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The Self Help Legal Information Network

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Annulment Questionnaire

I am providing this information for the purpose of completing an Annulment Petition. I understand that if I have any questions, concerns or need legal advice I may need to contact an attorney. I understand The Self-Help Legal Information Network are not attorneys and cannot give legal advice (ie. tell me the best method for my situation, tell me what forms to complete, tell me the process, or give me their opinion). I understand that I am responsible for filing and/or serving any necessary documents unless otherwise noted.

PLEASE NOTE: We provide document preparation for non-contested annulments. If it becomes contested you may need to seek the assistance of an attorney.

Name

Date

Signature

QUESTIONNAIRE FOR: Annulment (No children or Property)

You are requesting an Annulment based on:

- Age of petitioner or respondent – (please indicate who and what age)
- One party is already married – (please indicate who and to whom)
- Unsound mind – (please indicate who has the unsound mind and how you've determined that)
- Fraud – (indicate who performed fraud and what happened)
- Force – (indicate who forced whom and how)
- Physical Incapacity - (who is physically incapacitated)
- Other – (Any reason not listed that you feel are grounds for an annulment)

1. _____
Full name of husband (include first, last and middle)

2. _____
Full name of wife (include first, last and middle)

3. _____
Maiden name of wife

4. If wife do you want your
maiden name back? yes no

5. _____
full address of husband (how long at this address?)

6. _____
full address of wife (how long at this address?)

_____ list other address if at previous address for less than 5 years

7. Date of Marriage _____ 8. Date of separation _____

9. Your Telephone Number _____

10. Have you been a resident of California at least six months and of Los Angeles County for at least three months? Yes No

Did you want an order for spousal support? YES NO

Did you want to pay spousal support YES NO if so how much? _____

Are you the petitioner or the respondent? _____

Any prior court orders or proceeding in regards to this issue? If so please state case number, court issue and date of claim.

10. List all personal/separate property of wife [debts & assets] including jewelry, art, antiques, coin collections etc. (On all following questions attach additional sheets as necessary).

Property / WIFE	Fair market value	Debt / amount owed	Goes to wife / husband

12. List all personal/separate property of husband.

Property / HUSBAND	Fair market value	Debt owed	Goes to wife / husband

13. List all community personal property.
(All property that was purchased while you were married).

Property / COMMUNITY	Fair market value	Debt owed	Who will keep wife / husband

14. List all community real property.

Property / COMMUNITY	Fair market value	Debt owed	Who will keep wife/ husband

15. List all bank accounts, (checking & savings) credit union accounts, retirement funds, all policies, stocks, bonds, equity, credit (excluding credit cards), interest in businesses, and all other items of value not mentioned above.

Account, Account number and Branch Address	Fair market value	Debt	Goes to wife / husband

16. List any additional items not listed above / or as an attachment sheet

Item / account #	Fair market value	Debt	Goes to wife / husband

17. Any children from or before this marriage or adopted? If so please indicate.

Full Name of child (first, middle, last) specify if child is adopted, born of this marriage, or before this marriage. (for unborn - write unborn)	Birth date / age	Birth place (city & state)	Sex M / F
	___-___-___ / ___		

Anything else you would like to include to submit to the judge to help him in his determination in granting you an annulment? If so please state.

INCOME AND EXPENSES

1. Are you receiving, have you applied or do you intend to apply for AFDC?

(check which applies) Receiving have applied will apply not receiving

2. What is your date of birth? _____-_____-_____ Age _____

3. What is your occupation? _____

4. Highest year of education? _____

5. What (if any) degree was received? _____

6. Are you currently employed? Yes No

7. How many hrs per wk do you work? _____

8. What is your gross monthly earnings? _____

9. Please list your place of employment's name, address and telephone number.

Phone# _____

When did you start work there? _____

10. If not working where was your last place of employment?

8. When did you start working there? _____

9. When did you stop working there? _____

10. What was your gross monthly earnings? _____

11. How many minor children you are legally obligated to support? _____

12. Do you have any other jobs? Yes No If so please specify

Name of business _____

Address _____

Gross monthly income from this occupation _____

1. What is your current tax filing status? Please check

Married filing separately Married filing jointly with _____

Head of household Single Other _____

What is the last year you filed taxes? _____

What # of exemptions do you claim? _____

2. How much do you estimate the other party's gross income (before taxes) to be?
_____ Please explain how you came up with this

estimate: _____

Current Income:

last month

average out of 12 months

(all income is gross before taxes or deductions of any kind)

1. Salary or wages:	\$ _____	\$ _____
2. Overtime	\$ _____	\$ _____
3. Public assistance	\$ _____	\$ _____
4. Spousal Support	\$ _____	\$ _____
5. Pension	\$ _____	\$ _____
6. Disability	\$ _____	\$ _____
7. Unemployment	\$ _____	\$ _____
8. Workers Compensation	\$ _____	\$ _____
9. Investment Income	\$ _____	\$ _____
10. Rental property income	\$ _____	\$ _____
11. Trust Income	\$ _____	\$ _____
12. Dividends / interest	\$ _____	\$ _____
13. Self-Employment	\$ _____	\$ _____
14. Other	\$ _____	\$ _____

Expenses

monthly

average of 12 months

- 1. Home mortgage or Rent \$ _____ \$ _____
- 2. Property taxes \$ _____ \$ _____
- 3. Child care costs \$ _____ \$ _____
- 4. Groceries/ household supplies \$ _____ \$ _____
- 5. Eating out/Entertainment \$ _____ \$ _____
- 6. Utilities \$ _____ \$ _____
- 7. Telephone , cell phone, email \$ _____ \$ _____
- 8. laundry/cleaning \$ _____ \$ _____
- 9. Education \$ _____ \$ _____
- 10. Auto expense & transportation \$ _____ \$ _____
- 11. Savings \$ _____ \$ _____
- 12. Insurance (any & all) \$ _____ \$ _____
- 13. Charity \$ _____ \$ _____
- 14. Other \$ _____ \$ _____
- 15. Debt \$ _____ \$ _____

Paid to:	For	Amount	Balance	Last payment date

Assets

Value

- 1. Cash on hand \$ _____ \$ _____
- 2. Checking \$ _____ \$ _____
- 3. Savings, money market \$ _____ \$ _____
- 4. Stocks, Bonds \$ _____ \$ _____

5. Real property \$ _____ \$ _____

6. Personal property \$ _____ \$ _____

7. Other \$ _____ \$ _____

Does anyone live with you? Yes No

If so please list there name: _____

Do they contribute to your expenses? (rent, food, etc.) If so please list what and how much:

ANY OTHER SOURCES OF INCOME NOT MENTION PLEASE LIST:

ANY OTHER EXPENSES NOT MENTIONED PLEASE LIST

Bring copies of all sources of income and expenses on your next appointment.

This must be attached to your response or petition.

Income: Last 3 month pay stubs, last year tax return- W2's, any other income you receive (last two months), investment income, self employment income, assets, disability, public assistance, spousal support, partner support, pension, retirement, social security, unemployment, workers compensation, military payments, rental property income, stocks, bonds, any and all other income sources. **Expenses:** medical, dental, health care premiums, child support for other children, spousal support, necessary job related expenses – not reimbursed by employer, any and all other expenses.

THERE MAYBE MORE QUESTIONS WE NEED TO ASK YOU BASED ON YOUR ANSWERS IN THIS QUESTIONNAIRE. THIS IS A SHORTENED VERSION TO ASK YOU THE MOST COMMON AND RELEVANT QUESTIONS.