



PETROFF LAW OFFICES, LLC

Ronald R. Petroff – Managing Partner
Erika M. Smitherman – Partner

Chris L. Trolinger - Senior Associate

Michelle J. Askins - Associate

CLIENT INTERVIEW FORM – PRENUPTIAL AGREEMENT

At Petroff Law Offices, we pride ourselves on giving each client a comprehensive and personalized consultation experience. This often necessitates a thorough review of the details of your case, and our attorneys wish to provide you with the best legal advice given the circumstances of your matter. Please complete as much of the below questionnaire as time allows in advance of your consultation. In the event that the questionnaire cannot be completed prior to the consultation, it can be submitted when you are ready to proceed with your case.

140 East Town Street, Suite 1070 · Columbus, OH 43215 · Tel: (614) 222-4288 · Fax: (614) 222-4289

Ronald R. Petroff - RRP@Petrofflawoffices.com
Chris L. Trolinger - CTL@Petrofflawoffices.com

Erika M. Smitherman - EMS@Petrofflawoffices.com
Michelle J. Askins - MJA@Petrofflawoffices.com

I. Client and Fiancé(e) Information

General Information:

Client

Fiancé(e)

Full Legal Name _____

Full Legal Name _____

Home Address _____

Home Address _____

City, State, Zip _____

City, State, Zip _____

Telephone (cell) _____

Telephone (cell) _____

Email address _____

Email address _____

Social Security Number _____

Social Security Number _____

Date of Birth / Age _____

Date of Birth / Age _____

Prior Relationship Information:

How many times were you married prior to this marriage? _____

How many times were you married prior to this marriage? _____

Dates of prior marriage _____

Dates of prior marriage _____

Are you paying spousal support? _____

Are you paying spousal support? _____

Are you paying/receiving child support? _____

Are you paying/receiving child support? _____

II. Information Concerning The Marriage

Anticipated Date of Marriage _____

Place of Marriage (city, state) _____

Will Wife be changing her name? If so, what is the name? _____

III. Children of Other Marriages/Relationships

Client's children and dates of birth:

Fiancé(e)'s children and dates of birth:

IV. Property

A. Client's Real Estate

Address _____ Present Fair Market Value _____

Name on Title _____ Purchase Price _____

First Mortgage Lender _____ Balance on First Mortgage _____ Monthly Payment _____

Second Mortgage Lender _____ Balance on Second Mortgage _____ Monthly Payment _____

B. Fiancé(e)'s Real Estate

Address _____ Present Fair Market Value _____

Name on Title _____ Purchase Price _____

First Mortgage Lender _____ Balance on First Mortgage _____ Monthly Payment _____

Second Mortgage Lender _____ Balance on Second Mortgage _____ Monthly Payment _____

C. Residence where you and your fiancé(e) will reside: _____

D. Please list all property and debts titled to you individually and your fiancé(e) individually.

The items listed below will retain their separate property identity during the marriage and the other spouse shall not be entitled to any growth in value of the same.

Category	Description (List who has possession) (Include model and year of automobiles, trucks, motorcycles, boats, motors, motor homes, etc.)	Titled To	Value/Date of Value
1. Vehicles and Other Certificate of Title Property		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
	1. _____		_____
		<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
	2. _____		_____

3.			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
4.			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____

**2. Financial Accounts
(Name of Bank, etc.)**

Description
(Include checking, savings, CDs,
POD accounts, money market
accounts, etc.)

Titled To

Value/Date of Value

1.			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
2.			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
3.			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
4.			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____

**3. Pensions &
Retirement plans**

(Include profit-sharing, IRAs,
401k plans, etc.; Describe each
type of plan)

Titled To

Value/Date of Value

1.			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
2.			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____

**4. Publicly Held
Stocks, Bonds,
Securities & Mutual
Funds**

Description

Titled To

Value/Date of Value

1.			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____
2.			<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____ _____

5. Closely Held Stocks & Other Business Interests and Name of Company

(Type of ownership and number)

Titled To

Value/Date of Value

1.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
2.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
	_____	_____		_____

7. Furniture & Appliances

(Estimate value of those in your possession, and value of those in your spouse's possession)

Titled To

Value/Date of Value

1.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
2.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
3.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
	_____	_____		_____
4.	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
	_____	_____		_____

8. Any Other Assets Not Listed Above

Explanation: List any item you have not listed above that is considered an asset.

Titled To

Value/Date of Value

_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____
_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Both	\$ _____

9. Secured Debt (Mortgages, Car, etc.)	Name of Creditor/Purpose of Debt	Account Name	Name(s) on Account	Total Debt Due	Monthly Payment
1. _____	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
2. _____	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
3. _____	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
4. _____	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
5. _____	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____

10. Unsecured Debt, including credit cards	Name of Creditor/Purpose of Debt	Account Name	Name(s) on Account	Total Debt Due	Monthly Payment
1. _____	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
2. _____	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
3. _____	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
4. _____	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____
5. _____	_____	_____	<input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Joint	\$ _____	\$ _____

V. Spousal Support

Are you and your fiancé(e) releasing and discharging the other from any and all rights or claims of any kind as it pertains to spousal support which may in any manner arise or accrue by virtue of the Marriage? _____

VI. Other

Please provide any other detail or comments as it pertains to any discussions or agreements reached between you and your fiancé(e). _____

Please review the below list of suggested items our firm will require should you choose to move forward with your matter.

___ Client and future spouse income tax returns for the last three years

___ Client and spouse pay-stubs for the last three months and most current year-end paystub

___ Client and spouse financial account statements (current statements – checking, savings, retirement, money market, investment/brokerage and other financial accounts) for the last three months

___ Client and spouse debt account statements (current statements – loans, credit cards, store cards and any other debts owed) for the last three months

140 East Town Street, Suite 1070 · Columbus, OH 43215 · Tel: (614) 222-4288 · Fax: (614) 222-4289

Ronald R. Petroff - RRP@Petrofflawoffices.com
Chris L. Trolinger - CTL@Petrofflawoffices.com

Erika M. Smitherman - EMS@Petrofflawoffices.com
Michelle J. Askins - MJA@Petrofflawoffices.com

___ Home mortgage promissory note, related closing documentation, and most recent real estate appraisal

___ Kelly Blue Book value of current vehicles

140 East Town Street, Suite 1070 · Columbus, OH 43215 · Tel: (614) 222-4288 · Fax: (614) 222-4289

Ronald R. Petroff - RRP@Petrofflawoffices.com
Chris L. Trolinger - CTL@Petrofflawoffices.com

Erika M. Smitherman - EMS@Petrofflawoffices.com
Michelle J. Askins - MJA@Petrofflawoffices.com