## UNION COUNTY SUPPLEMENTAL INFORMATION DISCLOSURE FORM

(This form **MUST** be completed in full and submitted with each <u>new or reopened</u> divorce or dissolution matter. **LEAVE NO BLANK SPACES**. If a question does not apply enter n/a on the line. **Incomplete forms will result in delays and/or <u>possible contempt sanctions</u>.)** 

PERSONAL INFORMATION:
Your name:
Current address:
(if safety concerns exist, state information excluded for safety concerns)
How long at this address?
Names of individuals residing with you at this address:
Your date of birth:
Date of marriage:
Date of separation:
If this is a reopen, date Decree was entered:
CHILDREN:
How many children were born or adopted as issue of this relationship? (enter
Name Date of birth
If any child was born while the parties were not married, has paternity been established
through a Court proceeding or by an acknowledgement of paternity pursuant to R.C. §
3111.31?YesNo.
If yes, how was paternity established and when?
INICOME INICODA A TION
INCOME INFORMATION:
Current employer's name:
How long with this employer?  Job description currently:
Hours of employment:
Overtime available: Yes or No (circle one)

If yes, state the amount of OT How often are you paid: monthly, bi-v What is withheld from wages? (circle other	weekly, weekly, to all that apply): ta	wice per month (2 xes, health ins, do	24 pays/yr) (circle one) ental, vision, 401(k),				
other If nothing is withheld, do you receive	a 1099 at the end	of the year?	Yes or No (circle one)				
ATTACH COPY OF MOST IF SELF-EMPLOYED, ATT LAST TWELVE (12) CONS IF 1099 EMPLOYEE ATTA	TACH INCOME ECUTIVE MON	& EXPENSE S NTHS	TATEMENTS FOR				
REAL ESTATE:  Do you have any real estate deeded to you? Yes or No (circle one)  If your name is on a deed to real estate, what is the address?							
Is the real estate deeded to you, subject If yes, state:  Name of mortgage company:  Date mortgage incurred:  Current balance owed:							
Monthly payment:	(does this include principal, interest taxes and insurance (PITI)? Yes or Nor (circle one)						
MOTOR VEHICLES:  Does your name appear on the title of  If yes, provide the following in	nformation for each	ch such vehicle:					
YEAR MAKE I	MILES VA	ALUE TITI	LE INSTRUMENT*				
(*Indicate if you have a Certificate of	Title <u>or</u> Memora	ndum Certificate	of Title)				
If you have a Memorandum Co Vehicle Name o	ertificate of Title, f Lienholder	state: Date lien rec	corded				
			• •				
<b>RETIREMENT BENEFITS:</b> Do you have a 401(k), IRA, Pension (	circle one). or oth	ner:	(describe)				

State the value of each as of the most recent statement received:

BENEFIT	VALUE	ADMINISTRATOR*		WHEN EARNED**	
401(k)					
IRA					
PENSION					
*Is there a 3 <sup>rd</sup> **Was any posteriore the ma	ortion of this e	strating the func arned before m	ds? Name the parriage. State t	earty, i.e. Fidel he dates when	ity, Schwab etc benefit was earned
<b>DEBT INFO</b> Are you oblig	RMATION gated on any de	ebts? Yes o	or No (circle on	e)	
			s: (whether cred l pages, if neces		l by a lien), amount
CREDITOR		STATUS*	AMOUNT	MO PMT	PARTY LIABLE**
<u></u>					

READ INSTRUCTIONS CAREFULLY. <u>LEAVE NO BLANK SPACES</u>. MAKE SURE TO ATTACH PAY ADVICES, INCOME AND EXPENSE STATEMENTS OR 1099, IF APPLICABLE.

<sup>\*</sup>Status of debt: indicate if debt is secured (S) or unsecured (U).

<sup>\*\*</sup>If debt is joint obligation indicate with J. If individual liability indicate with I.