

**State of Minnesota**

**District Court**

County of: \_\_\_\_\_

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Assigned Judge: \_\_\_\_\_  
Case Type: Dissolution with Children

**In Re the Marriage of:**

\_\_\_\_\_  
Name of Petitioner (first, middle, last)  
and

**Findings of Fact,  
Conclusions of Law, Order  
for Judgment, Judgment  
and Decree**

\_\_\_\_\_  
Name of Respondent (first, middle, last)

A. This proceeding for dissolution of marriage came before the undersigned judge of district court on:

\_\_\_\_\_ (date) at \_\_\_\_\_ (location)  
of Minnesota. Petitioner  did  did not appear. Respondent  did  did not appear.  
\_\_\_\_\_ appeared as attorney for  
\_\_\_\_\_.

B. Petitioner  is NOT represented by an attorney OR  
Petitioner  is represented by the following attorney: \_\_\_\_\_

C. Respondent  is NOT represented by an attorney OR  
Respondent  is represented by the following attorney: \_\_\_\_\_

D. Service of the *Summons and Petition for Dissolution of Marriage*:

- Respondent was personally served on \_\_\_\_\_ **OR**
- Respondent signed an *Admission of Service* on \_\_\_\_\_ **OR**
- Respondent was served by alternate means as ordered by the court as follows:
  - By mailing the *Summons and Petition* to Respondent at the address(es) stated in the *Order for Service by Alternate Means* on this date: \_\_\_\_\_
  - By publication of the *Summons* in \_\_\_\_\_ newspaper for 3 consecutive weeks, once a week and the three following dates: \_\_\_\_\_, and \_\_\_\_\_.

E. Petitioner was served with an *Answer and Counterpetition*:  YES  NO

IF YES, Petitioner was served with the *Answer and Counterpetition* on \_\_\_\_\_  
Month Day Year

F. Respondent did not respond, so Petitioner proceeded by default. (Note: If the parties reached an agreement, use the *Stipulated Findings of Fact, Conclusions of Law, Order for Judgment, Judgment and Decree.*)

### Findings of Fact

#### 1. Information about the Petitioner

Full Name: \_\_\_\_\_  
First Middle Last

Address where you live: \_\_\_\_\_  
Street Address Apt. No.

\_\_\_\_\_  
City County State Zip Code

Mailing address:  Same as above address OR

\_\_\_\_\_  
Street Address Apt. No.

\_\_\_\_\_  
City County State Zip Code

Date of Birth: \_\_\_\_\_

List all of Petitioner's former or other names or write "None":

\_\_\_\_\_  
First Middle Last

\_\_\_\_\_  
First Middle Last

Petitioner's social security number is listed on Confidential Form 11.1 and submitted along with the Petition.

#### 2. Information about the Respondent

Full Name: \_\_\_\_\_  
First Middle Last

Address: \_\_\_\_\_  
Street Address Apt. No.

\_\_\_\_\_  
City County State Zip Code

Respondent's address is unknown to Petitioner.

Respondent's Date of Birth: \_\_\_\_\_

List all of Respondent's former or other names or write "None":

\_\_\_\_\_  
First Middle Last

\_\_\_\_\_  
First Middle Last

### 3. Our Marriage

Petitioner and Respondent were married on (month, day, year) \_\_\_\_\_  
in the City of \_\_\_\_\_, County of \_\_\_\_\_,  
State \_\_\_\_\_, Country of \_\_\_\_\_.

### 4. 180 Day Requirement

- a. Has Petitioner been living in Minnesota for the past six (6) months?  YES  NO
- b. Has Respondent been living in Minnesota for the past six (6) months?  YES  NO  UNKNOWN
- c. Petitioner and Respondent were married in Minnesota, but neither Petitioner nor Respondent reside in Minnesota, nor reside in a jurisdiction that will allow us to maintain an action for dissolution because of the sex or sexual orientation of the Petitioner and Respondent.  YES  NO

### 5. Armed Forces

- a. Is Petitioner an active duty member of the armed forces?  YES  NO  
**IF YES**, has Petitioner been stationed in Minnesota for the past six (6) months?  YES  NO
- b. Is Respondent an active duty member of the armed forces?  YES  NO  UNKNOWN  
**IF YES**, has Respondent been stationed in Minnesota for the past six (6) months?  YES  NO

### 6. Marriage Cannot be Saved

There has been an irretrievable breakdown of my marriage relationship with Respondent and the marriage cannot be saved.

**7. Physical Living Situation**

a. Do the Petitioner and Respondent live together at this  YES  NO time?

If NO, the date we separated was: \_\_\_\_\_

If YES, why are you living together at this time?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**8. Other Proceedings**

a. Has a separate court case for marriage dissolution,  YES  NO legal separation, custody, paternity or annulment already been started by Petitioner or Respondent in Minnesota or elsewhere?

If YES, the type of court case is \_\_\_\_\_,  
and it was started in \_\_\_\_\_ County,  
in the State of \_\_\_\_\_, and the court file number is \_\_\_\_\_,  
and the status or outcome of the case is:  OPEN  CLOSED  UNKNOWN

b. Has a County started a Support case involving the  YES  NO Petitioner and the Respondent or their children?

If YES, the case was started in \_\_\_\_\_ County,  
in the State of \_\_\_\_\_ and the court file number is \_\_\_\_\_.

**A copy of the Support Order is submitted with the Petition, or the case is**  
 Dismissed  Pending

**9. Protection or Harassment Order**

a. Is an *Order for Protection* or a *Harassment/ Restraining Order* in effect regarding Petitioner and Respondent?  YES  NO

If YES:

a. The *Order* protects:  Petitioner  Respondent

the children and the *Order* was filed in \_\_\_\_\_ County,  
 in the State of \_\_\_\_\_ on \_\_\_\_\_ date,  
 and the court file number is \_\_\_\_\_.

b. Does the *Order* include an order to pay child support?  YES  NO

**10. Child Protection Court Case**

a. Is a child protection case involving Petitioner and Respondent's children taking place in Minnesota or another state?  YES  NO

If YES, the case is in \_\_\_\_\_ County,  
 in the State of \_\_\_\_\_ and the court file number is \_\_\_\_\_.

The name of the child or children involved in the child protection case is:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**11. Children Petitioner and Respondent Have Together (Joint Children)**

"Child" means a living person under the age 18, or under age 20 and still in high school.

a. Are there any children born to or adopted by Petitioner and Respondent together, either before or during the marriage?  YES  NO

If YES,

Full Name of Child	Date of Birth	Age	Child Currently Lives With
			<input type="radio"/> Petitioner <input type="radio"/> Respondent <input type="radio"/> Both parents OR _____ (write in name)
			<input type="radio"/> Petitioner <input type="radio"/> Respondent <input type="radio"/> Both parents OR _____ (write in name)

			<input type="radio"/> Petitioner <input type="radio"/> Respondent <input type="radio"/> Both parents OR <hr/> (write in name)
			<input type="radio"/> Petitioner <input type="radio"/> Respondent <input type="radio"/> Both parents OR <hr/> (write in name)
			<input type="radio"/> Petitioner <input type="radio"/> Respondent <input type="radio"/> Both parents OR <hr/> (write in name)

The social security number of the children is/are listed on Confidential Form 11.1 and submitted along with the Petition.

If a child is living with someone other than a parent, write the child's address below:

Address : \_\_\_\_\_

Street Address

Apt. No.

  

\_\_\_\_\_

City

County

State

Zip Code

b. Has each child born to or adopted by Petitioner and Respondent together lived in Minnesota for the past six (6) months?       YES       NO

If NO, name the child or children, name the State(s) the child has lived in during the past 6 months, and the dates the child lived in each state:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**12. Adult Dependent Children**

Support can be ordered for a joint child over age 18 who cannot support him/herself because of a physical or mental condition.

- a. Is there an adult joint child born to or adopted by Petitioner and Respondent who is not able to support him/herself because of a physical or mental condition?  YES  NO

If YES, the full name, date of birth and age of each adult dependent is:

Full Name of Dependent	Date of Birth	Age

The social security number of the adult dependent children is/are listed on Confidential Form 11.1 and submitted along with the Petition.

### 13. Pregnancy

- a. Is Petitioner pregnant?  YES  NO

If Petitioner is pregnant, answer (i) and (ii):

(i) The date the baby is due is \_\_\_\_\_

- (ii) Do Petitioner and Respondent agree that the spouse is the biological father of the unborn child?  YES  NO

If NO,  Petitioner  Respondent claims husband is not the biological father of the child.

- b. Is Respondent pregnant?  YES  NO

If Respondent is pregnant, answer (i) and (ii):

(i) The date the baby is due is \_\_\_\_\_

- (ii) Do Petitioner and Respondent agree that the spouse is the biological father of the unborn child?  YES  NO

If NO,  Petitioner  Respondent claims husband is not the biological father of the child.

### 14. Petitioner's Children from Other Relationship (Non-Joint Children)

- a. Does Petitioner have minor children *born prior to the marriage* from another marriage or relationship?  YES  NO

If **YES**, the full name, date of birth and age of each child born prior to the marriage is:

Full Name of Child and Age	Date of Birth	Does Child Live with Petitioner?	Is Petitioner Court-Ordered to pay Child Support for this Child?
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO

b. Has Petitioner given birth, *since marrying Respondent*,  YES  NO to a minor child who is not a child of the Respondent?

If **YES**, answer (i), (ii), (iii) and (iv):

(i). List the full name, date of birth and age of each child born to Petitioner since marrying Respondent, who is not a child of the Respondent:

Full Name of Child and Age	Date of Birth	Does Child Live with Petitioner?	Is Petitioner Court-Ordered to pay Child Support for this Child?
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO

(ii) Is there a Court Order naming someone other than  YES  NO the Respondent as the father of the children listed in (i) above?

If **YES**, attach a copy of the Order. The Order is for:

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Full Name of children

(iii) Have the Petitioner and biological father signed a  YES  NO Minnesota Recognition of Parentage for any of the children listed in (i) above?

(iv) Has the Respondent signed the "Spouse's Non-Parentage Statement" for any of the children listed at  YES  NO (i) above?



If YES, state the name of the child: \_\_\_\_\_  
 and submit a copy of the "Spouse's Non-Parentage Statement."

If NO, why not?  
 \_\_\_\_\_  
 \_\_\_\_\_

**15. Respondent's Children from Other Relationship (Non-Joint Children)**

a. Does Respondent have minor children born *prior to the marriage* from another marriage or relationship?     YES     NO     UNKNOWN

If YES, the full name, date of birth and age of each child born *prior to the marriage* is:

Full Name of Child and Age	Date of Birth	Does Child Live with Respondent?	Is Respondent Court-Ordered to pay Child Support for this Child?
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO

b. Has Respondent given birth, *since marrying Petitioner*, to a minor child who is not a child of the Petitioner?     YES     NO

If YES, answer (i), (ii), (iii) and (iv):

(i). List the full name, date of birth and age of each child born to Respondent since marrying Petitioner, who is not a child of the Petitioner:

Full Name of Child and Age	Date of Birth	Does Child Live with Respondent?	Is Respondent Court-Ordered to pay Child Support for this Child?
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO
		<input type="radio"/> YES <input type="radio"/> NO	<input type="radio"/> YES <input type="radio"/> NO

(ii) Is there a Court Order naming someone other than the Petitioner as the father of the children listed in (i) above?     YES     NO

If **YES**, attach a copy of the Order. The Order is for:

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Full Name of children

(iii) Have the Respondent and biological father signed  YES  NO  
a Minnesota Recognition of Parentage for any of the  
children listed in (i) above?

and submit a copy of the Recognition of Parentage.

If **YES**, state the name of the child: \_\_\_\_\_

If **NO**, why not? \_\_\_\_\_

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(iv) Has the Petitioner signed the "Spouse's Non-  YES  NO  
Parentage Statement" for any of the children listed at  
(i) above?

**and submit a copy of the "Spouse's Non-Parentage Statement."**

If YES, state the name of the child: \_\_\_\_\_

If **NO**, why not? \_\_\_\_\_

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## 16. Custody

It is in the child's best interests that legal custody be granted as follows: (check one)

- Joint legal custody to both parents  
 Sole legal custody to  Petitioner  Respondent

It is in the child's best interests that physical custody be granted as follows: (check one)

- Joint physical custody to both parents  
 Sole physical custody to  Petitioner  Respondent

## 17. Parenting Time

a. It is in the best interests of the children that:

It is in the best interests of the children that Petitioner's parenting time with the joint children  
be: (check one)

- unsupervised  supervised  reserved

If parenting time is unsupervised for both parents, skip to Question 18.

For supervised parenting time answer b and c. For reserved parenting time, answer d.

b. Explain how unsupervised parenting time by Petitioner is likely to endanger the child's physical or emotional health or impair the child's emotional development:

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c. State who should supervise Petitioner's parenting time, and if there is a cost involved, who should pay the cost and any other important details:

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d. Explain why Petitioner's parenting time should be reserved:

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It is in the best interests of the children that Respondent's parenting time with the joint children be: (check one)

unsupervised       supervised       reserved

For supervised parenting time answer b and c. For reserved parenting time, answer d.

b. Explain how unsupervised parenting time by Respondent is likely to endanger the child's physical or emotional health or impair the child's emotional development:

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c. State who should supervise Respondent's parenting time, and if there is a cost involved, who should pay the cost and any other important details:

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d. Explain why Respondent's parenting time should be reserved:

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**18. Public Assistance from the State of Minnesota**

If either party is receiving public assistance from the State of Minnesota or applies for it after this proceeding is started, the Petitioner must give notice of this marriage dissolution action to the Public Authority in the county paying for the assistance.

a. Does Petitioner receive public assistance from the State of Minnesota?       YES     NO

**If YES**, the assistance is from \_\_\_\_\_ County. (Check all that apply):

- MFIP in the amount of \_\_\_\_\_ per month
- Tribal TANF in the amount of \_\_\_\_\_ per month
- General Assistance in the amount of \_\_\_\_\_ per month
- Child Care Assistance     MinnesotaCare     Medical Assistance

b. Does Respondent receive public assistance from the State of Minnesota?       YES     NO     UNKNOWN

**If YES**, the assistance is from \_\_\_\_\_ County. (Check all that apply):

MFIP in the amount of \_\_\_\_\_ per month

Tribal TANF in the amount of \_\_\_\_\_ per month

General Assistance in the amount of \_\_\_\_\_ per month

Child Care Assistance     MinnesotaCare     Medical Assistance

c. Do the joint children of the parties receive public assistance from the State of Minnesota?     YES     NO     UNKNOWN

**If YES**, the assistance is from \_\_\_\_\_ County. (Check all that apply):

MFIP     Tribal TANF     Medical Assistance     MinnesotaCare

IV-E Foster Care

### 19. Supplemental Security Income (SSI)

Supplemental Security Income (SSI) is a Federal income supplement program. It is available to low-income people if they are over age 65, or blind or disabled.

a. Does Petitioner receive Supplemental Security Income (SSI)?     YES     NO

IF YES, in the amount of \_\_\_\_\_ per month.

b. Does Respondent receive Supplemental Security Income (SSI)?     YES     NO

IF YES, in the amount of \_\_\_\_\_ per month.

c. Do any of the joint children of the parties receive Supplemental Security Income (SSI)?     YES     NO

IF YES, in the amount of \_\_\_\_\_ per month.

What is the name of the child receiving SSI? \_\_\_\_\_

### 20. School

Is Petitioner currently enrolled in school?     YES     NO

a. If YES, the name of the school is \_\_\_\_\_

b. The type of school is     High School     College     Vocational     Other

c. The type of degree expected is \_\_\_\_\_ and the expected graduation date is \_\_\_\_\_.

Is Respondent currently enrolled in school?     YES     NO     UNKNOWN

a. If YES, the name of the school is \_\_\_\_\_

b. The type of school is     High School     College     Vocational     Other

c. The type of degree expected is \_\_\_\_\_ and the expected graduation date is \_\_\_\_\_.

**21. Petitioner's Employment**

a. Is Petitioner employed?  YES  NO

b. Is Petitioner self-employed?  YES  NO

c. Is Petitioner working at least 40 hours per week?  YES  NO

If you are unemployed or working less than 40 hours a week, answer these questions:

i. Why are you unemployed or working less than 40 hours a week?

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ii. What is your past work experience (types of jobs, hours, pay, length of time at the job, etc.) and what are your professional qualifications or licenses?

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d. Current Employment: (If Petitioner has more than two jobs at this time, use an attachment for the additional jobs.)

\_\_\_\_\_  
Name of Petitioner's Employer (If self-employed, list name and business address)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Name of Petitioner's Employer (If self-employed, list name and business address)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip Code

<b>Questions about Current Jobs</b>	<b>1st Job</b>	<b>2nd Job</b>
Are you paid by the hour or do you have a salary?	<input type="radio"/> hourly <input type="radio"/> salary	<input type="radio"/> hourly <input type="radio"/> salary
What is the average number of hours you work per week?	_____ hours	_____ hours
How much overtime pay do you receive per week on average?	_____	_____
Do you receive bonuses? <input type="radio"/> Yes <input type="radio"/> No	If Yes, how much did you receive in bonuses last year? _____	If Yes, how much did you receive in bonuses last year? _____
	How much do you expect to receive this year? _____	How much do you expect to receive this year? _____

**22. Petitioner's Income**

If you do not have income in a category, enter zero (0). Do not list public assistance benefits as income (e.g., MFIP, GA, SSI).

**Source of Income** **Amount Per Month** (or zero) before deductions/taxes

Self Employment Income \_\_\_\_\_ per month.

Self Employment income means gross receipts minus costs of goods sold, minus ordinary and necessary business expenses. Include Schedule C from last year's tax return to this Petition.

Job with \_\_\_\_\_ per month.

Your monthly income from a job = Hourly wage x Hours worked per week x 4.33 (weeks per month)

Second job with \_\_\_\_\_ per month.

Third job with \_\_\_\_\_ per month.

Commissions from all jobs \_\_\_\_\_ per month.

Divide the total amount you expect this year by 12 to get a monthly average.

Unemployment benefits \_\_\_\_\_ per month.

Social Security Retirement, Survivors or Disability Income (RSDI) (do not include SSI) \_\_\_\_\_ per month.

Investment and Rental Income \_\_\_\_\_ per month.

Annuity Payments \_\_\_\_\_ per month.

Pension or Disability from work or military \_\_\_\_\_ per month.

Worker's Compensation \_\_\_\_\_ per month.

Court-ordered spousal maintenance you receive \_\_\_\_\_ per month.

Other \_\_\_\_\_ per month.

Add all of the above:            Total monthly income \_\_\_\_\_ per month.

Enter the amount of child support you are court-ordered to pay for any non-joint children \_\_\_\_\_ per month.

Enter the amount of spousal maintenance you are court-ordered to pay to your current or former spouse \_\_\_\_\_ per month.

Enter the amount of Social Security or Veteran's Benefits provided to a joint child because of your retirement, disability or other eligibility \_\_\_\_\_ per month.

If you entered an amount, which parent receives the payment for the child?     Petitioner     Respondent

**23. Living Expenses for the Family**

- a. Petitioner and Respondent and our children are still living together.
- b. Petitioner and Respondent are living separately.

Our current monthly living expenses for our family total \_\_\_\_\_

Our monthly family living expenses **before** we separated totaled \_\_\_\_\_

At this time, Petitioner's separate living expenses total \_\_\_\_\_ and Respondent's living expenses total \_\_\_\_\_ or  unknown to Petitioner. Of the total current living expense for the Petitioner what monthly dollar amount is for expenses just for the children that live with the Petitioner? \_\_\_\_\_ Of the total current monthly living expenses for the Respondent, \_\_\_\_\_ is for expenses just for the children that live with the Respondent, or  this is UNKNOWN.

**24. Expenses for Special Needs for the Children**

- a. Is there a child of the parties who has special needs and extraordinary medical expenses?     YES     NO

If Yes, Name of child with special needs \_\_\_\_\_

Describe the needs \_\_\_\_\_



- b. Does Petitioner's monthly living expense (stated at #23) include the special needs expenses for the child?     YES     NO
- c. Does Respondent's monthly living expense (stated at #23) include the special needs expenses for the child?     YES     NO

**25. Respondent's Employment**

- a. Is Respondent employed?     YES     NO     UNKNOWN
- b. Is Respondent self-employed?     YES     NO     UNKNOWN
- c. Is Respondent working at least 40 hours per week?     YES     NO     UNKNOWN

If Respondent is unemployed or working less than 40 hours a week, answer these questions:

i. Why is Respondent unemployed or working less than 40 hours a week?

ii. What is Respondent's past work experience (types of jobs, hours, pay, length of time at the job, etc.) and professional qualifications or licenses?

d. Current Employment: (If Respondent has more than two jobs at this time, use an attachment for the additional jobs.)

\_\_\_\_\_  
Name of Respondent's Employer (If self-employed, list name and business address)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Name of Respondent's Employer (If self-employed, list name and business address)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

Questions about Current Jobs	1st Job	2nd Job
Is Respondent paid by the hour or salaried?	<input type="radio"/> hourly <input type="radio"/> salary <input type="radio"/> Unknown	<input type="radio"/> hourly <input type="radio"/> salary <input type="radio"/> Unknown
What is the average number of hours Respondent works per week?	_____ hours <input type="checkbox"/> Unknown	_____ hours <input type="checkbox"/> Unknown
How much overtime pay does Respondent receive per week on average?	_____ <input type="checkbox"/> Unknown	_____ <input type="checkbox"/> Unknown
Does Respondent receive bonuses?  <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	If Yes, how much did Respondent receive in bonuses last year? _____ <input type="checkbox"/> Unknown	If Yes, how much did Respondent receive in bonuses last year? _____ <input type="checkbox"/> Unknown
	How much does Respondent expect to receive this year? _____	How much does Respondent expect to receive this year? _____

## 26. Respondent's Income

If Respondent has no income in a category, enter zero (0). Do not list public assistance benefits as income (e.g., MFIP, GA, SSI).

<b>Source of Income</b>	<b>Amount Per Month (or zero) before deductions/taxes</b>
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Self Employment Income \_\_\_\_\_ per month.

Self Employment income means gross receipts minus costs of goods sold, minus ordinary and necessary business expenses. Include Schedule C from last year's tax return to this Petition.

Job with \_\_\_\_\_ per month.

Your monthly income from a job = Hourly wage x Hours worked per week x 4.33 (weeks per month)

Second job with \_\_\_\_\_ per month.

Third job with \_\_\_\_\_ per month.

Commissions from all jobs \_\_\_\_\_ per month.

Divide the total amount you expect this year by 12 to get a monthly average.

Unemployment benefits \_\_\_\_\_ per month.

Social Security Retirement, Survivors or Disability Income (RSDI) (do not include SSI) \_\_\_\_\_ per month.

Investment and Rental Income \_\_\_\_\_ per month.

Annuity Payments \_\_\_\_\_ per month.  
 Pension or Disability from work or military \_\_\_\_\_ per month.  
 Worker's Compensation \_\_\_\_\_ per month.  
 Court-ordered spousal maintenance received by Respondent \_\_\_\_\_ per month.  
 Other \_\_\_\_\_ per month.  
 Add all of the above: Total monthly income \_\_\_\_\_ per month.

Enter the amount of child support Respondent is court-ordered to pay for any non-joint children \_\_\_\_\_ per month.  
 Enter the amount of spousal maintenance Respondent is court-ordered to pay to a current or former spouse \_\_\_\_\_ per month.  
 Enter the amount of Social Security or Veteran's Benefits provided to a joint child because of Respondent's retirement, disability or other eligibility \_\_\_\_\_ per month.  
 If you entered an amount, which parent receives the payment for the child?     Petitioner     Respondent

**OR**

The Court does not have detailed information about Respondent's income, but finds that Respondent's pay is \_\_\_\_\_ per  
 week     month     year, with bonuses, overtime or  
 or commissions in the additional amount of \_\_\_\_\_ per  
 week     month     year    This is Respondent's  
 Net Income (after taxes and deductions) or  
 Gross income (before taxes and deductions.)

**OR**

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**27. Child Care Costs**

Are there child care costs for the joint children because of work or school?     YES     NO

If YES, **submit with this Petition** a receipt or signed letter from the child care provider showing the cost of child care, and answer (a), (b), and (c):

a. How many of the joint children need child care?  One  Two  Three  \_\_\_\_\_

b. How much does the daycare center(s) or babysitter charge per month? \_\_\_\_\_

(If you pay by the week, multiply the weekly charge by 4.33 to get the charge per month. If the costs vary during the year, use the total yearly costs and divided by 12.)

c. Who pays the child care cost?

Petitioner pays \_\_\_\_\_ per month

Respondent pays \_\_\_\_\_ per month

The County pays \_\_\_\_\_ per month through a subsidy or child care assistance.

d. If the County pays, who applied for the child care assistance?

Petitioner  Respondent  There is no county assistance

## 28. Health Care Coverage

a. Minnesota Care and Medical Assistance are available from the State of Minnesota for people who qualify. Who receives MinnesotaCare or Medical Assistance?

Petitioner  Respondent  Joint Children  No one

b. Does Petitioner currently have medical insurance?  YES  NO  
(other than MinnesotaCare or Medical Assistance)

i. Where does Petitioner get the medical insurance?

through his/her employment  buys private medical insurance

ii. How much does the medical insurance cost?

\_\_\_\_\_ per month for single coverage

\_\_\_\_\_ per month for single plus spouse (if this is offered)

\_\_\_\_\_ per month for family coverage

iii. Who is currently covered by this medical insurance?

Petitioner  Respondent  All the joint children  Some of the joint children

Non-joint children Name the joint children who are covered \_\_\_\_\_

c. Does Petitioner have dental insurance? (other than MinnesotaCare or Medical Assistance)  YES  NO

i. Where does Petitioner get the dental insurance?

through his/her employment  buys private dental insurance

ii. How much does the dental insurance cost?

\_\_\_\_\_ per month for single coverage  
\_\_\_\_\_ per month for single plus spouse (if this is offered)  
\_\_\_\_\_ per month for family coverage

Dental is included in the medical insurance costs.

iii. Who is currently covered by this dental insurance?

Petitioner  Respondent  All the joint children  Some of the joint children

Non-joint children Name the joint children who are covered \_\_\_\_\_

d. Does Respondent have medical insurance? (other than MinnesotaCare or Medical Assistance)  YES  NO  UNKNOWN

i. Where does Respondent get the medical insurance?

through his/her employment  buys private medical insurance

ii. How much does the medical insurance cost?

\_\_\_\_\_ per month for single coverage  
\_\_\_\_\_ per month for single plus spouse (if this is offered)  
\_\_\_\_\_ per month for family coverage

iii. Who is currently covered by this medical insurance?

Petitioner  Respondent  All the joint children  Some of the joint children

Non-joint children Name the joint children who are covered \_\_\_\_\_

e. Does Respondent have dental insurance? (other than MinnesotaCare or Medical Assistance)  YES  NO  UNKNOWN

i. Where does Respondent get the dental insurance?

through his/her employment  buys private dental insurance

ii. How much does the dental insurance cost?

\_\_\_\_\_ per month for single coverage  
\_\_\_\_\_ per month for single plus spouse (if this is offered)  
\_\_\_\_\_ per month for family coverage

Dental is included in the medical insurance costs.

iii. Who is currently covered by this dental insurance?

Petitioner  Respondent  All the joint children  Some of the joint children

Non-joint children Name the joint children who are covered \_\_\_\_\_

f. If the joint children are without health care coverage,  YES  NO  
is coverage available for purchase through  
Petitioner's or Respondent's employer?

g. Other:

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## 29. Spousal Maintenance

Spousal Maintenance is money paid by one spouse to the other for living expenses. Check the box that applies.

- Petitioner and Respondent can each pay their own living expenses and do not need spousal maintenance at this time, or in the future.
- Petitioner or Respondent may need spousal maintenance in the future. The court should reserve maintenance to allow either party to ask for spousal maintenance in the future because: (explain why you want to do this.)
- Petitioner needs spousal maintenance from Respondent now.
- Respondent needs spousal maintenance from Petitioner now.

Explain why spousal maintenance should be reserved:

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Petitioner is \_\_\_\_\_ years of age, Petitioner and Respondent have been married for \_\_\_\_\_ years. Petitioner has the following education: \_\_\_\_\_

Petitioner's gross monthly income totals \_\_\_\_\_ Petitioner's monthly expenses total \_\_\_\_\_ and Petitioner is not able to maintain the standard living established of during the marriage because:

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Respondent has the ability to pay Petitioner \_\_\_\_\_ per month for spousal maintenance.

Respondent is \_\_\_\_\_ years of age, Petitioner and Respondent have been married for \_\_\_\_\_ years. Respondent has the following education: \_\_\_\_\_

Respondent's gross monthly income totals \_\_\_\_\_ Respondent's monthly expenses

total \_\_\_\_\_ and Respondent is not able to maintain the standard living established of during the marriage because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Petitioner has the ability to pay Respondent \_\_\_\_\_ per month for spousal maintenance.

**30. Vehicles**

Vehicles are cars, trucks, boats, motorcycles, snowmobiles, personal watercraft, all terrain vehicles owned by Petitioner or Respondent together or separately, including vehicles purchased after separation:

Does Petitioner own a vehicle?  YES  NO

Does Respondent own a vehicle?  YES  NO  UNKNOWN

List all vehicles owned by Petitioner or Respondent together or separately:

Type of Vehicle (car, boat, truck, etc.)	Year/Make Model	Name(s) on Title	Value	Balance Owed	Monthly Payment
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**31. Marital Property**

Marital property means anything that you or your spouse now own that was received or bought during the marriage, even during the times you were separated. Marital property includes household goods, furniture, jewelry, boats, real estate and other things. Marital property does *not* include a gift or inheritance received by one spouse *alone*.

Has the marital property been divided already to the Petitioner's satisfaction?  YES  NO

**If NO**, Petitioner requests the following marital property:

\_\_\_\_\_

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**32. Non-Marital Property**

Non-marital property means: (1) anything that you or your spouse owned before the marriage; (2) anything that you or your spouse received as a gift, bequest, devise, or inheritance *to you or your spouse alone*; (3) anything that you or your spouse got in trade or in exchange for your non-marital property; (4) anything that is an increase in the value of non-marital property; (5) anything you or your spouse received after the valuation date set by the court, or (6) anything defined as non-marital property by a valid antenuptial contract.

a. Does Petitioner have non-marital property?                     YES     NO

If Yes, list Petitioner's non-marital property:

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b. Does Respondent have non-marital property?                     YES     NO     UNKNOWN

If Yes, list Respondent's non-marital property:

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**33. Cash & Accounts - Not including Pension and Employer-Funded Retirement Accounts**

Does Petitioner have money in banks, savings, cash or investments?     YES     NO

Does Respondent have money in banks, savings, cash or investments?     YES     NO     UNKNOWN



If YES,

a. List all accounts owned by you alone, your spouse alone, or owned by both of you jointly including those opened after separation. "Type of account" means checking, savings, money market accounts, certificates of deposit, stocks, bonds, stock options, mutual funds, savings bonds, and Treasury Bills, etc. Use Confidential Information Form 11.1 (CON111) to list Financial Institution name, account holder name(s), and account numbers.

Do not include Pension or Employer-Funded Retirement Accounts, which are listed at #37.

<b>Financial Institution</b>	<b>Type of Account</b>	<b>Amount</b>	<b>Belongs to: (name on account)</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

b. List cash not listed at a.:

Petitioner has cash in the amount of: \_\_\_\_\_

Respondent has cash in the amount of: \_\_\_\_\_ OR  UNKNOWN

### 34. Business Interest

Does Petitioner have an interest in a business?  YES  NO

a. If YES, the name of the business is \_\_\_\_\_

the address is \_\_\_\_\_

and the value is \_\_\_\_\_ How did you arrive at this value?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does Respondent have an interest in a business?  YES  NO  UNKNOWN

b. If YES, the name of the business is \_\_\_\_\_

the address is \_\_\_\_\_

and the value is \_\_\_\_\_ How did you arrive at this value?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 35. Manufactured Home

Does Petitioner have a manufactured home?  YES  NO

Does Respondent have a manufactured home?  YES  NO  UNKNOWN

**If either Petitioner or Respondent own a manufactured home, together or separately, complete the following information:**

a. Address of the manufactured home: \_\_\_\_\_

in the city of \_\_\_\_\_ state of \_\_\_\_\_ .

b. What type of home is it? (single, double-wide, etc.) \_\_\_\_\_

c. Whose name(s) is on the title? \_\_\_\_\_

d. When was the home purchased? \_\_\_\_\_

e. What was the purchase price? \_\_\_\_\_

f. What is the current values of the home? \_\_\_\_\_

g. How did you arrive at this value?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

h. How much money is still owed on the home? \_\_\_\_\_

i. If money is owed on the home, who is the money owed to? \_\_\_\_\_

j. Do you own the land the home sits on, or do you rent a lot?  Rent  Own

Note: If you own the lot, you must list the land at Paragraph 36.

### 36. Real Property - Land, Buildings, Contracts for Deed

All real property now owned by Petitioner or Respondent together or separately must be listed. Include real property acquired before the marriage, during the marriage and after separation.

- a. Do Petitioner and Respondent jointly own real property?  YES  NO
- b. Does Petitioner own real property solely in his/her own name or with someone other than Respondent?  YES  NO
- c. Does Respondent own real property solely in his/her own name or with someone other than the Petitioner?  YES  NO  UNKNOWN
- d. How many properties are owned by you and your spouse in total?  
(If you or your spouse do not own any property, answer this question and then skip to #37)
- None  One  Two  Three  \_\_\_\_\_

**If you or your spouse own real property, separately or together**, complete the following information about the property. If there is more than one piece of real property, photocopy and complete a Real Property Information page for each piece of property. Staple the additional sheets to this Petition and label each sheet "Attachment to Findings of Fact, Conclusions of Law, Order for Judgment, Judgment and Decree of "

Real Property Information

1. Real Estate belongs to: (List full names of all owners)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Legal Description is: (The full legal description **must** be included. Copy the legal description from the deed. Do not use the property tax statement legal description. If the legal description is long, you may use an attachment. Type or print neatly.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Street address of the real property is \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

The property is in \_\_\_\_\_ County.

4. Purchase Date (month, day , year) \_\_\_\_\_ and purchase price: \_\_\_\_\_

5. Mortgages or loans: (List all mortgages and loans on the property)

There are no mortgages or loans on this property.

1st Mortgage: Amount currently owed: \_\_\_\_\_

Name of lender: \_\_\_\_\_

2nd Mortgage: Amount currently owed: \_\_\_\_\_

Name of lender: \_\_\_\_\_

Other mortgages or loans: \_\_\_\_\_

6. Current Market Value of this property: \_\_\_\_\_

How did you arrive at this value?

\_\_\_\_\_

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7. This property is the homestead:  YES  NO

Real Property #2 Information

1. Real Estate belongs to: (List full names of all owners)

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2. Legal Description is: (The full legal description **must** be included. Copy the legal description from the deed. Do not use the property tax statement legal description. If the legal description is long, you may use an attachment. Type or print neatly.)

3. Street address of the real property is \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

The property is in \_\_\_\_\_ County.

4. Purchase Date (month, day , year) \_\_\_\_\_ and purchase price: \_\_\_\_\_

5. Mortgages or loans: (List all mortgages and loans on the property)

There are no mortgages or loans on this property.

1st Mortgage: Amount currently owed: \_\_\_\_\_

Name of lender: \_\_\_\_\_

2nd Mortgage: Amount currently owed: \_\_\_\_\_

Name of lender: \_\_\_\_\_

Other mortgages or loans: \_\_\_\_\_

6. Current Market Value of this property: \_\_\_\_\_

How did you arrive at this value?

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7. This property is the homestead:  YES  NO

**37. Retirement Plans**

a. Does **Petitioner** have a retirement account? (IRA, 401(k), 403(b) or other)  YES  NO

The name of the Financial Institution, account holder name, and account number is listed on the Confidential Information Form 11.1 (CON111).

The current balance is: \_\_\_\_\_

b. Has **Petitioner**, or Petitioner's past or present employer, union, or other group, paid money into a pension, profit sharing, or other retirement plan for Petitioner?  YES  NO

**If YES:**

i. The name of the plan is: \_\_\_\_\_

ii. The employer, union, or group providing the plan is: \_\_\_\_\_

\_\_\_\_\_

iii. The date the Petitioner began working at the job, or joined the union or group plan is:

\_\_\_\_\_

iv. The type of plan is (e.g. defined benefit, defined contribution) \_\_\_\_\_

v. The present value of the pension or plan is: \_\_\_\_\_

c. Does **Respondent** have a retirement account? (IRA, 401(k), 403(b), or other)  YES  NO  UNKNOWN

The name of the Financial Institution, account holder name, and account number is listed on the Confidential Information Form 11.1 (CON111).

The current balance is: \_\_\_\_\_

d. Has **Respondent**, or Respondent's past or present employer, union or other group, paid money into a pension, profit sharing, or other retirement plan for Respondent?  YES  NO  UNKNOWN

**If YES, and it is a Pension, Profit-Sharing, or other Retirement Plan:**

i. The name of the plan is: \_\_\_\_\_

ii. The employer, union, or group providing the plan is: \_\_\_\_\_

\_\_\_\_\_

iii. The date the Respondent began working at the job, or joined the union or group plan is:

\_\_\_\_\_  
iv. The type of plan is (e.g. defined benefit, defined contribution) \_\_\_\_\_

v. The present value of the pension or plan is: \_\_\_\_\_

**38. Debts**

Does Petitioner have debt?  YES  NO

Does Respondent have debt?  YES  NO  UNKNOWN

if YES, list debts in your name, your spouse's name and in both names jointly. Include unpaid debts from before the marriage date, during the marriage, and after separation. Fill in all information completely and attach another sheet of paper if necessary.

<b>Money is owed to:</b>	<b>Money was used for:</b>	<b>Whose Name is on Account and when was Debt incurred?</b> Name                      Date	<b>Balance Owed</b>	<b>Monthly Payment</b>
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<b>Total Debt</b>				

**39. Name Change**

Does Petitioner want to change his/her name?  YES  NO

If YES, answer (a) through (c) below:

a. Petitioner's name should be changed to:

\_\_\_\_\_  
First    Middle    Last

Is this a former legal name or maiden name?  YES  NO

If NO, the reason the Petitioner wants to change to this name is:

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b. Petitioner has no intent to defraud or mislead anyone by changing his/her name:  True  False

c. Has Petitioner been convicted of a felony?  YES  NO

If YES, has Petitioner given notice of this request for name change to the proper authority as required by Minn. Stat. § 259.13?  YES  NO

Does Respondent want to change his/her name?  YES  NO

If YES, answer (a) through (c) below:

a. Respondent's name should be changed to:

First	Middle	Last
Is this a former legal name or maiden name? <input type="radio"/> YES <input type="radio"/> NO		

If NO, the reason the Respondent wants to change to this name is:

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b. Respondent has no intent to defraud or mislead anyone by changing his/her name:  True  False

c. Has Respondent been convicted of a felony?  YES  NO

If YES, has Respondent given notice of this request for name change to the proper authority as required by Minn. Stat. § 259.13?  YES  NO

**40. Other (Include other facts you think the Court should know.)**

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**BASED UPON THE ABOVE INFORMATION, the Court makes the following:**

**CONCLUSIONS OF LAW**

1. The bonds of matrimony between Petitioner and Respondent are dissolved, so they are single and not married.
2. **Legal Custody:** Legal custody means which parent has a say in the major decisions regarding the children's life including education, religious upbringing, and medical treatment. Granting legal custody to each minor child of the parties as follows:

**Name of child**

**Granting Legal Custody**

- |       |  |  |
|-------|--|--|
| _____ | <input type="radio"/> Solely to Petitioner <b>OR</b> | <input type="radio"/> Solely to Respondent <b>OR</b> |
|       | <input type="radio"/> Jointly to both parties.       |  |
| _____ | <input type="radio"/> Solely to Petitioner <b>OR</b> | <input type="radio"/> Solely to Respondent <b>OR</b> |
|       | <input type="radio"/> Jointly to both parties.       |  |
| _____ | <input type="radio"/> Solely to Petitioner <b>OR</b> | <input type="radio"/> Solely to Respondent <b>OR</b> |
|       | <input type="radio"/> Jointly to both parties.       |  |
| _____ | <input type="radio"/> Solely to Petitioner <b>OR</b> | <input type="radio"/> Solely to Respondent <b>OR</b> |
|       | <input type="radio"/> Jointly to both parties.       |  |
| _____ | <input type="radio"/> Solely to Petitioner <b>OR</b> | <input type="radio"/> Solely to Respondent <b>OR</b> |
|       | <input type="radio"/> Jointly to both parties.       |  |

3. **Physical Custody:** Physical custody identifies which parent will handle the routine daily care and control of the children. Granting **physical** custody of each of the minor children of the parties as follows:

**Name of child**

**Granting Physical Custody**

- |       |  |  |
|-------|--|--|
| _____ | <input type="radio"/> Solely to Petitioner <b>OR</b> | <input type="radio"/> Solely to Respondent <b>OR</b> |
|       | <input type="radio"/> Jointly to both parties.       |  |
| _____ | <input type="radio"/> Solely to Petitioner <b>OR</b> | <input type="radio"/> Solely to Respondent <b>OR</b> |
|       | <input type="radio"/> Jointly to both parties.       |  |
| _____ | <input type="radio"/> Solely to Petitioner <b>OR</b> | <input type="radio"/> Solely to Respondent <b>OR</b> |
|       | <input type="radio"/> Jointly to both parties.       |  |
| _____ | <input type="radio"/> Solely to Petitioner <b>OR</b> | <input type="radio"/> Solely to Respondent <b>OR</b> |
|       | <input type="radio"/> Jointly to both parties.       |  |
| _____ | <input type="radio"/> Solely to Petitioner <b>OR</b> | <input type="radio"/> Solely to Respondent <b>OR</b> |
|       | <input type="radio"/> Jointly to both parties.       |  |

**4. Parenting Time**

- a. Petitioner's parenting time shall be:  Unsupervised  Supervised  Reserved

b. Respondent's parenting time shall be:  Unsupervised  Supervised  Reserved

c. Parenting Time Schedule shall be as follows:

(Clearly explain the time each parent will spend with each child. Include the time (o'clock) when the child will transfer from one parent to the other. If you want the order to say who will pick up and drop off the child, include that under "Other.")

**Regular schedule:**

Monday through Friday:

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Weekends:

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Summer (if you want a different schedule in the summer):

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Telephone contact with the children:  Unlimited OR  Only at certain times as follows:

(describe the days and times when the parent and the children may have telephone contact)

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**Exceptions to the Regular Schedule:**

You can have a different schedule for holidays, school release days, and birthdays. If you do not want a different schedule, leave it blank.

School Release days or breaks during the school year

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**Any school release day schedule will supersede the regular parenting schedule.**

Birthdays (child's birthday, parent's birthday)

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Holidays

**Any holiday or birthday schedule will supersede the regular and school release parenting schedule.**

Other:

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**d. Under the above Schedule:**

What is the annual number of overnights the children will spend with each parent?

**Note:** If parenting time is equal, use 182.5 overnights for each parent.

Number of overnights with Petitioner: \_\_\_\_\_

Number of overnights with Respondent: \_\_\_\_\_

**5. Basic Support for the Joint Children**

(Answer a or b)

a.  Petitioner     Respondent shall pay to     Respondent     Petitioner

\_\_\_\_\_ per month starting on (date): \_\_\_\_\_ as the basic support obligation for the parties' minor children. Any past due amounts of child support are still owed.

If this amount is more or less than the basic support obligation under Minnesota laws, the facts supporting the deviation from the basic amount are:

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The monthly amount shall be:

subject to income withholding from the payor's income, regardless of source, by his or her employer, trustee, or other payor of funds and mailed to: Minnesota Child Support Payment Center, P.O. Box 64326, St. Paul, MN 55164-0326. If the person paying child support is self-employed, send payments to Minnesota Child Support Payment Center, P.O. Box 64306, St. Paul, MN 55164-0306. **To start income withholding, Petitioner or Respondent must apply for IV-D services or income withholding-only services at the Child Support office in the County where the children live.** Until income withholding starts, the person owing support shall pay the other parent directly.

**OR**

The monthly amount shall be paid directly by the parent owing the child support to the parent receiving the child support, payable on the \_\_\_\_\_ day of each month.

b. Child Support shall be reserved because:

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Either party can ask the court to order the payment of child support in the future by filing a Motion stating that there is a change in circumstances.

## 6. Health Care Coverage for the Joint Children

Ordering Medical insurance as follows:

a.  Petitioner  Respondent shall provide medical insurance for the joint children through his/her **employer** or union. The other parent must pay a pro rata share of the health care coverage costs by paying

**OR**

pay nothing toward the medical insurance costs because he/she is financially unable to contribute to the costs.

**OR**

- b.  Petitioner  Respondent shall provide **medical** insurance for the joint children by obtaining and paying for **private insurance**. The other parent must pay a pro rata share of the health care coverage costs by paying

\_\_\_\_\_ **OR**

- pay nothing toward the medical insurance costs because he/she is financially unable to contribute to the costs.

**OR**

- c.  Petitioner  Respondent shall pay \_\_\_\_\_ per month as reimbursement for Medical Assistance or MinnesotaCare, payable by income withholding through the Minnesota Child Support Payment Center, provided Medical Assistance or MinnesotaCare is open for the joint children.

**OR**

- d. Reserving the issue of medical insurance for the minor children.

Ordering **Dental** Insurance as follows:

- a.  Petitioner  Respondent shall provide **dental** insurance for the joint children through his/her **employer or union**. The other parent must pay a pro rata share of the dental coverage costs by paying

\_\_\_\_\_ **OR**

- pay nothing toward the dental insurance costs because he/she is financially unable to contribute to the costs.

**OR**

- b.  Petitioner  Respondent shall provide **dental** insurance for the joint child(ren) children by obtaining and paying for **private insurance**. The other parent must pay a pro rata share of the dental coverage costs by paying

\_\_\_\_\_ **OR**

- pay nothing toward the dental insurance costs because he/she is financially unable to contribute to the costs.

- c. **Reserving** the issue of dental insurance.

Other:

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### 7. Uninsured and Unreimbursed Medical and Dental Expenses for the Joint Children

a. Petitioner shall pay \_\_\_\_\_ % of the uninsured and/or unreimbursed medical and dental costs for the joint children of the parties, and Respondent shall pay \_\_\_\_\_ % based on the percentage share of combined PICS (parental income for determining child support.)

The parent who paid the bill must ask the other parent to pay his/her percentage share. To ask for payment, send to the other parent a) a copy of the bill, b) evidence that you have paid the bill, and c) a letter requesting payment to you in the amount of \_\_\_\_\_.

This request for payment should be made promptly, and no later than 3 months after the bill is paid. If a request for payment is made after 3 months, there must be exceptional circumstances to support the late request for payment.

The person receiving the request for payment shall make the payment within 30 days. If there is a good reason to question the payment, send a letter to the other parent stating what additional information is needed, or why payment is disputed. If neither payment nor a written letter disputing payment is sent within 30 days of receiving the request for payment, then the unpaid bill can be considered back due child support.

#### OR

b. Reserving the issue of uninsured and unreimbursed medical and dental costs.

"Uninsured and unreimbursed medical and dental costs" are expenses not covered by insurance, not paid by medical assistance, and not paid by the State of Minnesota. Examples include deductibles, co-pays, and procedures not covered by insurance or assistance. Usually the parent with physical custody of the child will receive and pay the bill for the unreimbursed costs.

If the parents are not able to work out payment problems, either parent can bring a motion in court asking the court to decide the dispute, or asking the court to adjust how they divide the bills, based on changes in the incomes of the parents.

### 8. Health Care Coverage for the Parties

- a. Each party shall provide for his or her own:  medical  dental insurance.
- b. \_\_\_\_\_ (full name) shall provide  medical  dental insurance for \_\_\_\_\_ (full name).
- c. Allowing \_\_\_\_\_ (full name), at his/her own expense, to continue the dependent coverage available under the other party's insurance plan, pursuant to federal and state statutes.
- d. Reserving the issue of medical and dental insurance for the parties.

**9. Child Care Support**

- a. Petitioner shall pay \_\_\_\_\_ per month for child care expenses, and Respondent shall pay \_\_\_\_\_ per month for child care expenses;

**OR**

- b. Reserving the issue of child care expenses.

**10. Spousal Maintenance**

- a. Neither party is awarded spousal maintenance.
- b. Maintenance is reserved because:

\_\_\_\_\_  
\_\_\_\_\_

Either party can ask the court to order the payment of spousal maintenance in the future by filing a Motion stating a change in circumstances.

- c.  Petitioner  Respondent shall pay permanent spousal maintenance to the other party in the amount of \_\_\_\_\_ per month starting on (date): \_\_\_\_\_  
Any past due amounts are still owed.
- d.  Petitioner  Respondent shall pay temporary spousal maintenance to the other party in the amount of \_\_\_\_\_ per month starting on (date): \_\_\_\_\_  
Any past due amounts are still owed.

The monthly amount of permanent or temporary spousal maintenance shall be:

- subject to income withholding from the payor's income, regardless of source, by his or her employer, trustee, or other payor of funds and mailed to: Minnesota Child Support Payment Center, P.O. Box 64326, St. Paul, MN 55164-0326. If the person paying spousal support is self-employed, send payments to Minnesota Child Support Payment Center, P.O. Box 64306, St. Paul, MN 55164-0306. **To start income withholding, Petitioner or Respondent must apply for income withholding at the Child Support office in their County.** Until income withholding starts, the person owing maintenance shall pay the amount directly to the spouse receiving it.

**OR**

- maintenance shall be paid directly by the spouse owing the maintenance to the spouse receiving it, payable on the \_\_\_\_\_ day of each month.

**11. Vehicles**

The vehicles are awarded as follows, and the party receiving the vehicle shall pay for any loans or insurance for such vehicle:

Year / Make / Model	Awarded To:

**12. Marital Property**

The parties' marital property, household goods, furniture and furnishings are awarded:

- a. As currently divided **OR**
- b. As follows (attach additional page if necessary):

To Petitioner:

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To Respondent:

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**13. Non-Marital Property**

The parties' non-marital property is awarded:

- a. As currently divided **OR**
- b. As follows (attach additional page if necessary):

To Petitioner:

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To Respondent:

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**14. Cash and Accounts**

a. Awarding the savings and investments as follows:

<b>Institution</b>	<b>Type of Account</b>	<b>Amount</b>	<b>Awarded to</b>

- b.  Awarding any cash not included in a. above to the party who currently has the cash  
**OR**
- c.  Awarding cash as follows:

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**15. Business**

- None **OR**
- Awarding the parties' **business** as follows:

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**16. Manufactured Home**

- None **OR**
- Awarding the manufactured home located at:

Street address	City	State

to  Petitioner  Respondent. The debt on the manufactured home owed to:

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shall be paid by  Petitioner  Respondent.

**17. Real Property**

- None **OR**
- Awarding solely to  Petitioner  Respondent all right, title, and interest of  
Petitioner and Respondent in the real property located at:

Street address \_\_\_\_\_  
 in the City of \_\_\_\_\_, County of \_\_\_\_\_  
 State of \_\_\_\_\_, which has the following legal description:

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with the following mortgages and loans to be paid, after the divorce is final by,

- Petitioner  Respondent:

1st Mortgage: Amount currently owed: \_\_\_\_\_ and name of lender:

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2nd Mortgage: Amount currently owed: \_\_\_\_\_

and name of lender:

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and subject to the following liens or other agreements:

- A lien in favor of  Petitioner  Respondent in the amount of \_\_\_\_\_ .
- Other conditions or agreements about the property: (describe in detail)

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**18. Additional Real Property**

- None **OR**
- Awarding solely to  Petitioner  Respondent all right, title, and interest of

Petitioner and Respondent in the real property located at:

Street address \_\_\_\_\_  
 in the City of \_\_\_\_\_ , County of \_\_\_\_\_  
 State of \_\_\_\_\_ , which has the following legal description:

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with the following mortgages and loans to be paid, after the divorce is final by,

- Petitioner  Respondent:

1st Mortgage: Amount currently owed: \_\_\_\_\_ and name of lender:  
 \_\_\_\_\_

2nd Mortgage: Amount currently owed: \_\_\_\_\_ and name of lender:  
 \_\_\_\_\_

and subject to the following liens or other agreements:

- A lien in favor of  Petitioner  Respondent in the amount of \_\_\_\_\_ .
- Other conditions or agreements about the property: (describe in detail)

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**19. Retirement Funds**

a. Awarding Petitioner's pension, profit sharing, retirement plan, I.R.A., or 401(k) or other retirement fund as follows:

- Petitioner has no retirement funds **OR**
- 100% to Petitioner **OR**
- Other (describe in detail):

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b. Awarding Respondent's pension, profit sharing, retirement plan, I.R.A., or 401(k) or other retirement fund as follows:

- Responder has no retirement funds **OR**
- 100% to Respondent **OR**
- Other (describe in detail):

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**20. Debts**

- a. The debts are divided as follows. The person ordered to pay a debt hold the other person harmless from any responsibility for the debt. *Include all debts listed at 38 above.*

Debt Owed To:	To Be Paid By:



24. Each party shall execute any and all documents necessary to transfer real and personal property as awarded herein without further order of the Court. Should either party fail to execute the necessary documents, a certified copy of the Judgment and Decree shall operate to transfer title as awarded herein.
25. Petitioner shall personally serve Respondent with a copy of the Judgment and Decree by having someone else (the server) hand a copy to Respondent. The server's Affidavit of Personal Service, filed with the Court by Petitioner, will be proof of service. If Respondent agreed in a Marital Termination Agreement to be served with a copy of the Judgment and Decree by mail, then Petitioner may serve Respondent with a copy of the Judgment and Decree by having someone else mail the copy to Respondent by first class U.S. mail at Respondent's residence or last known address. The server's affidavit of Service by Mail, filed with the Court by Petitioner, will be proof of service. This shall constitute due and proper service of the Decree.
26. NOTICE: APPENDIX A SHALL BE INCORPORATED AND MADE A PART OF THE JUDGMENT AND DECREE. Appendix A contains provisions regarding Payments to Public Agency, Minnesota Statutes § 518A.50; Depriving Another of Custodial or Parental Rights-A Felony, Minnesota Statutes § 609.26; Rules of Support, Maintenance, Parenting Time; Parental Rights from Minnesota Statutes § 518.17, subdivision 3; Wage and Income Deduction of Maintenance and Child Support pursuant to, Minnesota Statutes § 518A.53; Change of Address or Residence; Cost of Living Increase of Maintenance and Support pursuant to Minnesota Statutes § 518A.75; Judgments for Unpaid Maintenance and Child Support pursuant to Minnesota Statutes § 548.091; Medical Insurance and Expenses pursuant to Minnesota Statutes § 518A.41; and Minnesota Statutes § 259.115 regarding criminal penalties for failure to comply with felon name change law.

**ORDER FOR JUDGMENT  
LET JUDGMENT BE ENTERED IMMEDIATELY**

The foregoing facts were found by me after due hearing and the Order thereon is recommended. BY THE COURT

\_\_\_\_\_  
District Court Referee

\_\_\_\_\_  
Judge of District Court

Dated: \_\_\_\_\_

Dated: \_\_\_\_\_

**JUDGMENT**

I certify the above *Conclusions of Law* are the Judgment of the Court and Judgment is hereby entered.

\_\_\_\_\_  
Court Administrator

\_\_\_\_\_  
Deputy Court Administrator

Dated: \_\_\_\_\_

## APPENDIX A

### NOTICE IS HEREBY GIVEN TO THE PARTIES:

**I. PAYMENTS TO PUBLIC AGENCY.** According to Minnesota Statutes, section 518A.50, payments ordered for maintenance and support must be paid to the Minnesota child support payment center as long as the person entitled to receive the payments is receiving or has applied for public assistance or has applied for support and maintenance collection services. Parents mail payments to: P.O. Box 64326, St. Paul, MN 55164-0326. Employers mail payments to: P.O. Box 64306, St. Paul, MN 55164.

**II. DEPRIVING ANOTHER OF CUSTODIAL OR PARENTAL RIGHTS -- A FELONY.** A person may be charged with a felony who conceals a minor child or takes, obtains, retains, or fails to return a minor child from or to the child's parent (or person with custodial or parenting time rights), according to Minnesota Statutes, section 609.26. A copy of that section is available from any court administrator.

**III. NONSUPPORT OF A SPOUSE OR CHILD – CRIMINAL PENALTIES.** A person who fails to pay court ordered child support or maintenance may be charged with a crime, which may include misdemeanor, gross misdemeanor, or felony charges, according to Minnesota Statutes, section 609.375. A copy of that section is available from any district court clerk.

### **IV. RULES OF SUPPORT, MAINTENANCE, PARENTING TIME.**

- A. Payment of support or spousal maintenance is to be as ordered, and the giving of gifts or making purchases of food, clothing, and the like will not fulfill the obligation.
- B. Payment of support must be made as it becomes due, and failure to secure or denial of parenting time is NOT an excuse for nonpayment, but the aggrieved party must seek relief through a proper motion filed with the court.
- C. Nonpayment of support is not grounds to deny parenting time. The party entitled to receive support may apply for support and collection services, file a contempt motion, or obtain a judgment as provided in Minnesota Statutes, section 548.091.
- D. The payment of support or spousal maintenance takes priority over payment of debts and other obligations.
- E. A party who accepts additional obligations of support does so with the full knowledge of the party's prior obligation under this proceeding.
- F. Child support or maintenance is based on annual income, and it is the responsibility of a person with seasonal employment to budget income so that payments are made throughout the year as ordered.
- G. *A Parental Guide to Marking Child-Focused Parenting Time Decisions* is available from any court administrator.
- H. The nonpayment of support may be enforced through the denial of student grants; interception of state and federal tax refunds; suspension of driver's, recreational, and occupational licenses; referral to the department of revenue or private collection agencies; seizure of assets, including bank accounts and other assets held by financial institutions; reporting to credit bureaus; interest charging, income withholding, and contempt proceedings; and other enforcement methods allowed by law.



- I. The public authority may suspend or resume collection of the amount allocated for child care expenses if the conditions of Minnesota Statutes, section 518A.40, subdivision 4, are met.
- J. The public authority may remove or resume a medical support offset if the conditions of section 518A.41, subdivision 16, are met.
- K. The public authority may suspend or resume interest charging on child support judgments if the conditions of section 548.091, subdivision 1a, are met.

**V. MODIFYING CHILD SUPPORT.** If either the obligor or obligee is laid off from employment or receives a pay reduction, child support may be modified, increased, or decreased. Any modification will only take effect when it is ordered by the court, and will only relate back to the time that a motion is filed. Either the obligor or obligee may file a motion to modify child support, and may request the public agency for help. **UNTIL A MOTION IS FILED, THE CHILD SUPPORT OBLIGATION WILL CONTINUE AT THE CURRENT LEVEL. THE COURT IS NOT PERMITTED TO REDUCE SUPPORT RETROACTIVELY.**

**VI. PARENTAL RIGHTS FROM MINNESOTA STATUTES, SECTION 518.17, SUBDIVISION 3. UNLESS OTHERWISE PROVIDED BY THE COURT:**

- A. Each party has the right of access to, and to receive copies of, school, medical, dental, religious training, police reports, and other important records and information about the minor children. Each party has the right of access to information regarding health or dental insurance available to the minor children. Presentation of a copy of this order to the custodian of a record or other information about the minor children constitutes sufficient authorization for the release of the record or information to the requesting party.
- B. Each party has the right to be informed by the other party as to the name and address of the school of attendance of the minor children. Each party has the right to be informed by school officials about the children's welfare, educational progress and status, and to attend school and parent teacher conferences. The school is not required to hold a separate conference for each party.
- C. Each party has the right to be notified by the other party of an accident or serious illness of a minor child, including the name of the health care provider and the place of treatment.
- D. Each party has the right to be notified by the other party if the minor child is the victim of an alleged crime, including the name of the investigating law enforcement officer or agency. There is no duty to notify if the party to be notified is the alleged perpetrator.
- E. Each party has the right of reasonable access and telephone contact with the minor children.

**VII. WAGE AND INCOME DEDUCTION OF SUPPORT AND MAINTENANCE.** Child support and / or spousal maintenance may be withheld from income, with or without notice to the person obligated to pay, when the conditions of Minnesota Statutes, section 518A.53, have been met. A copy of that section is available from any court administrator.

**VIII. CHANGE OF ADDRESS OR RESIDENCE.** Unless otherwise ordered, each party shall notify the other party, the court, and the public authority responsible for collection, if applicable, of the following information within ten days of any change: residential and mailing address, telephone number, driver's license number, social security number, and name, address, and telephone number of the employer.

**IX. COST OF LIVING INCREASE OF SUPPORT AND MAINTENANCE.** Basic support and / or spousal maintenance may be adjusted every two years based upon a change in the cost of living (using the U.S. Department of Labor, Bureau of Labor Statistics, consumer price index Mpls. St. Paul, for all urban consumers (CPI-U), unless otherwise specified in this order) when the conditions of Minnesota Statutes, section 518A.75, are met. Cost of living increases are compounded. A copy of Minnesota Statutes, section 518A.75, and forms necessary to request or contest a cost of living increase are available from any court administrator.

**X. JUDGMENTS FOR UNPAID SUPPORT; INTEREST.** According to Minnesota Statutes, section 548.091:

- A. If a person fails to make a child support payment, the payment owed becomes a judgment against the person responsible to make the payment by operation of law on or after the date the payment is due, and the person entitled to receive the payment or the public agency may obtain entry and docketing of the judgment without notice to the person responsible to make the payment.
- B. Interest begins accruing on a payment or installment of child support whenever the unpaid amount due is greater than the current support due.

**XI. JUDGMENTS FOR UNPAID MAINTENANCE.** A judgment for unpaid spousal maintenance may be entered and docketed when the conditions of Minnesota Statutes, section 548.091, are met. A copy of that section is available from any court administrator.

**XII. ATTORNEY FEES AND COLLECTION COSTS FOR ENFORCEMENT OF CHILD SUPPORT.** A judgment for attorney fees and other collection costs incurred in enforcing a child support order will be entered against the person responsible to pay support when the conditions of Minnesota Statutes, section 518A.735, are met. A copy of that section and forms necessary to request or contest these attorney fees and collection costs are available from any court administrator.

**XIII. PARENTING TIME EXPEDITOR PROCESS.** On request of either party or on its own motion, the court may appoint a parenting time expeditor to resolve parenting time disputes under Minnesota Statutes, section 518.1751. A copy of that section and a description of the expeditor process is available from any court administrator.

**XIV. PARENTING TIME REMEDIES AND PENALTIES.** Remedies and penalties for wrongful denial of parenting time are available under Minnesota Statutes, section 518.175, subdivision 6. These include compensatory parenting time; civil penalties; bond requirements; contempt; and reversal of custody. A copy of that subdivision and forms for requesting relief are available from any court administrator.

**In addition to the Notices on the pages above, the following NOTICE applies to all orders addressing custody pursuant to Minn. Stat. § 518.17, subd. 3a.**

**NOTICE**

**EACH PARTY IS GRANTED THE FOLLOWING RIGHTS:**

1. Right of access to, and to receive copies of, school, medical, dental, religious training, police reports, and other important records and information about the minor children.
2. Right of access to information regarding health or dental insurance available to the minor children.
3. Right to be informed by the other party as to the name and address of the school of attendance of the minor children.
4. Right to be informed by school officials about the children's welfare, educational progress and status, and to attend school and parent-teacher conferences. The school is not required to hold a separate conference for each party, unless attending the same conference would result in violation of a court order prohibiting contact with a party.
5. Right to be notified by the other party of an accident or serious illness of a minor child, including the name of the health care provider and the place of treatment.
6. Right to be notified by the other party if the minor child is the victim of an alleged crime, including the name of the investigating law enforcement officer or agency. There is no duty to notify if the party to be notified is the alleged perpetrator.
7. Right to reasonable access and telephone or other electronic contact with the minor children.