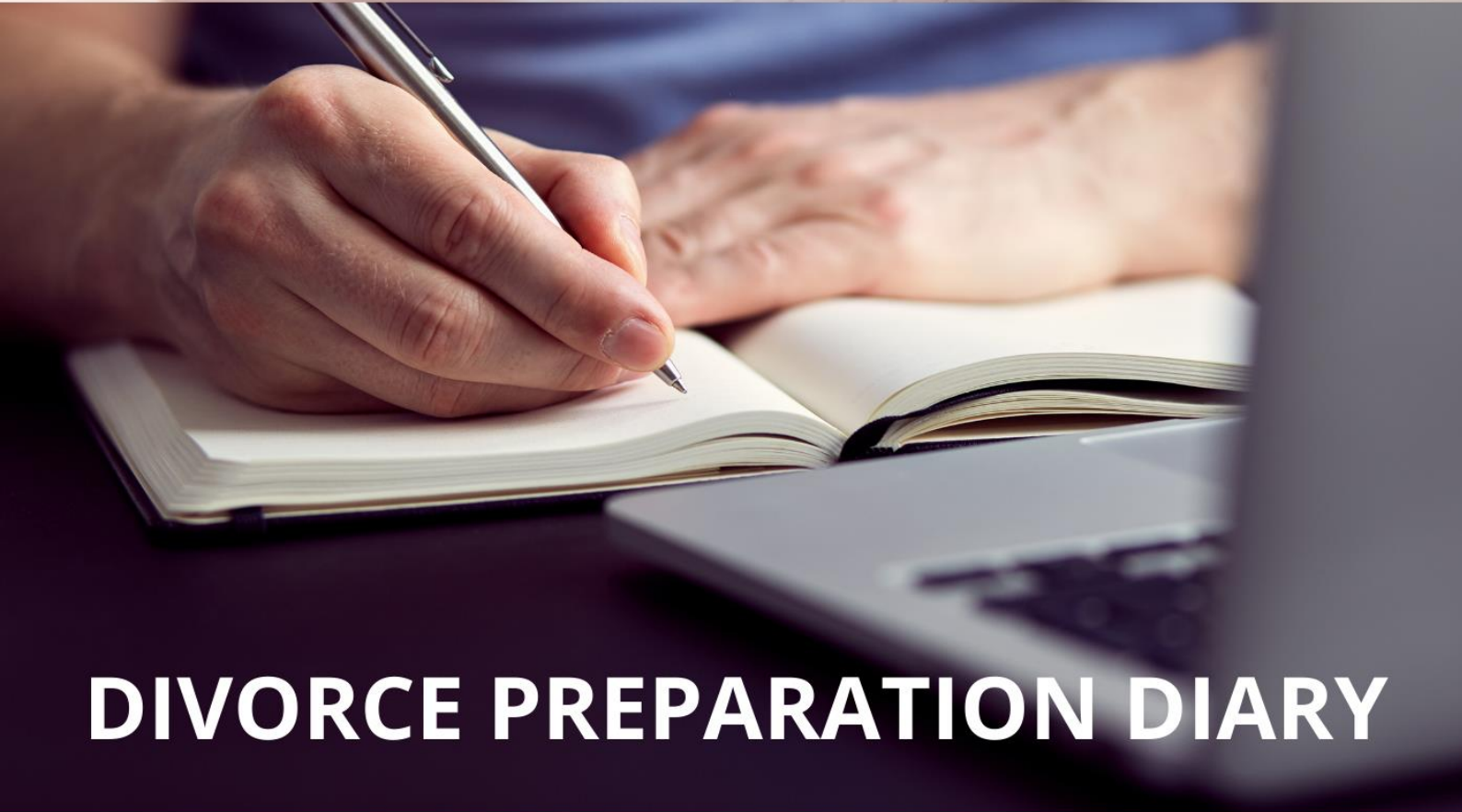




**DIVORCE PREPARATION DIARY**

**GETTING DIVORCED IN ISRAEL**

**ATTORNEY JAY HAIT**

## LEGAL DISCLAIMER

This ebook provides general information about family law matters and is not intended to substitute for direct legal advice. The content reflects laws current as of November 2024 but may not account for recent changes in legislation or case law.

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- Laws vary by jurisdiction and change over time
- Success in one case does not guarantee similar results
- Consulting a qualified attorney for your specific situation is essential

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## Why You Should Use This Diary

You wouldn't be here, and you wouldn't have received this booklet if you and your spouse were happy in your marriage. You may have already decided to get divorced, or you may just be thinking about getting divorced. No matter what the case, you need information – either information to prepare properly for divorce or information to help you evaluate whether or not divorce is the correct path for you.

We always tell people – we hope that divorce is not the correct path for them and that things can be worked out. However, we realize that many times this simply is not possible.

We have prepared this diary to help you to gather the information required for you to make the right decisions in either scenario.

As a complementary service to all of our clients, we store diary pages pending any legal filings we do on their behalves.

To utilize the service, once you become a client you can scan your filled out diary pages and ask your legal team where they would like you to send them to. If possible, please keep the information legible.

## Using This Diary

First – don't let the diary overwhelm you. Remember – it is a tool to help you and not a homework assignment that must be totally filled out and within a given timeline.

The diary is divided into four sections.

**Section One** is a place to gather vital information: about you, about your spouse, about your family members. These are the dry but necessary facts that anybody considering getting divorced in Israel has to deal with.

**Section Two** is a daily diary of events that happen before you (or your spouse) has taken the initial legal steps towards divorce or other disposition of the marriage by filing a "בקשה ליישב סכסוך" – (bakasha leyush sichsuh) a motion to settle disputes/differences – which starts the legally mandated "mediation" process required before filing divorce suits. In this section you can detail events that happen – arguments with your spouse, meetings or calls with social workers, police, school representatives, etc.

**Section Three** is similar to section two but is for the period after any legal proceedings have begun – i.e. after one of you has filed the motion to settle differences.

Finally, **Section Four** is the financial section of the diary. It covers assets and debts you may have, salaries, what your monthly expenses are, etc.

The goal behind the diary is both to empower you by helping you to gather the information you need to make an informed decision, and to enable you to, in an organized manner, gather the information that will be required if you do get divorced.

Remember, we have made this diary as a tool for you. This diary is yours and it is for your own personal use. Nobody else will ever see this diary unless you want them too.

Fill in the sections as you want, when you want, and remember that they are best used as a release for when pressure strikes you. Don't let filling in the sections become a burden.

## Section One: Personal Details

We recommend that you fill out this section prior to filing the motion to settle disputes.

Information about "You" as a couple:

|                                                                                                                               |                                    |
|-------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| Your information                                                                                                              | Your spouse's information          |
| Full name:                                                                                                                    | Full name:                         |
| Israeli ID number (Teudat Zehut):                                                                                             | Israeli ID number (Teudat Zehut):  |
| Date of birth:        /        /                                                                                              | Date of birth:        /        /   |
| Mobile phone number:<br>(        )                                                                                            | Mobile phone number:<br>(        ) |
| Religion:                                                                                                                     | Religion (if different):           |
| Where the marriage took place:                                                                                                |                                    |
| Date of marriage:                                                                                                             |                                    |
| Address:                                                                                                                      |                                    |
| Spouse's address if you live separately:                                                                                      |                                    |
| Do you have children?<br>How many?<br>Ages?                                                                                   |                                    |
| Main issues of contention between you and your spouse (for example, spousal affairs, differing levels of religious practice): |                                    |



## Information about your children:

|                 |                                                            |
|-----------------|------------------------------------------------------------|
| Name:           | Special Notes (medical, psychological, educational, etc.): |
| ID number (TZ): |                                                            |
| Date of birth:  |                                                            |
| Sex:            |                                                            |
| School:         |                                                            |

|                 |                                                            |
|-----------------|------------------------------------------------------------|
| Name:           | Special Notes (medical, psychological, educational, etc.): |
| ID number (TZ): |                                                            |
| Date of birth:  |                                                            |
| Sex:            |                                                            |
| School:         |                                                            |

|                 |                                                            |
|-----------------|------------------------------------------------------------|
| Name:           | Special Notes (medical, psychological, educational, etc.): |
| ID number (TZ): |                                                            |
| Date of birth:  |                                                            |
| Sex:            |                                                            |
| School:         |                                                            |

|                 |                                                            |
|-----------------|------------------------------------------------------------|
| Name:           | Special Notes (medical, psychological, educational, etc.): |
| ID number (TZ): |                                                            |
| Date of birth:  |                                                            |
| Sex:            |                                                            |
| School:         |                                                            |

|                 |                                                            |
|-----------------|------------------------------------------------------------|
| Name:           | Special Notes (medical, psychological, educational, etc.): |
| ID number (TZ): |                                                            |
| Date of birth:  |                                                            |
| Sex:            |                                                            |
| School:         |                                                            |

|                 |                                                            |
|-----------------|------------------------------------------------------------|
| Name:           | Special Notes (medical, psychological, educational, etc.): |
| ID number (TZ): |                                                            |
| Date of birth:  |                                                            |
| Sex:            |                                                            |
| School:         |                                                            |

|                 |                                                            |
|-----------------|------------------------------------------------------------|
| Name:           | Special Notes (medical, psychological, educational, etc.): |
| ID number (TZ): |                                                            |
| Date of birth:  |                                                            |
| Sex:            |                                                            |
| School:         |                                                            |

|                 |                                                            |
|-----------------|------------------------------------------------------------|
| Name:           | Special Notes (medical, psychological, educational, etc.): |
| ID number (TZ): |                                                            |
| Date of birth:  |                                                            |
| Sex:            |                                                            |
| School:         |                                                            |

## Section Two: Documenting Events

In this section you should be filling in important information of altercations, social interactions, police, social worker, school (for your children), and other events that either gave or give you a hard time emotionally or physically, or which you think may have relevance if you get divorced.

These events may or may not directly involve your spouse.

You should be filling out this section even before either of you have filed any legal papers.



|                                                          |               |
|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
|                                                          |               |
|                                                          |               |
|                                                          |               |
|                                                          |               |
| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
|                                                          |               |
|                                                          |               |
|                                                          |               |
| Other information:                                       |               |
|                                                          |               |



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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
|                                                          |               |
|                                                          |               |
|                                                          |               |
| Other information:                                       |               |
|                                                          |               |

## Section Three: After Legal Proceedings Have Begun

In this section you should continue filling in important information of altercations, social interactions, police, social worker, school (for your kids), and other events that either gave you a hard time emotionally or physically, or which you think may have relevance if you get divorced. These events may or may not directly involve your spouse. You should be filling out this section after legal proceedings have begun.

Date בקשה ליישב סכסוך (Motion to settle disputes/differences) filed:

---

Who filed (you or your spouse)?

---

Where was it filed (i.e. what court and what city)

---

If your spouse file first, and filed with an attorney, what is the attorney's name, address, and phone number?

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When is your initial mediation date?

---

Where and with whom is your initial mediation date? (include telephone number as well)

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|                                                          |               |
|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
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| Description of the event:                                |               |
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| Aftermath / Results of the event:                        |               |
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| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
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| Description of the event:                                |               |
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| Aftermath / Results of the event:                        |               |
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| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
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| Description of the event:                                |               |
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| Aftermath / Results of the event:                        |               |
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| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
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| Description of the event:                                |               |
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| Aftermath / Results of the event:                        |               |
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| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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| Other information:                                       |               |
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|----------------------------------------------------------|---------------|
| Date and Time:                                           |               |
| Location:                                                |               |
| Parties involved:                                        |               |
| Name:                                                    | Role:         |
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| Significant moments and/or factors leading to the event: |               |
| Description of the event:                                |               |
| Aftermath / Results of the event:                        |               |
| Files relating to the event:                             |               |
| File name and type                                       | File location |
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|                                                          |               |
|                                                          |               |
| Other information:                                       |               |
|                                                          |               |

## Section Four: Important Financial Information

In this section you should fill in important financial information. Remember, if you and your spouse divorce, it's not just that you won't be living together anymore, you will be re-ordering and separating your financial lives.

It is very important to have all of this information both to make an informed decision, and to make a strategy to maximize your position during this financial separation. Many times you will not know this information – but you can bet dollars to donuts that after divorce proceedings are initiated it will be much harder to find – so it is in your interest to fill in this section as early as possible.

### Work related information:

|                                                                                      |                                                                                               |
|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| Your place of work (if any):                                                         | Your spouse's place of work (if any):                                                         |
| Your monthly salary:                                                                 | Your spouse's monthly salary:                                                                 |
| Value of your pension fund (if any):                                                 | Value of your spouse's pension fund (if any):                                                 |
| Value of your kupaṭ gemel or any other work related savings / pension fund (if any): | Value of your spouse's kupaṭ gemel or any other work related savings / pension fund (if any): |

Other notes:

## Asset Related Information

Your home:

|                           |      |          |                                                  |
|---------------------------|------|----------|--------------------------------------------------|
| Home Address:             |      |          | If owned, when did you purchase your home?       |
| If owned, purchase price? |      |          | If owned, owned equally?                         |
| Mortgage? How much?       |      |          | Gifts given towards purchase?                    |
| Block:                    | Lot: | Sub-lot: | Owned / Rented / Long term lease (חכירה) / other |

Any other relevant information?

## Other Real Estate

|                 |      |          |                                                            |
|-----------------|------|----------|------------------------------------------------------------|
| Address:        |      |          | When purchased?                                            |
| Purchase Price? |      |          | Percentages of ownership in Israel Lands Authority (Tabu)? |
| Block:          | Lot: | Sub-lot: | Owned / Rented / Long term lease (חכירה) / other           |

|                 |      |          |                                                            |
|-----------------|------|----------|------------------------------------------------------------|
| Address:        |      |          | When purchased?                                            |
| Purchase Price? |      |          | Percentages of ownership in Israel Lands Authority (Tabu)? |
| Block:          | Lot: | Sub-lot: | Owned / Rented / Long term lease (חכירה) / other           |

|                 |      |          |                                                            |
|-----------------|------|----------|------------------------------------------------------------|
| Address:        |      |          | When purchased?                                            |
| Purchase Price? |      |          | Percentages of ownership in Israel Lands Authority (Tabu)? |
| Block:          | Lot: | Sub-lot: | Owned / Rented / Long term lease (חכירה) / other           |

## Other Asset Information

### Vehicles

|               |       |             |             |
|---------------|-------|-------------|-------------|
| Manufacturer: | Year: | License No. | How titled? |
| Manufacturer: | Year: | License No. | How titled? |
| Manufacturer: | Year: | License No. | How titled? |
| Manufacturer: | Year: | License No. | How titled? |

### Bank / Financial Accounts

| Institution/Name of Bank: | Branch: | Address: | Account: | Joint or Individual? | Balance: |
|---------------------------|---------|----------|----------|----------------------|----------|
|                           |         |          |          |                      |          |
|                           |         |          |          |                      |          |
|                           |         |          |          |                      |          |
|                           |         |          |          |                      |          |
|                           |         |          |          |                      |          |
|                           |         |          |          |                      |          |

Start collecting two years of bank statements

Other Assets:

**Debts/loans:**

## Monthly Household Expenses

\* You will have to bring proof of these things – so start copying and collecting receipts for up to six months.

\*\* Fill in amounts and to whom paid, and other information you feel to be relevant.

### Health related

|                        | Amount | To whom paid | Other |
|------------------------|--------|--------------|-------|
| Additional Insurances: |        |              |       |
|                        |        |              |       |
|                        |        |              |       |
|                        |        |              |       |
| Medications:           |        |              |       |
|                        |        |              |       |
|                        |        |              |       |
|                        |        |              |       |
|                        |        |              |       |
| Private Doctors:       |        |              |       |
|                        |        |              |       |
|                        |        |              |       |



|         |  |  |  |
|---------|--|--|--|
|         |  |  |  |
|         |  |  |  |
| Dental: |  |  |  |
|         |  |  |  |
|         |  |  |  |
|         |  |  |  |
|         |  |  |  |

## Housing related

|                                         | Amount | To whom paid | Other |
|-----------------------------------------|--------|--------------|-------|
| Rent/ mortgage:                         |        |              |       |
| Insurance:<br>Structure<br><br>Contents |        |              |       |
| Water:                                  |        |              |       |
| Arnona (property tax):                  |        |              |       |
| Vaad Bayit:                             |        |              |       |
| Electric:                               |        |              |       |
| Gas:                                    |        |              |       |
| Cable:                                  |        |              |       |
| Internet:                               |        |              |       |
| House phone:                            |        |              |       |
| Cell phones:                            |        |              |       |
|                                         |        |              |       |
|                                         |        |              |       |
| Repairs:                                |        |              |       |
|                                         |        |              |       |
|                                         |        |              |       |
|                                         |        |              |       |
|                                         |        |              |       |
|                                         |        |              |       |

### Transportation related

|                                             | Amount | To whom paid | Other |
|---------------------------------------------|--------|--------------|-------|
| Car payments:                               |        |              |       |
| Gas / petrol:                               |        |              |       |
| Insurance:<br>Compulsory:<br>Comprehensive: |        |              |       |
| If no car – taxis,<br>buses etc.:           |        |              |       |

### Educational expenses

|                                   | Amount | To whom paid | Other |
|-----------------------------------|--------|--------------|-------|
| Payments to school (non-tuition): |        |              |       |
|                                   |        |              |       |
|                                   |        |              |       |
|                                   |        |              |       |
| Tuition:                          |        |              |       |
|                                   |        |              |       |
|                                   |        |              |       |
|                                   |        |              |       |
| Tutoring:                         |        |              |       |
|                                   |        |              |       |
| Books and materials:              |        |              |       |
|                                   |        |              |       |
| Special education:                |        |              |       |
|                                   |        |              |       |

|                                                     |  |  |  |
|-----------------------------------------------------|--|--|--|
| Chugim (after-school activities):                   |  |  |  |
|                                                     |  |  |  |
| Gan (preschool):                                    |  |  |  |
|                                                     |  |  |  |
| Babysitter:                                         |  |  |  |
|                                                     |  |  |  |
| After school care (moadon, tinokia, tzaharon etc.): |  |  |  |
|                                                     |  |  |  |
|                                                     |  |  |  |

### Miscellaneous

|                  | Amount | To whom paid | Other |
|------------------|--------|--------------|-------|
| Fitness centres: |        |              |       |
|                  |        |              |       |
| Cosmetics:       |        |              |       |
|                  |        |              |       |
| Cleaning help:   |        |              |       |
|                  |        |              |       |
| Cinema, theatre: |        |              |       |
|                  |        |              |       |
| Restaurants:     |        |              |       |
|                  |        |              |       |
| Travel abroad:   |        |              |       |
|                  |        |              |       |



|                             |  |  |  |
|-----------------------------|--|--|--|
| Hotel stays etc. in Israel: |  |  |  |
|                             |  |  |  |
| Subscriptions:              |  |  |  |
|                             |  |  |  |
| Insurances:                 |  |  |  |
|                             |  |  |  |
| Others:                     |  |  |  |
|                             |  |  |  |
|                             |  |  |  |
|                             |  |  |  |

**Additional notes:**



Sure, divorce sucks. But being in a bad marriage is even worse—for you, your spouse, and your kids.

Licensed in both Israel and New York, I have been practicing law in the U.S. and Israel for over twenty years. In addition, I am a certified mediator. I made Aliyah with my family in 2004, maintaining my securities practice in New York by flying back and forth between the two countries.

Unfortunately, I went through a divorce myself. I know how it feels. I went through litigation in both the United States and Israel. I was eventually awarded custody of my three minor children. My personal experience with the legal system in Israel, coupled with knowing there was a better way to navigate family law issues, motivated me to open a practice in Israel focusing exclusively on family law.

The primary focus of my firm was originally on representing clients in divorce. While I have always assisted with wills and estates, I saw through my own parents' Aliyah experience that much more was needed to support those who were looking to protect their assets and lifestyle while planning their futures in Israel. As a result, I opened a new Elder Law Division of my family law practice. This area of my practice, which focuses on wills, estates, and continuing powers of attorney, allows me to represent older clients with the unique understanding of their needs and concerns.

I believe my patience and compassion, along with my personal experience, extensive knowledge of Western law, and deep understanding of the intricate Israeli family law system, have given me a unique set of skills to help my clients through divorce or planning for retirement.

**I hope that this diary has been helpful to you, no matter what direction you elect to go.**

**If possible, please keep the information legible in case you need to send it to our office.**

**Jay Hait Adv.  
Hait Family Law**

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