Other - bus, taxi, tolls & parking	
OTHER FAMILY EXPENSES (list):	
SUBTOTAL (Column A)	

B. YOUR PERSONAL EXPENSES (not including any children's expenses)	
Church and charity	
Clothing	
Cosmetics, hygiene & toiletries	
Disability insurance	
Dry cleaning & laundry	
Entertainment, including restaurants & movies	
Hair care (barber, salon, etc.)	
Internet access	
Life insurance (whole life or term)	
Manicures & pedicures	
Newspapers, magazines & books	
Professional dues or uniforms	
Social clubs	
Sports, exercise, hobbies, crafts, etc.	
Travel (monthly average)	
MEDICAL	
Dental (including orthodontics)	
Eyeglasses, contacts & hearing aids, exams and testing	
Insurance (hospitalization)	
Medical doctor(s)	
Prescription medication	
OTHER PERSONAL EXPENSES (list):	
SUBTOTAL (Column B)	
SUBTOTAL FROM COLUMN A	
SUBTOTAL FROM COLUMN B	
GRAND TOTAL	

DISCLOSURE OF _____

CASE NO. _____

VIII. OTHER

A. Special needs of parties:

B. Bankruptcy: _____

C. Lawsuits: _____

IX. REQUIRED ATTACHMENTS (to be sent **ONLY** to opposing party or opposing counsel and not filed with the court):

To complete this section, you **must** attach all of the following documents and/or provide the requested information on a separate sheet and attach to this form. In the spaces provided, mark as follows:

“A” = to indicate that the requested document/information is attached

“U” = to indicate that the requested document/information is unavailable (*Provide explanation on separate page*)

“N/A” = if not applicable

A. PERSONAL INFORMATION OF BOTH PARTIES

B. INCOME AND EMPLOYMENT OF BOTH PARTIES

A, U or N/A	Item #	
	1.	Three (3) most recent paycheck stubs
	2.	Federal Income Tax Return for the last year filed
	3.	State Income Tax Return for the last year filed
	4.	Documentation of all other income for the past 48 months, including source of income and amount of income received year-to-date

C. CHILDREN

A, U or N/A	Item #	
	1.	Verification of work-related child care expense
	2.	Verification of cost of health/dental insurance for children’s portion (e.g. difference between cost of single and family plan)

D. ASSET SCHEDULES

A, U or N/A	Item #	
	1.	Most recent statement of each bank account
	2.	Most recent brokerage statements or documentation of purchase and/or value for each investment
	3.	Explanation of source of cash holdings, location and amount of cash.

DISCLOSURE OF _____

CASE NO. _____

A, U or N/A	Item #	
	4.	For each piece of real estate, copy of deed, documentation of all indebtedness (i.e. mortgage, home equity loan, liens, etc.) including unpaid balance and payoff (with date payoff amount obtained) for each debt, and current tax assessment
	5.	Declaration page of life insurance policies and documentation of cash surrender values
	6.	Documentation of benefits accrued in pension, profit sharing, 401(k) or other retirement plans, including most recent statements of each such plan and the name, address and phone number of plan administrator
	7.	For each vehicle, provide amount of payoff of any indebtedness (including date payoff amount obtained) and copy of title
	8.	For each business interest, list name of business, extent of interest or title in business (i.e. owner, shareholder, partner, etc.), provide a copy of last income tax returned filed by business and documentation of income earned (or portion received) through business during last twenty-four (24) months)
	9.	Provide a list describing any other assets you have an interest in, including any documentation as to the value of the non-marital interest, date asset was acquired, and source of non-marital interest (trace and document non-marital funds used to acquire each asset)
	10.	NON-MARITAL INTEREST. For each asset in which you claim a non-marital interest, provide the basis and approximate value of non-marital claim. Documentation tracing any non-marital asset shall be produced if available, and if not currently available, shall be produced when available, or as specified by separate court order.

E. DEBT SCHEDULE

A, U or N/A	Item #	
	1.	For each debt, provide the last statement or documentation of unpaid balance, or explain why documentation is not available
	2.	For each debt designated as “non-marital,” list the party you think should assume responsibility for said debt and why

PART C

Emotional Aspects of Your Divorce

Current Marital Circumstances

Check one of the following:

Did you expect this separation?		Do you want this separation/divorce?	
Yes, for a long time	_____	Not at all	_____
Yes, but only recently	_____	Have mixed feelings	_____
Unexpected	_____	Want it very much	_____
		No, but am resigned to it	_____
		Feel it is for the best	_____

CHECK ALL OF THE FOLLOWING WHICH APPLY:

Factors contributing to the decision to separate or divorce:

Domestic violence	_____	Abuse or neglect of children	_____
Recently had difficulty communicating	_____	Job or school commitment	_____
Always had difficulty communicating	_____	Suspiciousness, jealousy	_____
Differences in interests	_____	Neglect of home	_____
Differences in education level	_____	Trouble with in-laws	_____
Differences in ethnic or racial background	_____	Drinking	_____
Differences in expectations about marriage	_____	Drug use	_____
Differences in expectations about family life	_____	Physical abuse	_____
Changes in lifestyle, values	_____	Depression	_____
Lacked love for one another	_____	Sexual abuse	_____
Verbal abuse	_____	Addiction to porn, on-line gaming, social networking (Facebook, MySpace, etc.)	_____
Bored	_____	Other (explain): _____	_____
Sexual difficulties	_____	_____	_____
In love with another person	_____	_____	_____
Financial problems	_____		
Unfaithful, infidelity	_____		

Major life events and/or changes occurring within the last twelve months:

Started school or training program	_____	Began new medications	_____
Graduated from school or training program	_____	Significant weight gain or loss	_____
Entered job market	_____	Nanny, au pair or aging parent joined the household	_____
Changed job	_____	Nanny, au pair or aging parent left the household	_____
Lost job	_____	Death of a household pet	_____
Moved residence	_____	Pregnancy	_____
Financial troubles	_____	Miscarriage	_____
Increase in financial responsibilities	_____	Abortion	_____
Legal problems	_____	Fertility problems	_____
Arrested and/or jailed	_____	Changes in childcare	_____
Separation or divorce of friend or relative	_____	Children had trouble in school	_____
Health problems (self, spouse, children)	_____	Onset of menopause	_____
Drinking or drug problems	_____	Mid-life crisis	_____
Began treatment for drinking or drug problems	_____		
Began psychotherapy	_____		

Victim of a crime _____ Other (explain): _____
 Auto accident _____
 Undertaken major new expenses _____
 Natural disaster _____

LEVEL OF CONFLICT:

On a scale of 1-10, rate the level of conflict and anger in your marriage PRIOR TO THE INITIATION OF THE DIVORCE PROCESS:

BEFORE THE SEPARATION	Lowest									Highest
Level of conflict in marriage	1	2	3	4	5	6	7	8	9	10
Level of your anger	1	2	3	4	5	6	7	8	9	10
Level of your spouse's anger	1	2	3	4	5	6	7	8	9	10

NOW THAT YOU ARE IN THE DIVORCE PROCESS, rate the level of conflict and anger:

DURING YOUR DIVORCE	Lowest									Highest
Level of conflict in marriage	1	2	3	4	5	6	7	8	9	10
Level of your anger	1	2	3	4	5	6	7	8	9	10
Level of your spouse's anger	1	2	3	4	5	6	7	8	9	10

PERSONAL CONCERNS AND PRIORITIES AT TIME OF SEPARATION OR DIVORCE

At this time of major change in our family:

I worry that I will _____

I am concerned that my children will _____

It's important to me that the separation/divorce process _____

I think that my spouse will _____

With regard to the future:

I worry I will _____

I am concerned that my children will _____

It is important to me that _____

I think that my spouse will _____

YOUR SUPPORT SYSTEM

The following are my current sources of **emotional** support:

Family and Friends	_____	Religion or spiritual practice	_____
Neighbors	_____	Therapist/counselor	_____
Co-workers	_____	Lawyer	_____

Other: _____

Your Occupation

What is your occupation? _____

Are you current employed? Yes/No _____

If yes, where are you employed? _____

How long have you held your current position? _____

How satisfied are you with your current job/work situation?

Very satisfied	_____	Moderately satisfied	_____
Moderately unhappy	_____	Extremely unhappy	_____

Your Personal History

Have you ever had any physical or mental illnesses, significant health problems or serious accidents that affected you for an extended period of time? If so, please list:

Your health in early childhood was generally:

Good _____ Fair _____ Poor _____

At present, your health is generally:

Good _____ Fair _____ Poor _____

Special Health Concerns: _____

How long ago was your last physical? _____

Are you concerned about your own drug/alcohol use or that of your partner? Yes/No

If yes, please explain:

List all drugs you are currently taking (including aspirin, vitamins, sleeping pills, etc.):

Are you currently in couples, family or individual therapy or counseling? Yes/No

If yes, with whom? _____

Have you previously been in couple's, family or individual therapy or counseling? Yes/No

If yes, what type of counseling was it? _____

For how long? _____

With whom? _____

Your Income

What is the approximate gross monthly income you have to live on at the present time? \$ _____

Describe changes, if any, in your income since your separation: _____
