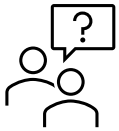
# How to File a Joint Petition for Dissolution of Marriage without Children

### Information Not Legal Advice

How to File a Joint Petition for Dissolution of Marriage without Children is information only. The information is not legal advice. This information is written based on Montana law and only applies to Dissolutions in Montana. The information is not guaranteed to be up to date. The information can't replace advice from an attorney.

**NEED HELP?** There are resources available.



**The Court Help Program.** The Court Help Program assists people representing themselves in court. There are Court Help Centers (sometimes called Self-Help Law Centers) located throughout the state to assist you on a walk-in basis and remote appointments are available if your local courthouse does not have a Court Help Center. Court Help staff are not lawyers and cannot provide legal advice. Staff are informed about the court process and can answer questions as well as review your forms for completeness. Find Court Help services near you: https://courts.mt.gov/SelfHelp/ or call 406-444-9300.

**Montana Legal Services Association.** Montana Legal Services Association provides free civil legal assistance to low-income Montanans. If you qualify, Montana Legal Services Association may be able to connect you with a variety of services. Visit www.MontanaLawHelp.org or call MLSA at 1-800-666-6899.

**State Bar of Montana.** If you are interested in hiring an attorney to advise or represent you, the State Bar Lawyer Referral Service has a list of attorneys all over Montana. The Lawyer Referral Service is available at www.montanabar.org.

## Are these forms right for me?

These forms are the right forms for you if you are married, do not have minor children from the marriage, and you agree on how your property should be divided.


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# What is the Process?

**NOTE:** The steps for filing for a dissolution may be slightly different in your judicial district. Check with the Clerk of District Court at your county courthouse for local requirements.

## STEP ONE: Exchange financial information.

Each spouse must exchange the **Disclosure of Income and Expenses MP-520** This is required by law. If you do not exchange this information, the Court may refuse to finalize your divorce. Or you could be forced to give your spouse anything that you failed to disclose.

When you start this case, an Automatic Economic Restraining goes into effect. This order limits what either person can do with money and property until the divorce is complete. The full rules for this law can be found in Montanan Code Annotated, §40-4-126.

## STEP TWO: File your completed forms at the Clerk of District Court.

Your completed forms are also called “court documents.” Court documents for a Dissolution are filed with the Clerk of District Court in the county where you or your spouse live.

Here is a list of the forms you complete and file with the Clerk of District Court to start your case. Together, these may be referred to as a “completed forms packet.”

Forms Checklist for the Clerk of District Court:



- □ **Statement of Inability to Pay Court Costs and Fees MP-001.** Use this form if you can’t afford to pay the court fees. This form may be different based on your local Court preferences, and you can contact a local Self-Help Law Center or Clerk of District Court for that information.
- □ **Joint Petition for Dissolution MP-122.** This is the formal request for the Court to dissolve your marriage**.**
- □ **Request for a Final Hearing on Joint Dissolution MP-122.1.**
- □ **Court Order on Hearing for Joint Dissolution MP-122.2.** (You will fill out only the header and the rest will be filled out by the Court)
- □ **Joint Proposed Property Distribution MP-521.** This is your proposal for dividing up your marital property. You and your spouse may have divided property already or have shared understanding on how things will be divided. All existing assets (land, vehicles, bank accounts, personal property, debts, etc.) must be approved by the Court.


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- □ **Decree of Joint Dissolution MP-722.** You will only fill out three parts: the header, K. Spousal Maintenance, and L. Previous Names. Leave the rest for the Court to complete once your marriage is dissolved.

Additional forms you need to complete and exchange between the spouses (but DO NOT file with the Court at this stage) are the **Joint Disclosure of Income and Expenses MP-520.**



Once the forms are completed, you can make copies of the full list of forms. Take the original forms to the Clerk of District Court office. The original set of forms will be kept by the Clerk of Court. You may keep official copies in a safe place. **DO NOT FILE** the **Disclosure of Income & Expenses MP-520**. Only exchange the **MP-520** Disclosure with your spouse.

## STEP THREE: Attend your final hearing.

You should receive a scheduling order within 120 days of filing with the Clerk of District Court. Attending your hearing is very important. This is when the Judge will make decisions on your case. If either party is unable to attend the hearing, they may file a *notarized* **MP-130 Consent to Entry of Decree**. If you requested to waive your hearing, you will want to obtain a copy of your final signed Decree of Dissolution **MP-722** from the Court. The Court will indicate that the proposed property distribution is final by signing the bottom of the forms.

Ask the Clerk of Court's office for a copy of your final Dissolution Decree and Property Distribution. You can make extra copies of your Decree and Property Distribution for banks and other uses as needed.


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_____
Name

_____
Mailing Address

_____
City State Zip Code

_____
Phone Number

_____
E-mail

☐ Petitioner/Co-Petitioner 1 ☐ Respondent/Co-Petitioner 2

**MONTANA ____JUDICIAL DISTRICT COURT, _____ COUNTY**

| | |
|---|---|
| _____<br>Petitioner/Co-Petitioner 1,<br><br>and<br><br>_____<br>Respondent/Co-Petitioner 2 | **Case No:** _____<br>*(leave blank, the clerk will write in)*<br><br>**Statement of Inability to Pay Court Costs and Fees** |

I have a good cause of action or response but am unable to pay filing or other court fees. I request the court waive the costs and fees. I provide the following information.

My full legal name is: _____.

Birth month: _____ year: _____.

Choose One:

☐ I am represented by an entity that provides free legal services to low-income persons.

***OR***

☐ I am represented by a volunteer/pro bono attorney, and am financially eligible for free legal services. (*Attach a certificate of eligibility from legal aid organization to this form.*)

***OR***

☐ I receive one or more of these benefits: (*Check the box for <u>each</u> benefit you receive*.)

☐ SNAP ☐ TANF ☐ SSI ☐ Medicaid ☐ WIC ☐ LIHEAP

**If you checked any one of the three boxes above, skip to the end of this form, and sign the declaration on page 3. You don't need to fill out the remainder of the form.**

If you did not check a box above, you may still qualify for a fee waiver. Please continue to fill out pages 2 and 3 of this form so the court has the information it needs to decide if you qualify for the fee waiver.


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If you paid for these forms, ask for your money back.

## I. INCOME

What do you do for work? _____ Who is your employer? _____

What is your household's annual income, before taxes? _____ How many people are in your household? ___
(*The tables below will help you answer these questions, if you are not sure what to put in the blanks.*)

If you are unemployed, when were you last employed (Month, Year)? _____ Your job? _____

**Are you married?** ☐ Yes ☐ No ☐ Separated ☐ Getting Divorced NOTE: If you are not married, if you and your spouse are separated, or if one of you is filing for dissolution of marriage, you do not need to provide your spouse's income below.

*Fill in the chart below with the income received by you, and by your spouse, if applicable. Put a "0" in each blank if you or your spouse don't receive the income listed.*

| **Income Sources** | **Amount YOU receive per month *before* taxes** | **Amount YOUR SPOUSE receives per month *before* taxes** |
|---|---|---|
| Employment | $ | $ |
| Retirement/Pension | $ | $ |
| Workers' Compensation | $ | $ |
| Social Security | $ | $ |
| Unemployment | $ | $ |
| Government Benefits | $ | $ |
| Child Support Received | $ | $ |
| A person or agency pays my rent or other monthly expenses and the amount is: _____ | $ | $ |
| Other Income—e.g., rental income, stocks, investments, etc.—describe: _____ | $ | $ |
| **Total here:** | $ | $ |

**What is your household size?** How many persons, if any, depend on you financially? If none, then write "N/A" below. Attach another page if needed and check here to tell the court you attached another page: ☐

| **Dependents** (Initials Only) | **Age** | **Relationship to You** |
|---|---|---|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |


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If you paid for these forms, ask for your money back.

## II. ASSETS (*Complete this Section to the best of your ability.*)

**What property do you and your spouse own?** Include your spouse's property if you are married and not separated and not filing for dissolution. Fill in the chart below, only listing items that you could sell for $600 or more. If you don't own an item listed, write "N/A" in the "Value" column for that item. "Value" means the total amount the item(s) identified in a column would sell for, minus the amount you still owe on the item(s), if anything.

| Asset | Value |
|---|---|
| Cash (This includes the money in your savings and checking accounts) | $ |
| Vehicle 1: provide year, make and model _____ | $ |
| Vehicle 2: provide year, make and model _____ | $ |
| Home where you live now | $ |
| Real estate or other homes/mobile homes (Not including the home you are living in now) | $ |
| Recreational vehicle(s) such as snowmobile, ATV, camper/RV, boat, motorcycle, etc. | $ |
| Guns or other collections | $ |
| Other Item(s) worth more than $600—describe: _____ | $ |

## III. DEBTS AND EXTRAORDINARY EXPENSES (*Complete this Section to the best of your ability.*)

**What bills do you and your spouse pay each month?** Fill in the chart below.

| Monthly Expenses | Value |
|---|---|
| Housing Expense: Mortgage or Rent | $ |
| General Household Expenses: Utilities, Phone/Internet/Cable, etc. | $ |
| Insurance Expenses, Healthcare Costs and/or Medical Debt(s) | $ |
| Childcare Expenses | $ |
| Other Extraordinary Expenses: e.g., Collection actions, Student Loans—describe: | $ |

## IV. ADDITIONAL INFORMATION *(This Section is optional.)*

If you have additional information that you want the court to consider about your inability to pay court costs, write that information under your signature below or attach an extra page. Check here if you attached another page: ☐

## V. DECLARATION *(This Section is Required.)*

**I declare under penalty of perjury and under the laws of the State of Montana that the information in this document is true and correct. I understand that it is a crime to give false information in this document.**

Date: _____ City: _____ State: _____

Your Signature: _____


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If you paid for these forms, ask for your money back.

*Court Use Only*

**MONTANA ____ JUDICIAL DISTRICT COURT _____ COUNTY**

| | |
|---|---|
| _____<br>Petitioner/Co-Petitioner 1,<br><br>and<br><br>_____<br>Respondent/Co-Petitioner 2 | **Case No:** _____<br>(*leave blank, the clerk will write in)*<br><br>**Order Regarding Statement of Inability to Pay Court Costs** |

***Warning! Read carefully the section checked below.***
***It is a court order.***

☐ Waiver of court costs is **Granted**. Declarant shall proceed without payment of court fees or costs.

☐ Temporary Waiver of court costs is **Granted**. Declarant may file without payment of court fees or costs, but the Court may determine at a later time that the declarant has the ability to pay all fees or costs and will require declarant to do so.

☐ Temporary Waiver of fees is **Granted**. Declarant may file without payment of court fees or costs, but must appear before the Court at _____ a.m/p.m. on the _____ day of _____ and show cause why the declarant lacks the ability to pay all fees or costs.

***Warning! If this third box is checked, you must come to court on the date ordered above. If you don't come, the judge will deny your request to waive court costs, and you will have to pay the court costs.***

☐ Waiver of Fees and costs is **Denied**. Waiver is denied based on the following:

_____

_____

_____

Ordered this _____ day of _____, 20_____.

_____
Presiding Judge or Standing Master

_____
Name

_____
Mailing Address

_____
City State Zip Code

_____
Phone Number

_____
E-mail

☐ Petitioner/Co-Petitioner 1 ☐ Respondent/Co-Petitioner 2

**MONTANA ____JUDICIAL DISTRICT COURT, _____ COUNTY**

| | |
|---|---|
| _____<br>Petitioner/Co-Petitioner 1,<br><br>and<br><br>_____<br>Respondent/Co-Petitioner 2 | **Case No:** _____<br>*(leave blank, the clerk will write in)*<br><br>**Statement of Inability to Pay Court Costs and Fees** |

I have a good cause of action or response but am unable to pay filing or other court fees. I request the court waive the costs and fees. I provide the following information.

My full legal name is: _____.

Birth month: _____ year: _____.

Choose One:

☐ I am represented by an entity that provides free legal services to low-income persons.

***OR***

☐ I am represented by a volunteer/pro bono attorney, and am financially eligible for free legal services. (*Attach a certificate of eligibility from legal aid organization to this form.*)

***OR***

☐ I receive one or more of these benefits: (*Check the box for <u>each</u> benefit you receive*.)

☐ SNAP ☐ TANF ☐ SSI ☐ Medicaid ☐ WIC ☐ LIHEAP

**If you checked any one of the three boxes above, skip to the end of this form, and sign the declaration on page 3. You don't need to fill out the remainder of the form.**

If you did not check a box above, you may still qualify for a fee waiver. Please continue to fill out pages 2 and 3 of this form so the court has the information it needs to decide if you qualify for the fee waiver.


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## I. INCOME

What do you do for work? _____ Who is your employer? _____

What is your household's annual income, before taxes? _____ How many people are in your household? ___
(*The tables below will help you answer these questions, if you are not sure what to put in the blanks.*)

If you are unemployed, when were you last employed (Month, Year)? _____ Your job? _____

**Are you married?** ☐ Yes ☐ No ☐ Separated ☐ Getting Divorced NOTE: If you are not married, if you and your spouse are separated, or if one of you is filing for dissolution of marriage, you do not need to provide your spouse's income below.

*Fill in the chart below with the income received by you, and by your spouse, if applicable. Put a "0" in each blank if you or your spouse don't receive the income listed.*

| **Income Sources** | **Amount YOU receive per month *before* taxes** | **Amount YOUR SPOUSE receives per month *before* taxes** |
|---|---|---|
| Employment | $ | $ |
| Retirement/Pension | $ | $ |
| Workers' Compensation | $ | $ |
| Social Security | $ | $ |
| Unemployment | $ | $ |
| Government Benefits | $ | $ |
| Child Support Received | $ | $ |
| A person or agency pays my rent or other monthly expenses and the amount is: _____ | $ | $ |
| Other Income—e.g., rental income, stocks, investments, etc.—describe: _____ | $ | $ |
| **Total here:** | $ | $ |

**What is your household size?** How many persons, if any, depend on you financially? If none, then write "N/A" below. Attach another page if needed and check here to tell the court you attached another page: ☐

| **Dependents** (Initials Only) | **Age** | **Relationship to You** |
|---|---|---|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |


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## II. ASSETS (*Complete this Section to the best of your ability.*)

**What property do you and your spouse own?** Include your spouse's property if you are married and not separated and not filing for dissolution. Fill in the chart below, only listing items that you could sell for $600 or more. If you don't own an item listed, write "N/A" in the "Value" column for that item. "Value" means the total amount the item(s) identified in a column would sell for, minus the amount you still owe on the item(s), if anything.

| Asset | Value |
|---|---|
| Cash (This includes the money in your savings and checking accounts) | $ |
| Vehicle 1: provide year, make and model _____ | $ |
| Vehicle 2: provide year, make and model _____ | $ |
| Home where you live now | $ |
| Real estate or other homes/mobile homes (Not including the home you are living in now) | $ |
| Recreational vehicle(s) such as snowmobile, ATV, camper/RV, boat, motorcycle, etc. | $ |
| Guns or other collections | $ |
| Other Item(s) worth more than $600—describe: _____ | $ |

## III. DEBTS AND EXTRAORDINARY EXPENSES (*Complete this Section to the best of your ability.*)

**What bills do you and your spouse pay each month?** Fill in the chart below.

| Monthly Expenses | Value |
|---|---|
| Housing Expense: Mortgage or Rent | $ |
| General Household Expenses: Utilities, Phone/Internet/Cable, etc. | $ |
| Insurance Expenses, Healthcare Costs and/or Medical Debt(s) | $ |
| Childcare Expenses | $ |
| Other Extraordinary Expenses: e.g., Collection actions, Student Loans—describe: | $ |

## IV. ADDITIONAL INFORMATION *(This Section is optional.)*

If you have additional information that you want the court to consider about your inability to pay court costs, write that information under your signature below or attach an extra page. Check here if you attached another page: ☐

## V. DECLARATION *(This Section is Required.)*

**I declare under penalty of perjury and under the laws of the State of Montana that the information in this document is true and correct. I understand that it is a crime to give false information in this document.**

Date: _____ City: _____ State: _____

Your Signature: _____


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*Court Use Only*

**MONTANA ____ JUDICIAL DISTRICT COURT _____ COUNTY**

| | |
|---|---|
| _____<br>Petitioner/Co-Petitioner 1,<br><br>and<br><br>_____<br>Respondent/Co-Petitioner 2 | **Case No:** _____<br>(*leave blank, the clerk will write in)*<br><br>**Order Regarding Statement of Inability to Pay Court Costs** |

***Warning! Read carefully the section checked below.***
***It is a court order.***

☐ Waiver of court costs is **Granted**. Declarant shall proceed without payment of court fees or costs.

☐ Temporary Waiver of court costs is **Granted**. Declarant may file without payment of court fees or costs, but the Court may determine at a later time that the declarant has the ability to pay all fees or costs and will require declarant to do so.

☐ Temporary Waiver of fees is **Granted**. Declarant may file without payment of court fees or costs, but must appear before the Court at _____ a.m/p.m. on the _____ day of _____ and show cause why the declarant lacks the ability to pay all fees or costs.

***Warning! If this third box is checked, you must come to court on the date ordered above. If you don't come, the judge will deny your request to waive court costs, and you will have to pay the court costs.***

☐ Waiver of Fees and costs is **Denied**. Waiver is denied based on the following:

_____

_____

_____

Ordered this _____ day of _____, 20_____.

_____
Presiding Judge or Standing Master

_____
Name

_____
Mailing Address

_____
City State Zip Code

_____
Phone Number

_____
E-mail

☐ Co-Petitioner 1 **OR** ☐ Co-Petitioner 2

**MONTANA ____ JUDICIAL DISTRICT COURT _____ COUNTY**

| | |
|---|---|
| In the Marriage of:<br><br>_____<br>Co-Petitioner 1<br><br>and<br><br>_____<br>Co-Petitioner 2 | **Case No: _____**<br>*(Leave blank, the clerk will write in)*<br><br>**Joint Petition for Dissolution** |

**1. Jurisdiction.**

a. Either spouse meets the residency requirements in § 40-4-104, M.C.A. For 90 days before filing this case, at least one spouse lived or was stationed in Montana.

b. Our marriage is irretrievably broken and there is no reasonable prospect of reconciliation.


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**2. Co-Petitioner 1 Information:**

Name First: _____ Middle:_____ Last:_____

E-mail Address: _____

Mailing Address: _____

City: _____ State: _____ County: _____

Physical Address: _____

City: _____ State: _____ County: _____

Year of Birth:____ Age: ____ Occupation: _____

How long have you lived in this county? _____

How long have you lived in Montana? _____

**3. Co-Petitioner 2 Information:**

Name First: _____ Middle:_____ Last:_____

E-mail Address (optional): _____

Mailing Address: _____

City: _____ State: _____ County: _____

Physical Address: _____

City: _____ State: _____ County: _____

Year of Birth:____ Age: ____ Occupation: _____

How long have they lived in this county? _____

How long have they lived in Montana? _____


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4. **Your marriage.** ***(Choose one)***

☐ We were married on (date) _____. We filed our marriage license in _____ County, State of _____.

**OR**

☐ We were married at common law as of (date) _____. We assumed a marital relationship by mutual consent and agreement. We confirmed our marriage by living together and by public knowledge.

**OR**

☐ We filed a declaration of marriage on (date) _____ in _____ County, State of _____.

5. **Separation. (*Choose one)***

☐ We physically separated on (*date)* _____.

**OR**

☐ We have not yet physically separated.

6. **There are no minor children of the marriage.**

7. **Pregnancy. (Choose one)**

☐ Neither spouse is pregnant.

**OR**

☐ One spouse is pregnant, and the other spouse is the other parent of the pregnancy.

**OR**

☐ One spouse is pregnant and the other spouse is not the other parent of the pregnancy.

**Notice:** This is not the correct form if one of the spouses is pregnant and the other spouse is the parent. A Joint Petition with Minor Children should be filed after the child is born, if the parent agree on all elements of the dissolution. A parenting plan must be filed after the child is born if one spouse is pregnant and the other spouse is the other parent, or the other parent is unknown.

8. **Property Distribution.**

We have marital property, including personal property, real property, other assets,


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liabilities, and/or debts that need to be distributed as we agree or by the court. We ask the court to distribute our marital property as described in **Form MP-521** Joint Proposed Property Distribution.

We have completed and filed a Joint Proposed Property Distribution **Form MP-521** with the Court.

**9. Preliminary Disclosure.**

We have completed and exchanged Disclosure of Income and Expenses **Form MP-520**.

**NOTICE: Form MP-520 IS ONLY PROVIDED TO YOUR SPOUSE. DO NOT FILE MP-520 WITH THE COURT.**

**10. Former Name(s). (*Choose one*)**

☐ Co-Petitioner 1 requests the Court restore their previous name:
Current Name:

_____
(First, Middle, Last)

Previous Name to be Restored:

_____
(First, Middle, Last)

☐ Co-Petitioner 2 requests the Court restore their previous name:
Current Name:

_____
(First, Middle, Last)

Previous Name to be Restored:

_____
(First, Middle, Last)

**OR**

☐ Petitioners want to keep their current names.

**11. Maintenance. (*Choose one)***

☐ Petitioners are not requesting maintenance.

**OR**

☐ Petitioners request the following maintenance agreement (include amount, duration, and payment schedule):

_____


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_____

_____

**12. Other:**

_____

_____

_____

**13. We ask the court to take the following action:**

**a. Enter a decree of dissolution of marriage dissolving our marriage.**

**b. Grant each party the marital property, including personal property, real property, other assets, liabilities, and/or debts as stated in the Joint Proposed Property Distribution (MP 521) filed separately.**

**c. If we asked the Court to do so, restore former name(s).**

**d. If we asked the Court to do so, enter an order for maintenance.**

**e. Other:**

_____

_____

_____

**f. And for any other relief this court decides is just and proper.**

We declare under penalty of perjury and under the laws of the state of Montana that the information in this document is true and correct. We understand that it is a crime to give false information in this document.

By signing this Petition, we further acknowledge that we are subject to an Automatic Economic Restraining Order limiting what actions we can take until this marriage is fully dissolved. The complete terms of that restraining order are defined in Montanan Code Annotated § 40-4-126.

Dated this _____day of _____, 20__.

Sign Here: _____ Sign Here: _____

Print Name: _____ Print Name: _____

Co-Petitioner 1 Co-Petitioner 2


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_____
Name

_____
Mailing Address

_____
City State Zip Code

_____
Phone Number

_____
E-mail
☐ Co-Petitioner 1 **OR** ☐ Co-Petitioner 2

**MONTANA _____ JUDICIAL DISTRICT COURT_____ COUNTY**

| | |
|---|---|
| In the Marriage of:<br><br>_____<br>Co-Petitioner 1<br><br>and<br><br>_____<br>Co-Petitioner 2 | **Case No: _____**<br><br>**Request for Final Hearing on Joint Dissolution** |

We ask the court to hold a final hearing to resolve our case.

**a.** Petitioners have filed all the required information and we agree on all issues.

**b. Final Financial Disclosure.** Both Petitioners have exchanged **Disclosure of Income and Expenses MP-520.** They have submitted to the court a **Joint Proposed Property Distribution MP-521** containing all the debts, assets, and liabilities.**.** Therefore, the requirements of §§40-4-252 through 254, MCA have been met.


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**c. We request that the Court *(Choose one)***

☐ Issue an order setting a final hearing.

**OR**

☐ Waive our final hearing

**We declare under penalty of perjury and under the laws of the state of Montana that the information in this document is true and correct. We understand that it is a crime to give false information in this document.**

Dated this _____day of _____, 20____.

Sign Here: _____ Sign Here: _____

Print Name: _____ Print Name: _____

Co-Petitioner 1 Co-Petitioner 2


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If you paid for these forms, ask for your money back.

**MONTANA ____ JUDICIAL DISTRICT COURT_____ COUNTY**

| In the Marriage of:<br><br>_____<br>Co-Petitioner 1<br><br>and<br><br>_____<br>Co-Petitioner 2 | **Case No:** _____<br>*(Fill in your Case Number)*<br><br>**Court Order for Final Hearing on Joint Dissolution** |
|---|---|

*(The rest of this form will be completed by the Court)*

IT IS HEREBY ORDERED:

1. **Schedule.** The Court sets the final hearing in this matter as follows:

   Date: _____

   Time: _____

   Location: _____

   _____

☐ The parties are to appear at the hearing as scheduled above.

**OR**

☐ Will not be scheduled because (***Choose all that apply***):

☐ The Court does not have sufficient reason to believe that **MP-520** Declaration of Assets and Financial Disclosures has been exchanged by the parties.


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☐ The Hearing is waived.

☐ (Optional) The Court has noted within the record:_____

_____

_____

_____.

**2. Compliance. (*Choose One)***

☐ Parties must comply with this order as follows:_____

_____

_____. Once parties have complied, either party may file a new **MP-122.1** Request for a Final Hearing.

☐ The Court expects both parties to attend the hearing.

☐ The Court expects only ☐ Co-Petitioner 1 or ☐ Co-Petitioner 2 to attend the hearing and a **MP-130** Consent to Entry of Decree has been filed by the other party.

DATED this _____ day of _____, 20_____.

_____
DISTRICT COURT JUDGE


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_____
Name

_____
Mailing Address

_____
City State Zip Code

_____
Phone Number

_____
E-mail
☐ Co-Petitioner 1 **OR** ☐ Co-Petitioner 2

**MONTANA ____ JUDICIAL DISTRICT COURT_____ COUNTY**

In the Parenting or Marriage of: _____
(children's initials *if parenting plan)*

_____,
Co-Petitioner 1

and

_____,
Co-Petitioner 2

**Case No:** _____
*(Fill in your Case Number)*

# Consent to Entry of Decree

The ☐Co-Petitioner 1 **OR** ☐Co-Petitioner 2 hereby consents to the entry of a Final Decree in the above-entitled case and waives their right to appear and testify at the final hearing on this matter. All outstanding issues between the parties have been resolved.

I declare under penalty of perjury and under the laws of the State of Montana that the information in this document is true and correct. I understand that it is a crime to give false information in this document.

DATED this _____ day of _____, 20____.

_____
☐Co-Petitioner 1 **OR** ☐Co-Petitioner 2


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_____
Name

_____
Address

_____
City State Zip Code

_____
Phone Number

_____
E-mail Address

**MONTANA ____ JUDICIAL DISTRICT COURT _____ COUNTY**

| | |
|---|---|
| In the Parenting/Marriage of:<br><br>_____,<br>☐ Petitioner / ☐ Co-Petitioner 1<br><br>and<br><br>_____,<br>☐ Respondent / ☐ Co-Petitioner 2 | **Case No:** _____<br>*(Fill in with your Case Number)*<br><br>**Sensitive Data Form** |

COMES NOW _____ [full name] to disclose the confidential information protected under Mont. R. Civ. P. 5.2 of the Montana Code of Civil Procedure. Pursuant to Montana Rule of Civil Procedure 5.2(f), this document shall be filed under seal.

1. The full legal names and dates of birth of the Petitioner/Co-Petitioner 1 and Respondent/Co-Petitioner 2 are:

| | Full Legal Name | Date of Birth |
|---|---|---|
| Petitioner / Co-Petitioner 1 | | |
| Respondent / Co-Petitioner 2 | | |


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2. The full legal names and dates of birth of the child(ren) are:

| Initials of Child Used in Court Documents | Full Legal Name | Date of Birth |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Dated this ____ day of _____, 20____.

Signature: _____ Signature: _____

☐ Petitioner / ☐ Co-Petitioner 1 ☐ Respondent / ☐ Co-Petitioner 2


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_____
Name

_____
Mailing Address

_____
City State Zip Code

_____
Phone Number

_____
E-mail

☐ Co-Petitioner 1 **OR** ☐ Co-Petitioner 2

**MONTANA _____JUDICIAL DISTRICT COURT, _____ COUNTY**

| | |
|---|---|
| In the Marriage of:<br><br>_____<br>Co-Petitioner 1<br><br>and<br><br>_____<br>Co-Petitioner 2 | **Case No:** _____<br><br>**Disclosure of Income and Expenses**<br><br>**Completed by:**<br>☐ **Co-Petitioner 1**<br>☐ **Co-Petitioner 2** |

**Warning: Montana law, §40-4-252, M.C.A. requires the full disclosure of all assets, debts, income, and expenses. I understand that I am required to tell my spouse about all the assets, debts, income and expenses that I know about. My spouse is required to do the same for me.**

**This Disclosure of Income and Expenses must be exchanged between spouses.**

**If I don't tell my spouse about something, the court may give me a penalty. The court gets to decide what the penalty will be. I am providing all the information I know about the income and expenses listed on this form and writing "unknown" in the spaces for the information I don't know.**

NOTE: This Document is served on the **other party only** and **cannot be filed with the Court** unless the Court specifically orders you to file it. The following is being served as required by §§ 40-4-252 through 254, M.C.A.


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## 1. Disclosure of Income

| Source of Income | | Amount per Month |
|---|---|---|
| Gross Wages, Salary, Commissions | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Income from Rents, Interest, Dividends | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Self Employment Earnings | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Unemployment or Worker's Compensation | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Social Security Benefits, including SSI, SSDI | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Public Assistance (including TANF and LIHEAP) | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Food Stamps | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Pension, Retirement | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Child Support | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Dependent's Benefits | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Other Income (*describe*): | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| **Monthly Total** | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |


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(*If you have additional income, attach that information to this document.)*

## 2. Disclosure of Expenses

| Description of Expense | | Amount per Month |
|---|---|---|
| Taxes and withholdings | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Retirement Contribution | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Health Insurance (self and children) | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Medical Expenses | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Rent or Housing *(including property taxes and insurance relating to housing)* | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Transportation | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Car Insurance | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Student Loans | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Utilities | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Telephone (cell phone and land line) | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Clothing | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |

| | | |
|---|---|---|
| Food and Household Supplies | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |


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| | | |
|---|---|---|
| Child Care | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Union Dues | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Child Support Payments | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Other: (describe) | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| **Monthly Total** | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |

(*If you have additional expenses, attach a description to this document.)*

**I declare under penalty of perjury and under the laws of the state of Montana that the information in this document is true and correct. I understand that it is a crime to give false information in this document.**

Dated this _____day of _____, 20__.

City _____ State _____

Sign Here: _____

Print Name: _____

☐Co-Petitioner 1 ☐Co-Petitioner 2


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_____
Name

_____
Mailing Address

_____
City State Zip Code

_____
Phone Number

_____
E-mail

☐ Co-Petitioner 1 **OR** ☐ Co-Petitioner 2

**MONTANA _____JUDICIAL DISTRICT COURT, _____ COUNTY**

| | |
|---|---|
| In the Marriage of:<br><br>_____<br>Co-Petitioner 1<br><br>and<br><br>_____<br>Co-Petitioner 2 | **Case No:** _____<br><br>**Disclosure of Income and Expenses**<br><br>**Completed by:**<br>☐ **Co-Petitioner 1**<br>☐ **Co-Petitioner 2** |

**Warning: Montana law, §40-4-252, M.C.A. requires the full disclosure of all assets, debts, income, and expenses. I understand that I am required to tell my spouse about all the assets, debts, income and expenses that I know about. My spouse is required to do the same for me.**

**This Disclosure of Income and Expenses must be exchanged between spouses.**

**If I don't tell my spouse about something, the court may give me a penalty. The court gets to decide what the penalty will be. I am providing all the information I know about the income and expenses listed on this form and writing "unknown" in the spaces for the information I don't know.**

NOTE: This Document is served on the **other party only** and **cannot be filed with the Court** unless the Court specifically orders you to file it. The following is being served as required by §§ 40-4-252 through 254, M.C.A.


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## 1. Disclosure of Income

| Source of Income | | Amount per Month |
|---|---|---|
| Gross Wages, Salary, Commissions | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Income from Rents, Interest, Dividends | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Self Employment Earnings | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Unemployment or Worker's Compensation | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Social Security Benefits, including SSI, SSDI | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Public Assistance (including TANF and LIHEAP) | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Food Stamps | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Pension, Retirement | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Child Support | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Dependent's Benefits | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Other Income (*describe*): | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| **Monthly Total** | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |


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(*If you have additional income, attach that information to this document.)*

## 2. Disclosure of Expenses

| Description of Expense | | Amount per Month |
|---|---|---|
| Taxes and withholdings | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Retirement Contribution | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Health Insurance (self and children) | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Medical Expenses | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Rent or Housing *(including property taxes and insurance relating to housing)* | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Transportation | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Car Insurance | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Student Loans | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Utilities | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Telephone (cell phone and land line) | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Clothing | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |

| | | |
|---|---|---|
| Food and Household Supplies | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |


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| | | |
|---|---|---|
| Child Care | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Union Dues | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Child Support Payments | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| Other: (describe) | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |
| **Monthly Total** | Co-Petitioner 1: | |
| | Co-Petitioner 2: | |

(*If you have additional expenses, attach a description to this document.)*

**I declare under penalty of perjury and under the laws of the state of Montana that the information in this document is true and correct. I understand that it is a crime to give false information in this document.**

Dated this _____day of _____, 20__.

City _____ State _____

Sign Here: _____

Print Name: _____

☐Co-Petitioner 1 ☐Co-Petitioner 2


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_____
Name

_____
Mailing Address

_____
City State Zip Code

_____
Phone Number

_____
E-mail

☐ Co-Petitioner 1 **OR** ☐ Co-Petitioner 2

**MONTANA _____ JUDICIAL DISTRICT COURT _____COUNTY**

| | |
|---|---|
| In the Marriage of:<br><br>_____<br>Co-Petitioner 1<br><br>and<br><br>_____<br>Co-Petitioner 2 | **Case No:** _____<br><br>**Joint Proposed Property Distribution** |

**WARNING: Montana law, §40-4-252, M.C.A.** requires full disclosure of all assets, debts, income and expenses from BOTH PARTIES. There are no shortcuts in completing these forms. Both parties in a Dissolution of Marriage are required to provide all information known – inserting "unknown" in any MP-521 columns where information is not available.

**FAILURE** of any party to provide the information requested may result in a penalty decided upon and imposed by the Court.

1. **Real Property.** Real property is land and the building(s) on the land. Real property also includes part ownership, for example when all the members of a family share a


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ranch. Real property ***does not*** include trailer, mobile, or manufactured homes unless the Department of Justice has officially recognized said structure as an improvement to the land pursuant to Montana law §15-1-116 and issued appropriate documentation of such as required by law. Any owned parcel upon which a trailer, mobile, or manufactured home sits is real property regardless of the status of said structure.

***(Choose one)***

☐ Petitioners do not own any real property individually or together.

**OR**

☐ The following is the real property that we own, regardless of whether we own it separately or together. The distribution of any debt(s) associated with the real property(ies) described below is listed in Section 8 dealing with debt distribution.

I request distribution as follows:

| Description | Value | Name on Deed | Distributed to |
|---|---|---|---|
| Address:<br>_____<br>_____<br><br>Legal Description:_____<br>_____<br>_____<br>_____<br>Is there a secured debt on the property?<br>☐ Yes ☐ No<br><br>**If yes**, list all debt information in Section 8 | | | ☐ Co-Petitioner 1<br>☐ Co-Petitioner 2<br>☐ Other:<br>_____ |

(*Choose one*)

☐ **The home will be kept by one of the parties.** ☐ Co-Petitioner 1 **OR** ☐ Co-Petitioner 2 shall receive the home as his/her separate property and shall be responsible for all costs associated with the home so long as the home is refinanced no later than _____*(date)*. If the home is not refinanced by that date, for any reason, the parties agree that the home will be sold and the net proceeds divided ___% to Co-Petitioner 1 and ___% to Co-Petitioner 2. The home will be listed for sale no more


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than 30 days after the refinance date. In the event the home is listed for sale and until the home is sold, the parties shall be responsible to pay all costs of the home including, but not limited to, the mortgage payment, taxes, insurance, maintenance and upkeep with ☐ Co-Petitioner 1 responsible to pay _____% and ☐ Co-Petitioner 2 is responsible to pay _____%. ☐ Co-Petitioner 1 **OR** ☐ Co-Petitioner 2 shall be entitled to live in the home pending the sale of the home.

**OR**

☐ **The home will be sold.** The home will be listed for sale no later than 30 days after the date the Decree of Dissolution is ordered by this court and the net proceeds divided ___% to Co-Petitioner 1 and ___% to Co-Petitioner 2. Until the home is sold, the parties shall be responsible to pay all costs of the home including, but not limited to the mortgage payment, taxes, insurance, maintenance, and upkeep with ☐ Co-Petitioner 1 responsible to pay _____% and ☐ Co-Petitioner 2 responsible to pay _____%. ☐ Co-Petitioner 1 **OR** ☐ Co-Petitioner 2 shall be entitled to live in the home pending the sale of the home.

**OR**

☐ Co-Petitioner 1 **OR** ☐ Co-Petitioner 2 shall have exclusive possession of the home until 90 days after the youngest child reaches the age of 18 or graduates from high school, whichever is later. The home must be listed for sale no later than 90 days after the youngest child turns 18 or graduates from high school whichever is later. The net proceeds of the sale will be divided ___% to Co-Petitioner 1 and ___% to Co-Petitioner 2. The parties shall be responsible to pay all costs of the home including, but not limited to the mortgage payment, taxes, insurance, maintenance and upkeep with ☐ Co-Petitioner 1 responsible to pay _____% and ☐ Co-Petitioner 2 responsible to pay _____% until the home is sold.

**OR**

☐ Other: _____
_____
_____
_____
_____
_____

2. **Vehicles.** Any trailer, mobile, or manufactured home, regardless of whether it was constructed before or after 1976, is considered a vehicle unless otherwise deemed an improvement to land by the Department of Justice pursuant to §15-1-116, M.C.A.


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*(Choose one)*

☐ Neither my spouse nor I own any vehicles

**OR**

☐ We own the following vehicles. The distribution of any debt(s) associated with the vehicle(s) described below is listed in Section 8 dealing with debt distribution.

We request distribution as follows:

| Description | Value | Name on Title | Distributed to |
|---|---|---|---|
| Year/Make/Model: _____<br>VIN#:_____<br>Is there an outstanding loan on the vehicle? ☐ Yes ☐ No<br>**If yes**, list debt information in Section 8. | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| Year/Make/Model: _____<br>VIN#:_____<br>Is there an outstanding loan on the vehicle? ☐ Yes ☐ No<br>**If yes**, list debt information in Section 8. | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| Year/Make/Model: _____<br>VIN#:_____<br>Is there an outstanding loan on the vehicle? ☐ Yes ☐ No<br>**If yes**, list debt information in Section 8. | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| Year/Make/Model: _____<br>VIN#:_____<br>Is there an outstanding loan on the vehicle? ☐ Yes ☐ No<br>**If yes**, list debt information in Section 8. | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |


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**3. Bank Accounts, Certificates of Deposit, and Cash.** (*Choose one)*

☐ Neither my spouse nor I have any bank accounts, certificates of deposit, or cash.

**OR**

☐ We are listing the bank accounts and cash that we own, regardless of whether we own them separately or together. We request distribution of the bank accounts and cash as follows:

| Description<br>*Include name of bank and only the last four digits of the account number* | Balance as of<br>__/___/___ | Percentage of Ownership | Distributed to: |
|---|---|---|---|
| | | %___Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other: _____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other: _____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other: _____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other: _____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other: _____ |


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| Description<br>*Include name of bank and only the last four digits of the account number* | Balance as of<br>__/___/___ | Percentage of Ownership | Distributed to: |
|---|---|---|---|
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br><br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br><br>Other: _____ |

**4. Pensions/Retirement Accounts, Life Insurance, Stocks, Bonds, Secured Notes, Health Savings Accounts, and Mutual Funds.** *(Choose one)*

☐ We do not have any pensions/retirement accounts, life insurance, stocks, bonds, secured notes, health savings accounts, or mutual funds.

**OR**

☐ We have the following pensions/retirement accounts, life insurance, stocks, bonds, secured notes, health savings accounts, or mutual funds and request distribution as follows:

| Description | Cash Value | Percentage of Ownership | Distributed to |
|---|---|---|---|
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |


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| | | | |
|---|---|---|---|
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |

**WARNING: The following personal property section must be completed. YOUR FAILURE TO LIST PERSONAL PROPERTY MAY RESULT IN YOUR FORM BEING REJECTED BY THE COURT AND DELAY YOUR DISSOLUTION PROCEEDINGS.**

5. **Personal Property** (including appliances, pets, furniture, jewelry, art, guns, etc.).

   We request the following distribution of our personal property:

| Description | Value | Current Possession | Distributed to |
|---|---|---|---|
| | | | ☐ Co-Petitioner 1<br>☐ Co-Petitioner 2<br>☐ Other:<br>_____ |
| | | | ☐ Co-Petitioner 1<br>☐ Co-Petitioner 2<br>☐ Other:<br>_____ |


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| | | | |
|---|---|---|---|
| | | | ☐ Co-Petitioner 1<br>☐ Co-Petitioner 2<br>☐ Other:<br>_____ |
| | | | ☐ Co-Petitioner 1<br>☐ Co-Petitioner 2<br>☐ Other:<br>_____ |
| | | | ☐ Co-Petitioner 1<br>☐ Co-Petitioner 2<br>☐ Other:<br>_____ |
| | | | ☐ Co-Petitioner 1<br>☐ Co-Petitioner 2<br>☐ Other:<br>_____ |
| | | | ☐ Co-Petitioner 1<br>☐ Co-Petitioner 2<br>☐ Other:<br>_____ |


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| | | | |
|---|---|---|---|
| | | | ☐ Co-Petitioner 1<br>☐ Co-Petitioner 2<br>☐ Other:<br>_____ |

**6. Business Interests** (including equipment, tools, livestock, etc.) (*Choose one)*

☐ We do not have any business interests.

**OR**

☐ We have the following business interests and request distribution as follows:

| Description | Cash Value | Percentage of Ownership | Distributed to |
|---|---|---|---|
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |

**7. Other Assets.** (*Choose one)*

☐ We do not have any other assets.

**OR**

☐ We have the following assets and request distribution as follows:

| Description | Cash Value | Percentage of Ownership | Distributed to |
|---|---|---|---|
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |


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| | | | |
|---|---|---|---|
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |

**8. Disclosure of Debts.** *(Choose one)*

☐ We do not have any debts.

**OR**

☐ We have the following debts and request distribution as follows:

| Description | Creditor | Amount | Balance As Of: __/__/__ | Name or Names on Debt Now | Distribute To |
|---|---|---|---|---|---|


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| | | | | | |
|---|---|---|---|---|---|
| **Home/Real Property Loan(s)** (including mortgage(s), home equity line of credit(s), and any other secured debts against the real property listed in Section 1, and any attachments): | | | | | |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| **Vehicle Loan(s)** (Including any debt(s) on the vehicle(s) listed in Section 2, and any attachments): | | | | | |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| Credit Card(s): | | | | | |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |


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| | | | | | |
|---|---|---|---|---|---|
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| Description | Creditor | Amount | Balance As Of: __/__/__ | Name or Names on Debt Now | Distribute To |
| Past Due Utility Bill(s): | | | | | |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| Student Loan(s): | | | | | |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| Past Due Medical Bills: | | | | | |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2 |


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| | | | | | |
|---|---|---|---|---|---|
| | | | | | Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| Other Liabilities: | | | | | |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |
| | | | | | %___ Co-Petitioner 1<br>%___ Co-Petitioner 2<br>Other:_____ |

**9. Additional Assets or Debts.** (*Choose one)*

☐ All of our assets and debts are listed on this form.

**OR**

☐ We have additional assets or debts that do not fit on this form. The additional assets or debts are listed on additional pages attached to this form.

**10. Other:** _____


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_____

_____

_____

_____

_____

_____

_____

**We declare under penalty of perjury and under the laws of the state of Montana that the information in this document is true and correct. We agree with the Court approving this proposed Property Distribution.**

Dated this _____day of _____, 20__.

Sign Here: _____ Sign Here: _____
Co-Petitioner 1 Co-Petitioner 2

---

*(Leave the following section blank. It is for the Judge to use.)*

**ORDER BY THE COURT**

IT IS ORDERED, ADJUDGED, AND DECREED that the Proposed Property Distribution set forth above is fair, equitable, and approved as an Order of this Court.

Dated this _____ day of _____, 20___.

_____

☐ DISTRICT COURT JUDGE / ☐ STANDING MASTER


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**MONTANA _____ JUDICIAL DISTRICT COURT _____ COUNTY**

| | |
|---|---|
| In the Marriage of:<br><br>_____<br>Co-Petitioner 1<br><br>and<br><br>_____<br>Co-Petitioner 2 | **Case No: _____**<br><br>**Findings of Fact and Conclusions of Law**<br><br>**Final Decree of Joint Dissolution** |

The Court enters the following:

**FINDINGS OF FACT AND CONCLUSIONS OF LAW**

**A. Procedural History.** On the _____ day of _____ 20____, the Petition for Dissolution was filed by Co-Petitioners without a lawyer.

**B. The Court** *(Choose one)*

☐ Held a Final Hearing on Dissolution, and both parties were present.
**OR**

☐ Held a Final Hearing on Dissolution and only one party was present. The non-appearing party filed a **MP-130** Consent to Entry of Decree.

**OR**

☐ Waived the Final Hearing.

**C. Marriage**

Parties have established to the satisfaction of the Court that they were married according to Montana Law.

☐ The parties were married on (date) _____. The


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marriage license was filed in _____ County, State of _____

**OR**

☐ The parties were married at common law as of (date) _____
The parties assumed a marital relationship by mutual consent and agreement. The parties confirmed their marriage by living together and by public knowledge.

**OR**

☐ The parties filed a declaration of marriage on (date) _____ in

_____ County, State of _____.

**D. Jurisdiction and Venue.** Ninety days before this case was filed, either Co-Petitioner was domiciled or was stationed in Montana. Venue is proper in this County.

**E. Irretrievable Breakdown.** The parties have established that the marriage is irretrievably broken. The Court dissolves the marriage between the parties.

**F. Declaration of Disclosure.** The parties are in compliance with the financial disclosure requirements §§ 40-4-252 through 254, M.C.A.

**G. Property Distribution**. The Court finds that the **Joint Proposed Property Distribution MP-521** is an equitable division of the marital property, assets, and liabilities and is not unconscionable. The Judge will sign the approved **MP-521** at the conclusion of the case.

**H. Spousal Maintenance.** ***(Choose One)***

☐ No spousal maintenance is awarded in this case.

**OR**

☐ The Court orders the spousal maintenance agreement proposed (include amount, duration, and payment schedule) as follows:

_____

_____

_____

**I. Previous Names.**

☐ Neither party requests restoration of a previous name.

**OR**


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☐ The Court Orders the follow name restoration:

Co-Petitioner 1 Name is restored to: _____

(First, Middle, and Last)

Co-Petitioner 2 Name is restored to: _____

(First, Middle, and Last)

**K.** Additional Findings

☐ The Court makes additional findings of fact as follows: _____

_____

_____

## DECREE OF DISSOLUTION OF MARRIAGE

**A.** The Court has jurisdiction over the parties and this cause of action.

**B.** The Court dissolves the marriage between the parties.

**C.** The Court dissolves the Automatic Economic Restraining Order issued in this matter under M.C.A. § 40-4-121(3), M.C.A.

**D.** The Court has signed and adopts and incorporates by reference the approved Property Distribution. The Court orders the parties to follow the Property Distribution.

**E.** Name changes shall be made per the Court's determination stated above.

**F.** Spousal maintenance shall be provided per the determination stated above.

**G.** Other Provisions:

_____

_____

_____

_____

_____


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**Each party is ordered to take any action necessary to carry out the terms and conditions of this Decree, including the signing and transfer of titles, deeds, or other documents within a reasonable amount of time from the date of this Decree or as more specifically provided in the Property Distribution.**

DATED this ___ day of _____ 20____.

_____

☐ DISTRICT COURT JUDGE / ☐ STANDING MASTER


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# State of Montana Case Registry and Vital Statistic Reporting Form
# Department of Public Health and Human Services

## INSTRUCTIONS

**Order Information:** Check the box that most accurately describes the type of order being entered. If it is dissolution of marriage, enter the place of marriage and indicate if child support is ordered. Temporary support orders and paternity orders that contain child support are categorized as "child support order, without dissolution." "Child support order" includes medical support orders. If the order does not contain a child support order, social security numbers of the parties are not required and only Parts 1, 2 and 9 needs to be completed.

**Parts 1 and 2:** Provide information about the parties to the order. If there is a child support order, be sure to check the box that shows whether the party owes support (payor) or will receive support (payee). If a party is ordered to both pay and receive support, check the box labeled "both." If there is no support order, check the box labeled "N/A" for not applicable. If a party is ordered to pay $0 support, that party should be considered a payor.

**Part 3:** Provide information about the children named in the order and indicate which parent or other party the children live with. If the parenting plan provides for shared residential parenting, circle "B" for both. If a child is not living with either parent, circle "O" and list the child's name and address.

**Part 4:** Complete this part if support is ordered to be paid to an agency or an individual other than a parent.

**Part 5:** Indicate whether any of the parties are protected from each other by a protective or restraining order. If yes, list the names of the protected parties. This includes any protected children.

**Part 6:** Provide information about the employment or other source of income of the party who is ordered to pay child support. If both parties are ordered to pay support, skip Part 6 and complete Part 10 instead.

**Part 7:** Provide information about the support order. Check the type(s) of support ordered and enter the amount and how often it is due. (Example: $100 per week.) All orders should have a "begin" date; many will not have an "end" date. If both parties are ordered to pay support, skip Part 7 and complete Part 11 instead.

If the order enters a judgment for past due support, show the total amount of the judgment. If the judgment includes amounts for penalties, fees or interest, list those amounts on the appropriate lines.

List any special conditions of the support order. (Example: support is due until the child graduates from college.) Copy the information requested about the guidelines to this form from the guidelines worksheet.

**Part 8:** Provide information about health insurance coverage for the children. If insurance is not provided, indicate whether it is available through the employer of either parent. Relationship of the party providing insurance is the party's relationship to the children. (Example: mother, father, mother's spouse, father's spouse.)

List the terms and conditions of the insurance coverage. (Example: 80/20 plan, $500 deductible, major medical only.)

**Part 9:** Provide information about the person completing this form.

**Part 10:** Employment information for multiple payors. Complete only if both parties are ordered to pay support. See Part 6 instructions.

**Part 11:** Order information for multiple payors. Complete only if both parties are ordered to pay support. See Part 7 instructions

# STATE OF MONTANA CASE REGISTRY AND VITAL STATISTICS REPORTING FORM

*(See instructions on first page)*

**County/Tribe**_____ **Judicial District No.**_____ **Cause No.**_____

**Date Decree/Order Signed**_____

☐ **Dissolution of Marriage**
- **County that Issued Marriage License:**_____
- **City, County, State of Marriage:**_____
- **Date of Marriage:**_____

☐ **With Child Support Order**

☐ **Without Child Support Order** (complete Parts 1, 2 & 9 only)

☐ **Modification of Child Support Order**

☐ **Child Support Order, without Dissolution** (Includes Temporary Support Orders and Paternity Orders with Child Support)

☐ **Legal Separation with Child Support Order**

☐ **Dependent Neglect/Juvenile Delinquency**

☐ **Invalid Marriage-Specify Legal grounds for Action:**

_____

_____

## 1 Spouse/Parent 1: ☐ Payor ☐ Payee ☐ Both ☐ N/A Former Name: _____

**Name:**_____ _____ _____ **SSN**_____ **Telephone#:**_____
*Last* *First* *Middle/Suffix*

**Mailing Address:**_____ _____ _____ _____
*Street* *City* *State* *Zip*

**Residential Address (if different from above):**_____

**Date of Birth:**_____ **Place of Birth:**_____ **Race:**_____
*State/Foreign Country*

**Driver's License#/State**_____ **Occupation:**_____

**Number of this marriage (1st,2nd, etc.):**_____ **Date, City & State of previous marriage(s):**_____

## 2 Spouse/Parent 2: ☐ Payor ☐ Payee ☐ Both ☐ N/A Former Name: _____

**Name:**_____ _____ _____ **SSN**_____ **Telephone#:**_____
*Last* *First* *Middle/Suffix*

**Mailing Address:**_____ _____ _____ _____
*Street* *City* *State* *Zip*

**Residential Address (if different from above):**_____

**Date of Birth:**_____ **Place of Birth:**_____ **Race:**_____
*State/Foreign Country*

**Driver's License#/State**_____ **Occupation:**_____

**Number of this marriage (1st,2nd, etc.):**_____ **Date, City & State of previous marriage(s):**_____

☐ **Other Payee:** If support is to be paid to another payee, check here and complete Part 4.

## 3 Names of Children Included in the Support Order:

| Last | First | Middle | Date of Birth | Gender | SSN | Residence of Child |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

If any of the above-named children are not residing with a parent, list the child's name and address:

_____

_____

## 4 Other Payee:

**Name of person/agency owed support if not a parent:** _____ _____ _____
*Last Name or Agency* *First Name* *Middle*

**Mailing Address:** _____ _____ _____ _____
*Street* *City* *State* *Zip*

**Residential Address (if different from above):** _____

## 5 Protective Order:

**Is a party to this action protected from another party to the action by an order of protection?**

☐ Yes ☐ No If yes, enter name(s) of protected party(ies): _____

## 6 Employer/Income Source Information:

**Provide information about the payor's employment or periodic source of income**. (Attach additional pages if needed)

☐ **Check here if this order requires both parties to pay support.** *If checked, skip Parts 6 & 7, and complete Parts 8, 9,10 & 11*.

_____ _____
**Name of Employer or Source of Income** **Telephone #**

## 7 Support Order Date Order Signed: _____

**Chose type of support and enter appropriate information.** **If applicable, arrears due at time of order:$** _____

| Support Type | Total Due | Frequency | Begin Date | End Date | Judgment | Penalty | Fees* | Interest* |
|---|---|---|---|---|---|---|---|---|
| ☐ **Child Support:** | $ | | | | $ | $ | $ | $ |
| ☐ **Medical Support** | $ | | | | $ | $ | $ | $ |
| ☐ **Spousal Support:** | $ | | | | $ | $ | $ | $ |

(Alimony) (*list amounts included in judgment)

**Is payor exempt from income withholding under MCA 40-5-315?** ☐ **Yes** ☐ **No** ☐ **Tribal Order**

**List any special terms/conditions of the support order(s):** _____

_____

**Was Parent 1 represented by an attorney?** ☐ **Yes** ☐ **No** **Was Parent 2 represented by an attorney?** ☐ **Yes** ☐ **No**

**Information from child support guidelines worksheet:**

**Parent 1:** "Income after deductions" $_____ "Credit for Payment of Expenses" $_____

**Parent 2:** "Income after deductions" $_____ "Credit for Payment of Expenses" $_____

## 8 Health Insurance: (Attach additional pages if needed.)

**Is health insurance provided for the children?** ☐ **Yes** ☐ **No (If no, answer last question in this section)**

**Name and relationship of party providing insurance:** _____ **Policy No.** _____

**Name of insurance carrier or health benefit plan:** _____

**Address of insurance carrier or health benefit plan:** _____

**Names of children covered:** _____

**Terms/conditions of coverage:** _____

**If children are not covered, is coverage available through** **Parent 1 employer?** ☐ Yes ☐ No

**Parent 2 employer?** ☐ Yes ☐ No

## 9 This form was completed by: Name/Title: _____

Telephone #: _____ Signature: _____ Date _____

**Complete next page if both parties are ordered to pay child support**

Information contained in this form is private and confidential.

It may only be shared with courts, agencies and individuals authorized by MCA 40-5-923.

***Multiple Payors:*** **Complete Parts 10 and 11 *only* if the order requires both parties to pay support.**

**10--Parent 1--Employer/Income Source Information:**

**Provide information about parent 1 employment or periodic source of income.** (Attach additional pages if needed.)

*Name of Employer or Source of Income* _____ *Telephone #* _____

*Street* _____ *City* _____ *State* _____ *Zip* _____

**10--Parent 2--Employer/Income Source Information:**

**Provide information about parent 2 employment or periodic source of income.** (Attach additional pages if needed.)

*Name of Employer or Source of Income* _____ *Telephone #* _____

*Street* _____ *City* _____ *State* _____ *Zip* _____

**11--Parent 1--Support Order Date Order Signed:** _____

**Parent 1 Support Obligation:** **If applicable, arrears due at time of order:$** _____

| Support Type | Total Due | Frequency | Begin Date | End Date | Judgment | Penalty | Fees* | Interest* |
|---|---|---|---|---|---|---|---|---|
| ☐ Child Support: | $ | | | | $ | $ | $ | $ |
| ☐ Medical Support | $ | | | | $ | $ | $ | $ |
| ☐ Spousal Support: | $ | | | | $ | $ | $ | $ |

*(Alimony)* *(*list amounts in included in judgment)*

**Is Parent 1 exempt from income withholding under MCA 40-5-315?** ☐ **Yes** ☐ **No** ☐ **Tribal Order**

**11--Parent 2--Support Order Date Order Signed:** _____

**Parent 2 Support Obligation:** **If applicable, arrears due at time of order:$** _____

| Support Type | Total Due | Frequency | Begin Date | End Date | Judgment | Penalty | Fees* | Interest* |
|---|---|---|---|---|---|---|---|---|
| ☐ Child Support: | $ | | | | $ | $ | $ | $ |
| ☐ Medical Support | $ | | | | $ | $ | $ | $ |
| ☐ Spousal Support: | $ | | | | $ | $ | $ | $ |

*(Alimony)* *(*list amounts in included in judgment)*

**Is Parent 2 exempt from income withholding under MCA 40-5-315?** ☐ **Yes** ☐ **No** ☐ **Tribal Order**

**List any special terms/conditions of the support order(s):** _____

**Was Parent 1 represented by an attorney?** ☐ Yes ☐ No **Was Parent 2 represented by an attorney?** ☐ Yes ☐ No

**Information from child support guidelines worksheet:**

**Parent 1: "Income after deductions": $** _____ **"Credit for Payment of Expenses":$** _____

**Parent 2: "Income after deductions": $** _____ **"Credit for Payment of Expenses":$** _____

**Save Form** **Print Form** **Clear Form**

**MONTANA _____ JUDICIAL DISTRICT COURT, _____ COUNTY**

| | |
|---|---|
| In re the Marriage of:<br><br>_____,<br>☐Petitioner ☐Co-Petitioner 1,<br><br>and<br><br>_____,<br>☐Respondent ☐Co-Petitioner 2. | Case No: _____<br><br>**AFFIDAVIT FOR ENTRY OF DECREE FOR DISSOLUTION OF MARRIAGE WITHOUT HEARING** |

STATE OF MONTANA )
: ss.
County of _____ )

I, the undersigned, under oath and penalty of perjury, swear or affirm as follows:

1. My name is _____. I am the Co-Petitioner 1 / Petitioner / Respondent /Co-Petitioner 2 (circle one) in the above action. I am ____ years of age. My occupation is _____. My current residence is _____. I have resided at this resident since ___ _____ (date). I am now married to _____ (name of your spouse). We were married on _____ (date) in _____ _____ (city and state).

2. For Joint Dissolutions (add Co-Petitioner 2's information):

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My name is _____. I am the Respondent/Co-Petitioner 2 in the above action. I am _____ years of age. My occupation is _____ _____. My current residence is _____ _____. I have resided at this resident since _____ (date). I am now married to _____ (name of your spouse). We were married on _____ _____ (date) in _____ (city and state).

3. The initials and year of birth of all living children of the marriage are:

_____

_____

_____

_____

_____

4. (Choose one)

☐ Neither party is pregnant.

☐ _____is pregnant.
*(Name)*

5. Neither I nor my spouse is now or was at any time 30 days prior to the filing of the Petition for Dissolution of Marriage: (a) a member of the Armed Forces of the United States (Army, Air Force, Coast Guard, Marine Corps, or Navy), (b) a member of the National Guard under a call to service for a period of more than 30 consecutive days, (c) a reserve member on active duty, or (d) an active duty commissioned officer of the Public Health Service or the National Oceanic and Atmospheric Administration.

6. The Petition for Dissolution of Marriage was filed on _____ (*date*). I and/or my spouse resided in the state of Montana during the 90 days preceding the filing of the Petition and that residence was maintained for 90 days prior to the filing of the Petition for Dissolution of Marriage.*[If Petition for Dissolution was not filed jointly:]* The Petition for Dissolution was served on my spouse (or my spouse acknowledged service of the Petition) on _____ (*date*). More than 21 days have passed since that date.

7. My marriage is irretrievably broken in that (*choose one*):

☐ My spouse and I have lived separate and apart for a period of more than 180 days prior to the filing of the Petition for Dissolution of Marriage.

☐ There is serious marital discord that adversely affects the attitude of me and/or my spouse toward the marriage.

8. There is no reasonable prospect of reconciliation of my marriage to my spouse. The conciliation provisions of the Montana Conciliation Law do not apply. If

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applicable, my spouse and I attended the Court's mandatory parenting plan orientation program.

9. My spouse and I complied with the preliminary declaration of disclosure requirements of MCA § 40-4-252 and the financial declaration of disclosure requirements of MCA § 40-4-254. I understand that failure to disclose an asset or liability on the final declaration of disclosure is presumed to be grounds for the Court, without taking into account the equitable division of the marital estate, to award the undisclosed asset to the opposing party or the undisclosed liability to the noncomplying party. I also understand that that in addition to any other civil or criminal remedy available under law for the commission of perjury, the Court may set aside the judgment (decree), or part of the judgment (decree), if the Court discovers, within five years from the date of entry of judgment (decree) that a party has committed perjury in the final declaration of disclosure.

10. My spouse and I have entered into and filed with the Court a written agreement(s) fully resolving (*choose all that apply*):

☐ Parenting of our minor child(ren).

☐ Child support for our minor child(ren). The child support obligation set forth in our written agreement was/was not (*circle* one) determined by applying the standards set forth in MCA § 40-4-204 and the uniform child support guidelines adopted by the Montana Department of Public Health and Human Services pursuant to MCA § 40-4-209. A copy of the uniform child support guidelines calculation upon which our agreed-upon child support obligation is based has/has not (*circle* one) been filed with the Court.

☐ Medical support for our minor child(ren)

☐ Disposition of all property and debts of myself and my spouse

☐ Maintenance of either spouse or waiver of maintenance claims

11. I/We signed the agreement(s) voluntarily.

12. I/We was/were not harassed, coerced, or threatened by anyone into signing the agreement(s).

13. I/We believe the parenting plan and child and medical support arrangements as set forth in our written agreement filed herein are in our child(ren)'s best interests.

14. I/We believe the disposition of property and debts as set forth in our written agreement filed herein is not unconscionable and constitutes an equitable apportionment of our marital estate.

15. I/We want the Court to adopt the written agreement(s) entered into between me and my spouse and filed herein as part of the final Decree of Dissolution of Marriage.

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16. I/We have completed the state case registry and vital statistics reporting form.

17. (Choose one for each Co-Petitioner)

☐ Co-Petitioner 1 is asking that their name be restored to their previous name:

_____ (*first, middle, last.*)

**OR**

☐ Co-Petitioner 1 wants to keep their current name.

**AND**

☐ Co-Petitioner 2 is asking that their name be restored to their previous name:

_____ (*first, middle, last.*)

**OR**

☐ Co-Petitioner 2 wants to keep their current name.

18. A proposed Decree of Dissolution of Marriage is presented to the Court with this Affidavit.

19. I/We waive the right to appear personally in Court to present testimony as to any matters and request the Court enter the proposed Decree of Dissolution of Marriage by affidavit in lieu of a hearing before the Court.

20. I/We understand that regardless of this Affidavit, the Court may require a hearing for any reason the Court considers necessary.

21. *[If requesting entry of a Decree of Legal Separation rather than a Decree of Dissolution of Marriage:]* I/We understand that no earlier than six months after entry of a decree of legal separation, the Court on motion of either party, shall convert the decree to a decree of dissolution of marriage.

NOTE: BOTH PARTIES MUST SIGN IF JOINT AFFIDAVIT

_____

Petitioner / Co-Petitioner 1 Signature Date

Signed and sworn to (or affirmed) before me on _____ (*date*) by _____(*name*).

_____

[Signature of notarial officer]

_____

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[Name – typed, stamped, or printed]
(Seal, if any) Notary Public for the state of Montana
Residing at _____
My commission expires _____

_____
Respondent/Co-Petitioner 2 Signature Date

Signed and sworn to (or affirmed) before me on _____ (*date*) by _____(*name*).

_____
[Signature of notarial officer]

_____
[Name – typed, stamped, or printed]
(Seal, if any) Notary Public for the state of Montana
Residing at _____
My commission expires _____

NOTE: ATTACH PROPOSED DECREE OF DISSOLUTION

**Certificate of Service (Not for Joint Affidavits)**

On the ____ day of _____, 20_____, I swear under oath that I served a copy of this affidavit by ☐hand delivery **OR** ☐mailing a true and correct copy with postage prepaid and addressed to:

_____
Name

_____
Street

_____
City State Zip Code

_____
Signature

_____
Printed Name

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_____
Name

_____
Mailing Address

_____
City, State Zip Code

_____
Phone Number

_____
E-mail Address (optional)

☐Petitioner ☐Respondent ☐Co Petitioner

**Appearing without a lawyer**

**MONTANA _____ JUDICIAL DISTRICT COURT**
**_____ COUNTY**

| In re the Marriage of:<br><br>_____,<br>☐Petitioner ☐Co Petitioner,<br><br>and<br><br>_____,<br>☐Respondent ☐Co Petitioner. | **Case No:** _____<br><br>**Notice of Entry of Decree** |
|---|---|

Notice is hereby given that on the _____ day of _____, 20___, the Court entered a Final Decree of Dissolution in the above-entitled action. A true and correct conformed copy of the Final Decree of Dissolution is attached to this Notice and served upon you.

DATED this _____ day of _____ , 20___.

_____
☐Petitioner ☐Respondent ☐Co Petitioner

_____
Print Name


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## Proof of Service

I, _____, attest that a true and correct copy of the foregoing Notice of Entry of Decree was served the ____ day of _____, 20___, by mailing said copy, postage paid, to:

_____
*Name*

_____
*Street Address*

_____
*City, State Zip Code*

**I declare under penalty of perjury and under the laws of the state of Montana that the information in this document is true and correct. I understand that it is a crime to give false information in this document.**

Dated this _____day of _____, 20__.

Signature: _____
☐Petitioner ☐Respondent ☐Co Petitioner

Print Name: _____


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