PRIMARY PARTY QUESTIONNAIRE

Party Type:	Address Information
Demographics/Social History	Confidential Address: * O Yes O No
Prefix:	Address:
First Name: *	City, County, State
Middle Name:	Zip/Postal Code: *
Last Name: *	Have you been a resident of Ohio for 6
Suffix:	months?* O Yes O No
SSN: *	Have you been a resident of Montgomery County, Ohio for 90 days? • Yes • No
DOB: *	Contact Information
Sex: O Male O Female	Email:
	Home Phone:
Interpreter Needed? * Language/Dialect:	Cell Phone: *
	Work Phone:
	Current Court Cases
Currently Pregnant?* O Yes O No If Yes, due date:	Bankruptcy Case #
	Location:
Number of Monthease *	Domestic Violence Case #
Number of Marriages:* Birth Place	Location:
City:	Other Legal Cases:
State:	Aliases or Former Names
	Prefix:
Country:	First:
Education	Middle: Last:
Education Level:	Suffix:
Years in school:	
Degree:	Additional Addresses

Physical Description	Marriage Information
Race: *	Marriage Date: *
Height:	Place of Marriage
Weight:	City:
Hair Color:	State:
Eye Color:	Country:
Financial Information	
Is Primary Party retired? O Yes O No	Cohabitating at present?* O Yes O No
Does Primary Party receive public assistance? • Yes • No • Pending	Date Separated:*
	Who left first?*
Is Primary Party currently enlisted in the Military? • Yes • No	Real Estate
Branch:	Does the Primary Party or the Secondary Party own any real estate? • Yes • No
Duty Station: Active Duty: • Yes • No	Joint Holdings:
Reservist: O Yes O No Deployed: O Yes O No	Primary Party Holdings:
<u>Occupation/Employer</u> Are you currently employed? O Yes O No	Secondary Party Holdings:
Employer Name:	Minor or Dependent Child
Work Position:	Child(ren) of Party? • Yes • No
Employer Address:	First Name:
City, County, State:	Middle Name:
Zip/Postal Code:	Last Name: *
Employer Phone:	DOB: *
Work Hours:	
Gross Annual Earnings:	Sex: O Male O Female Residing with Parent of this marriage?
Pension Income:	 Yes ○ No Child Support paid? ○ Yes ○ No Child Support received? ○ Yes ○ No