MONTANA _____ JUDICIAL DISTRICT COURT
_____ COUNTY

The Marriage of: _____, Petitioner (*Wife's Name),* and _____, Petitioner (*Husband's Name)*	Cause No.: _____ **Findings of Fact, Conclusions of Law and Final Decree of Dissolution**

The Joint Petition for Dissolution, filed herein on the _____ day of _____, 20___, came for hearing this ____ day of _____, 20___. The Petitioner, _____, appeared pro se.

After considering all evidence and pleadings, the Court finds:

FINDINGS OF FACT

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1. The Petitioners, _____ ("Wife") and _____ ("Husband") have both signed a Joint Petition for Dissolution.

2. Choose One:

   [ ] The parties were married on (*date*): _____. The marriage was registered in the County of _____, State of _____.

   [ ] The parties were married at common law. The parties assumed a marital relationship by mutual consent and agreement and confirmed their marriage by cohabitation and public repute.

3. Choose One:

   [ ] The parties separated on (*date*): _____.

   [ ] The parties are not yet separated.

4. Choose One:

   [ ] The marriage is irretrievably broken in that there is serious marital discord which adversely affects the attitude of one of the parties towards the marriage, and there is no reasonable prospect of reconciliation.

   [ ] The marriage is irretrievably broken in that the parties have lived separate and apart for a period of more than one hundred eighty (180) days preceding the commencement of these proceedings, and there is no reasonable prospect of reconciliation.

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5. The conciliation provisions of the Montana Conciliation law and M.C.A. § 40-4-107 do not apply.

6. At least one of the Petitioners has been domiciled within the state of Montana for at least ninety (90) days prior to the filing of this action.

7. There is / are _____ child(ren) of the marriage as follows:

   Full name _____ Date of Birth: _____

   Address _____

   Full name _____ Date of Birth: _____

   Address _____

   Full name _____ Date of Birth: _____

   Address _____

   Full name _____ Date of Birth: _____

   Address _____

   Full name _____ Date of Birth: _____

   Address _____

   If needed, attach additional sheets as Exhibit _____.

8. Choose One:

   [ ] The child(ren) has/have lived in Montana for at least six consecutive months immediately before the start of this proceeding. If a child is less than six months old, the child has lived in Montana since his/her birth.

   [ ] Montana was the home state of the child(ren) within six months of the start of this proceeding, and one parent continues to reside in Montana.

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[ ] The child(ren) and one parent have had significant connections to Montana, and substantial evidence about them is available here.

[ ] The child(ren) is/are physically present in Montana, and the child(ren) has/have been abandoned or an emergency exists requiring the child(ren)'s protection.

9. The wife is not pregnant with a child of this marriage.

10. Both Petitioners have signed and filed a Proposed Parenting Plan that has been presented to this Court for examination and approval.

11. Choose One:

[ ] Child support in the amount of $ _____ per month per child has been established by the Montana Child Support Enforcement Division or another appropriate administrative agency or court. A copy of this Order is attached hereto as Exhibit _____.

or

[ ] The [ ] Wife / [ ] Husband needs financial assistance from the [ ] Wife / [ ] Husband to support the minor child(ren). Child support calculated according to the Montana Child Support Guidelines is $ _____ per month per child. A copy of the Montana Child Support Guidelines worksheet is attached hereto as Exhibit_____.

12. Choose One:

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[ ] A Medical Support Order has been established by the Montana Child Support Enforcement Division or another appropriate administrative agency or court. A copy of this Order is attached hereto as Exhibit _____.

or

[ ] Medical support is needed to cover the medical and dental expenses of the minor child(ren) of the parties. Choose All That Apply:

[ ] The child(ren) are presently covered under the following insurance plan:
Carrier Name: _____
Policy No.: _____

[ ] The child(ren) is a/are recipient(s) of medical assistance under Title XIX of the federal Social Security Act (Medicaid).

[ ] The child(ren) is/are not covered under an existing insurance plan.

13. Choose One:

[ ] The Department of Public Health and Human Services is not providing services to the parties or minor child(ren) of the parties under the provisions of Title IV-D of the Social Security Act.

[ ] The Department of Public Health and Human Services is providing services to the parties or minor child(ren) of the parties under the provisions of Title IV-D of the Social

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Security Act. The Montana Child Support Enforcement Division and the Office of the Attorney General were served with copies of the Petition in this action. Both offices acknowledged service, copies of which are filed with the Court.

[ ] This action does not establish, enforce, or modify the parties' previously established child support order.

14. The Petitioners have waived the exchange of preliminary declarations of disclosure.

15. The Petitioners have complied with the final disclosure requirements of M.C.A. §§ 40-4-253 and 40-4-254.

16. Choose One:

[ ] The parties do not own any real property.

[ ] The [ ] Wife / [ ] Husband / [ ] both parties is/are the owner(s) of record of real property located at

The legal description of the property is

17. Choose One:

[ ] The parties do not own any vehicles.

[ ] The parties own _____ vehicle(s).

18. The parties have accumulated household furnishings and other personal property during the course of their marriage. The personal property of the parties [ ] has not / [ ] has already been divided.

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19. Choose One:

[ ] There are no debts of the marriage.

[ ] The parties have accumulated debts during the course of their marriage.

20. Choose One:

[ ] The wife would like to be restored to her former name of _____.

[ ] The wife does not want to be restored to her former name.

21. Other Provisions:

22. All of the other allegations of the Petitioners' complaint not inconsistent herewith are true, and the relief requested should be granted.

FROM the above Findings of Fact, the Court makes the following:

CONCLUSIONS OF LAW

1. The Court has jurisdiction over this cause.
2. The marriage of the parties is irretrievably broken.

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3. The Petitioners' Proposed Parenting Plan, filed separately, is in the best interest(s) of the minor child(ren) and should be incorporated as the Final Parenting Plan into this Decree.

4. Choose One:

   [ ] The previously established Child Support Order attached hereto as Exhibit _____ is a valid order for the child support of the minor child(ren) of the parties.

   or

   [ ] The [ ] Wife / [ ] Husband is entitled to $ _____ per month per child as child support to be paid according to the provisions of the final Child Support Order, as stated below.

5. Choose One:

   [ ] The previously established Medical Support Order attached hereto as Exhibit _____ is a valid order for the medical support of the minor child(ren) of the parties.

   or

   [ ] The best interest(s) of the minor child(ren) require medical coverage according to the provisions of the final Medical Support Order, as stated below.

6. Based on the duration of the marriage and on the parties' age, health, education, skills, and financial circumstances, the Petitioners' proposed division of property and debts is equitable.

7. If requested, the wife should be restored to her former name.

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Other Provisions:

FROM the above Findings of Fact and Conclusions of Law, the Court orders the following:

DECREE OF DISSOLUTION OF MARRIAGE

1. The marriage of the parties is hereby dissolved.
2. The Final Parenting Plan signed by this Court on this _____ day of _____, 20____ is hereby adopted and made an integral part of this Decree. The parties are ordered to perform the provisions of the Final Parenting Plan.
3. Choose One:

   [ ] The parties do not own any real property.

   [ ] The [ ] Wife / [ ] Husband is hereby granted all right, title, and interest in the real property located at

   , with legal description of

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The [ ] Wife / [ ] Husband shall transfer his/her interest in this real property to the [ ] Wife / [ ] Husband.

or

[ ] *Describe the proposed distribution of the real property*:

If needed, attach additional sheets as Exhibit _____.

4. Choose One:

[ ] The parties do not own any vehicles.

or

[ ] The parties' vehicle(s) shall be distributed as follows (*Please include the year, make, and model for each vehicle listed.*):

a. The Wife is awarded all right, title and interest in following vehicle(s):

Vehicle: _____ VIN#: _____

Vehicle: _____ VIN#: _____

Vehicle: _____ VIN#: _____

b. The Husband is awarded all right, title, and interest in the following vehicle(s):

Vehicle: _____ VIN#: _____

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Vehicle: _____ VIN#: _____

Vehicle: _____ VIN#: _____

c. The parties shall transfer all right and title in said vehicle(s) to the appropriate party. If either party fails to transfer such right and title in the vehicle(s) within twenty (20) days from the date of this Decree, the registrar of Motor Vehicles of the State of Montana is hereby ordered to issue sole title to the party awarded said vehicle(s) upon receipt of a certified copy of this Decree.

If needed, attach additional sheets as Exhibit_____.

5. Choose One:

[ ] Each party is hereby granted the exclusive right and title to the personal property currently in his or her possession.

or

[ ] Each party is hereby granted the exclusive right and title to the following personal property:

To Wife:

To Husband:

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If needed, attach additional sheets as Exhibit _____.

6. Choose One:

[ ] There are no debts of the marriage.

[ ] The parties have accumulated debts during the course of their marriage. Each party shall be responsible for the debts currently in his or her name.

or

[ ] The parties have accumulated debts during the course of their marriage. The responsibility for the debts shall be distributed as follows:

To Wife:

Description of Debt	**Creditor**	**Current Balance**	**Amount to Wife**

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Description of Debt	Creditor	Current Balance	Amount to Wife

Any and all other debts in Wife's name only; any and all other debts incurred solely by the Wife since the parties' separation.

To Husband:

Description of Debt	Creditor	Current Balance	Amount to Husband

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Any and all other debts in the Husband's name only; any and all other debts incurred solely by the Husband since the parties' separation.

If needed, attach additional sheets as Exhibit _____.

7. Each party is ordered to execute any and all documents which now or in the future may be necessary to carry into full force and effect the terms and conditions of this Decree.

8. Choose One:

   [ ] The wife's name is restored to _____.

   [ ] The wife's name is not restored to her former name.

9. Choose One:

   [ ] The Court acknowledges that a valid Child Support and Medical Support Order has already been established by the Montana Child Support Enforcement Division or another appropriate administrative agency or court. A copy of this Order is attached hereto. (*Skip to Number 10.*)

   or

   [ ] The Court adopts the following Child Support Order and Medical Support Order for the support of the minor child(ren) of the parties:

Child Support Order

a. The [ ] Wife / [ ] Husband shall pay the [ ] Wife / [ ] Husband $ _____ per month per child.

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b. The first payment is due the _____ day of _____, 20_____. Payments shall continue until such time as each child reaches the age of 18 years and has completed high school, or attained the age of 19 years, or is emancipated by court order, whichever shall first occur.

c. On or before the first of every month, payments should be made to (Choose One):

[ ] The Child Support Enforcement Division. Immediate income withholding is appropriate. The [ ] Wife's / [ ] Husband's income is subject to immediate income withholding under M.C.A. Title 40, Chapter 5, Parts 3 and 4.

[ ] The [ ] Wife / [ ] Husband. This Child Support Order shall be exempt from immediate income withholding because:

[ ] The Clerk of this Court. This Child Support Order shall be exempt from immediate income withholding because:

WARNING: If a parent is delinquent in payments, that parent's income may be subject to income withholding procedures under

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MCA Title 40, Chapter 5, without need for any further action by the Court. Support is delinquent when it is 8 days overdue.

d. Whenever the case is receiving services under Title IV-D of the Social Security Act, support payments must be paid through the Department of Public Health and Human Services Child Support Enforcement Division as provided in M.C.A. § 40-5-909.

e. This order is subject to review and modification by the Department of Public Health and Human Services upon the request of the Department or a party under M.C.A. §§ 40-5-271 through 40-5-273, when the Department is providing services for enforcement under Title IV-D of the Social Security Act.

f. The obligations to provide financial child support, provide medical care for a child, and provide or comply with parenting arrangements shall be independent of each other, and the failure or inability to provide one or more shall not reduce any other obligation.

g. Each party shall promptly inform the Court of any changes in the following information:

   (i) Name, social security number, mailing address, residential address, telephone number, and driver's license number; and

   (ii) Names, addresses, and telephone numbers of current employers.

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WARNING: In any subsequent child support enforcement action, on sufficient showing of diligent efforts to locate the party, due process requirements for notice and service may be met by delivering written notice by regular mail to the last address of the party or the party's employer reported to the Court.

Medical Support Order

Existing Coverage

Choose All That Apply:

[ ] The child(ren) are presently covered under the following insurance plan:

Carrier Name: _____

Policy No.: _____

The [ ] Wife / [ ] Husband shall continue to provide medical coverage through the plan as long as it is available at a reasonable cost, and as long as no other plan or individual insurance is available that will better serve the interests of the parties.

[ ] The child(ren) is a/are recipient(s) of medical assistance under Title XIX of the federal Social Security Act (Medicaid).

[ ] The child(ren) is/are not covered under an existing insurance plan.

Contingency Medical Support

If the minor child(ren) are either (i) covered by Medicaid, (ii) are not covered under an existing insurance plan, or (iii) if the

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existing coverage becomes no longer available, the following provisions shall apply:

a. The Wife shall provide medical coverage through individual insurance or a health benefit plan for the child(ren), as long as it is available at reasonable cost, and as long as no other plan or individual insurance is available that will better serve the interests of the parties.

b. The Husband shall provide medical coverage through individual insurance or a health benefit plan for the child(ren), as long as it is available at reasonable cost, and as long as no other plan or individual insurance is available that will better serve the interests of the parties.

c. If health benefit plans are available to both parties at a combined cost that is reasonable or cost-beneficial and with benefits that are complementary or compatible as primary and secondary coverage, both parties shall provide coverage for the child(ren).

d. Coverage is presumed to be available at reasonable cost if the cost of premiums does not exceed 25 percent of the obligated party's total child support obligation when calculated under the child support guidelines without credit for the medical support obligation.

e. If circumstances change and a party believes that corresponding changes in cost are not reasonable or

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cost-beneficial, the party may move to petition any appropriate tribunal for relief.

Duties of the Parties

a. The Wife shall be responsible for _____% and the Husband shall be responsible for _____% of all medical expenses of the minor child(ren), including the costs of the premium for coverage, all co-payments and deductibles required for coverage, and any uncovered medical expenses.

b. Each party shall promptly execute and deliver to the insurance provider all forms necessary to ensure the child(ren)'s continuous participation in insurance coverage. Each party shall timely submit claims for processing, verification, and payment. Each party shall provide the other party with identification cards or other methods for access to coverage.

c. If a party receives a reimbursement but did not pay the underlying bill, that party shall promptly pay over the proceeds to the proper party.

d. If the party responsible for providing medical insurance coverage for the child(ren) allows such coverage to lapse without securing a comparable replacement, that party shall be liable for all the child(ren)'s medical expenses and shall indemnify the other party, the Department of Public Health and Human Services, or any third-party

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custodian for the cost of obtaining medical coverage and medical expenses.

e. Any liability for unpaid medical costs and expenses may be entered as a judgment for unpaid support against the obligated party. A party may apply to the Court for expedited enforcement procedures.

f. If an obligated party fails to pay a required premium, the other parent, the Department of Public Health and Human Services, or the custodian may advance the cost of premiums and keep benefits continually in force for the child. The advance should be entered as a judgment for unpaid child support in favor of the advancing party and against the obligated parent.

g. The obligation to provide medical coverage for the child(ren) ceases only when the child support obligation ceases.

h. The costs of providing individual insurance or a health benefit plan may not be used as a direct offset to the child support obligation. However, as provided by the child support guidelines, the costs may be considered in making or modifying a child support order.

i. Each party shall promptly inform the Court of any changes in the following information:

(i) If the child(ren) is/are covered by a health or medical insurance plan, the name of the plan, the

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policy identification number, and the name(s) of the person(s) covered;

(ii) If the child(ren) is not/are not covered by a health or medical insurance plan, whether health insurance coverage for the child(ren) is available through the party's employer or other group, and, if so, whether the employer or other group pays any portion of the coverage premium.

j. A civil penalty not to exceed $25 per day may be imposed for an intentional violation of this medical support order or the provisions of M.C.A Title 40, Chapter 5, Part 8 or the regulations promulgated under that Part.

WARNING: **The obligations to provide medical care, provide financial child support, and provide or comply with visitation and custody arrangements are independent of each other, and the failure or inability to provide one or more does not reduce any other obligation.**

10. Other Provisions:

DATED this _____ day of _____, 20_____.

_____
DISTRICT COURT JUDGE

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