Stat	te of Minnes	sota				Distr	ict Court
Cour	nty of:			Judicial Dis	trict:		
				Court File N	Number:		
				Case Type:	D	Dissolution v	vith Children
In R	e the Marriag	ge of:					
Name	of Husband (Fire	st, Middle, Last)	,				
and				Judg Mar	t Petition gment and riage Dis h Childre	d Decreesolution	e for
Name	of Wife (First, M	Middle, Last)	<u>.</u>				
1.	Informatio	n about Husband	:				
	Full Name:						
		First	Middle			Last	
	Address:						
	Address.	Street Address			Aŗ	ot. No.	
		City		County	Sta	ate	Zip Code
	Date of Birt	th:	Year				
	Husband's	former or other nar	nes:				
	(Or write "no		First		Middle		Last
		social security nuthe Joint Petition.	mber is listed	d on Confide	ential Form	11.1 and	submitted
2.	Informatio	n about Wife:					
	Full Name:	First	Middle			Last	
	Address:						
		Street Address				Apt.	No.
		City	County		State	Zip C	Code
	Date of Birt	th:	Year				

Wife's former or other i	names:		
(Or write "none")	First	Middle	Last
	First	Middle	Last
Wife's social security with the Joint Petition.	number is listed on	Confidential Form	11.1 and submitted alo
Our Marriage			
Husband and Wife were	e married on: (month	n, day, year)	
in the City of		, County of	, St
of	, Country of		
180 Day Requirement			
Husband has been living	g in Minnesota for	the past six (6) month	s: YES N
Wife has been living in	Minnesota for the J	past six (6) months:	☐ YES ☐ N
Armed Forces			
Husband is an active du	uty member of the a	armed forces:	YES NO
If YES, has the member	er of the armed force	ces been stationed in l	Minnesota for the past
(6) months? YES	□NO		
Wife is an active duty n	nember of the arme	d forces: YES	□NO
If YES, has the member	er of the armed force	ces been stationed in	Minnesota for the past
(6) months? YES	□NO		
Marriage Cannot be S	aved		
There has been an irretr	ievable breakdown	of our marriage relat	ionship.
Physical Living Situati	ion		
Do Husband and Wife l	ive together at this	time? YES	□NO
If NO , the date of separ			
	Month	n Day	Year

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8. Other Proceedings

a. A separate court case for dissolution, legal separation, annulment, custody, parenting
time, or paternity has already been started by Husband or Wife in Minnesota or another
state: YES NO. 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 outcome of the case
is: Open Closed Unknown or
b. Has a County started a Support case involving the Husband and the Wife or their
children? YES NO. If YES, the case was started in
County in the State ofand the Court file number is
The case is Dismissed Pending an Order for Support was
issued.
Protection or Harassment Order
a. An Order for Protection or a Harassment/Restraining Order is in effect regarding
Husband and Wife: YES NO. If YES, the <i>Order</i> protects: Husband
☐ Wife ☐ the child(ren). The <i>Order</i> was filed inCounty
on, and the Court file number is
Month Day Year
A copy of the Order is submitted along with this Joint Petition.
b. If an Order for Protection is in effect, does the Order for Protection include a child
support obligation?
Juvenile Court Case
A Juvenile Court case (child protection, delinquency or foster care) involving husband's
and wife's child(ren) has taken place in Minnesota or another state. YES NO
If YES, the case is in County in the State of
County in the State of

11. Children Husband and Wife have Together (Joint Children)

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

a. List all joint children born before the marriage or born or adopted during the marriage. If there are no joint children, or if Wife is not currently pregnant, you are using the wrong form. Use Joint Petition, Agreement and Judgment and Decree Without Children.

Full Name of Child	Date of Birth	Age	Child Currently Lives With
			Husband Wife Both parents OR
			(write in name)
			Husband Wife Both parents OR
			(write in name)
			Husband Wife Both parents OR
			(write in name)
			Husband Wife Both parents OR
			(write in name)
			Husband Wife Both parents OR
			(write in name)
submitted along with the Jo	oint Petition.	, ,	are listed on Confidential Form 11.1 and
If a child is living with son	neone other th	nan a par	ent, write the child's address below:
Address:			
Street Add	lress		Apt. No.
City		unty	State Zip Code

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YES

for the past six (6) months?

b. Has each child born to or adopted by husband and wife together lived in Minnesota

	If NO , name the child or children, name months, and the dates the child lived in		
12.	Adult Dependent Children: Child cannot support him/herself because of a phy Is there an adult joint child born to	sical or mental condition.	
	support himself or herself because of	a physical or mental condition	n? YES NO
	If YES , the full name, date of birth a	nd age of each adult dependent	t is:
	Full Name of Dependent	Date of Birth	Age
	The social security number of the Confidential Form 11.1 and submitted		•
13.	Pregnancy		
	Is wife pregnant? YES N	O	
	If wife is pregnant answer (a) and (b)):	
	a. The date the baby is due is		
	Month	Day Year	
	b. Do Wife and Husband agree thatYES NO	husband is the biological father	er of the unborn child?
	If NO, Wife Husband cl	aims husband is not the biologi	ical father of the child.
14.	Husband's Children from Other R	elationship (Nonjoint Childr	en)
	Does Husband have minor child(ren)	from another marriage or relat	tionship?
	YES NO If YES, the	e full name, date of birth and ag	ge of each child is:

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Full Name of Child and Age	Date of Birth		Child Live Iusband?			-Ordered to for this Child?
ware 1150	VII	YE			ES NO	varab Califort
		YE	S NO	Y	ES NO	
		YE	S NO	☐ Y	ES NO	
		YE	S NO	Y	ES NO	
Wife's Children from a. Does Wife have r	ninor chil	d(ren) bo	rn prior to			other marriage
or relationship?	☐ YES	∐ NC				
If YES, the full n is:	ame, date	of birth a	and age of e	each child	born prior t	to the marriage
Full Name of Child and Age	Date of Birth		Child Live Wife?			dered to pay r this Child?
		YE	S NO		YES NO)
		YE	S NO		YES NO)
		YE	S NO		YES NO)
		YE	S NO		YES NO)
the Husband? If YES , answer (i) (i) List the full na Husband, who	YES yes, (ii), (iii)	NO and (iv): nd age of ea			
Full Name of Child	d and	Date of	Does C			rt-Ordered to
Age		Birth	Live w Wife	_	-	pport for this ild?
			YES [NO	YES	NO
			YES	NO	YES	NO
(ii) Is there a Cou		_		ner than th	e Husband a	as the father of
If YES , submi	t a copy o	f the Ord		er is for: _	Full Non	ne of Child(ren)

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	(111)	Have the Wife and biological Father signed a Minnesota Recognition of
		Parentage for any of the children listed in (i) above? YES NO
		If YES , state the full name of the child:and
		attach a copy of the Recognition of Parentage.
		If NO , why not?
	(iv)	Has the Husband signed the "Husband's Non-Paternity Statement" for any of
		the children listed at (i) above? YES NO
		If YES , state the name of the child:
		and submit a copy of the "Husband's Non-Paternity Statement."
		If NO , why not?
16.	Custod	v
10.		the child's best interests and we agree that legal custody be granted as follows:
	☐ Joir	nt legal custody to both parents
		e legal custody to Husband Wife
	It is in to	the child's best interests and we agree that physical custody be granted as follows: one)
	☐ Joir	nt physical custody to both parents
		e physical custody to Husband Wife
17.	Parent	ing Time
	a. It is	in the best interests of the children that:
	Husban	d's parenting time with the joint child(ren) be: (check one)
		unsupervised supervised reserved
	Wife's	parenting time with the joint child(ren) be: (check one)
		unsupervised supervised reserved
	If paren	ating time is unsupervised for both parents, skip to Question 18.

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b. supervised parenting time
(Option 1) Supervision is necessary because unsupervised parenting time is likely to
endanger the child's physical or emotional health or impair the child's emotiona
development. The circumstances supporting this finding are:
(Option 2) We agree that supervised parenting time is necessary because
It is in the best interests of the child(ren) that supervision of parenting time be arranged
as follows: (State who should supervise parenting time, and if there is a cost involved
who should pay the cost, and any other important details)
c. Reserved Parenting time
We agree that parenting time should be reserved because:
Public Assistance: (Note: If either person is receiving public assistance from the State of Minnesota o
applies for it after this proceeding is started, notice of this marriage dissolution action must be given to the
county's collections and support office. See Minnesota Statutes Section 518A.44)
a. Husband receives public assistance from the State of Minnesota: $\ \square$ Yes $\ \square$ No
If YES, the assistance is fromCounty. (check all that apply)
☐ MFIP in the amount of \$ per month
Tribal TANF in the amount of \$ per month

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18.

	General Assistance in the amount of \$per month
	Medical Assistance
	☐ Child Care Assistance ☐ MinnesotaCare
	b. Wife receives public assistance from the State of Minnesota: Yes No
	If YES, the assistance is fromCounty. (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
	Medical Assistance
	☐ Child Care Assistance ☐ MinnesotaCare
	c. The joint children of the parties receive public assistance from the State of
	Minnesota: Yes No
	If YES , the assistance is from County. (Check all that apply):
	☐ MFIP ☐ Medical Assistance ☐ Tribal TANF ☐ 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. Husband receives Supplemental Security Income (SSI): \(\sum_{\text{No}} \sum_{\text{Ves}} \) in the
	amount of \$ per month.
	b. Wife receives Supplemental Security Income (SSI): No Yes in the amount
	of \$ per month.
	c. The joint child(ren) of the parties receive(s) Supplemental Security Income (SSI):
	No Yes in the amount of \$ per month. What is the name of the
	child receiving SSI?
20.	Husband's Employment
20.	a. Husband is employed: Yes No Husband is self-employed: Yes No
	b. Husband works at least 40 hours per week: Yes No
	o. Husband works at least 40 nours per week. [] 1 es [] 100

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	If Husband is unemployed or working less than 40 hours / week, answer these questions:						
	-	nemployed or working less than	40 hours / week?				
	ii. What is Husband's	past work experience (type of jo	obs, hours, pay, length of time at				
	the job) and what are	Husband's professional qualifica	ations or licenses?				
			-				
c.	Current Employment: additional jobs.)	(if Husband currently has more than	n two jobs, use an attachment for the				
Name of Hu	sband's Employer (If self-	employed, list name and business addre	ess)				
Employer's	Street Address						
City		State	Zip Code				
Name of Hu	sband's Employer if self-e	mployed, list name and business addres	ss)				
Employer's	Street Address						
City		State	Zip Code				
Questions	about Current Jobs	1 st Job	2 nd Job				
Is Husband salaried?	d paid by the hour or	hourly salary	hourly salary				
	ne average number of and works per week?	hours	hours				
	h overtime pay does receive per week on	\$	\$				

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Does Husband receive bonuses?	If Yes, how much was received	If Yes, how much was received
Yes No 1 st Job	in bonuses last year?	in bonuses last year?
	\$	\$
☐Yes ☐ No 2 nd Job	How much does Husband expect	How much does Husband expect
	to receive this year?	to receive this year?
	\$	\$

21. Husband's Income

Source of Income	Amount Per Month	(or zero) before o	deductions/taxes
Self Employment Income		\$	per month
Self Employment income means grow	ss receipts minus costs of	goods sold	
minus ordinary and necessary busine	ess expenses.		
Job with		\$	per month
Monthly income from a job = Hourly	wage x Hours worked p	er 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 the	his year by 12 to get a mo	onthly average	
Unemployment benefits		\$	per month
Social Security Retirement, Sur	vivors or Disability		
Income (RSDI) (do not i	nclude SSI)	\$	per month
Investment and Rental Income		\$	per month
Annuity payments		\$	per month
Pension or Disability from work	k or military	\$	per month
Worker's Compensation		\$	per month
Court-ordered spousal maintena	ance received	\$	per month
Other incomeList Source		\$	per month
Add all of the above. Total m	onthly income	\$	per month
Enter the amount of child support to pay for any nonjoint child			per month
to pay for any nonjoint clind	(1011)	Ψ	per monu
Enter the amount of spousal ma			.•
to pay to a current or former	spouse	\$	per month

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	because of Husband's retirement, disability, or other eligibility
	Which parent receives the payment for the child? Husband Wife
22.	Living Expenses for the Family
	a. Husband and Wife and their child(ren) are still living together. Current monthly
	living expenses for the family total \$
	OR
	☐ b. Husband and Wife are living separately. The monthly family living expenses
	before separation totaled \$ At this time, Husband's separate monthly
	living expenses total \$, and Wife's monthly living expenses total
	\$ Of the total current monthly living expenses for Husband,
	\$ amount is for expenses just for the child(ren) that live(s) with
	Husband. Of the total current monthly living expenses for Wife, \$ is for
	expenses just for the child(ren) that live(s) with Wife.
23.	Expenses for Special Needs for the Children a. Is there a joint 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 Husband's monthly living expense (stated at #22) include the special needs
	expenses for the child? YES NO
	c. Does Wife's monthly living expense (stated at #22) include the special needs expenses
	for the child? YES NO
24.	Wife's Employment
	a. Is Wife employed?

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b.	Is Wife working at leas	t 40 hours per week? YES	S NO
	If Wife is unemployed	or works less than 40 hours/w	eek, answer these questions:
	i. Explain why Wife is	not working or why Wife wor	ks less than 40 hours/week
	ii. What is Wife's past	work experience (type of jobs	, hours, pay, length of time at the
	job) and professional o	ualifications or licenses?	
c.	Current Employment: additional jobs.)	(If Wife has more than two jobs a	at this time, use an attachment for the
Name of Wi	ife's Employer (If Self-Emp	loyed list name and business address	(s)
Employer's	Street Address		
City		State	Zip Code
Name of Wi	ife's Employer (If Self-Employer)	oyed list name and business address	
Employer's	Street Address		
City		State	Zip Code
Questions	about Jobs	1st Job	2 nd Job
Is Wife pai	d by the hour or salaried?	hourly salary	hourly salary
	e average number of works per week?	hours	hours
How much receive per	overtime pay does Wife week on average?	\$	\$
-		· · · · · · · · · · · · · · · · · · ·	

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Does Wife receive bonuses?	If Yes, how much did Wife	If Yes, how much did Wife
Yes No 1 st Job	receive in bonuses last year?	receive in bonuses last year?
	\$	\$
☐Yes ☐ No 2 nd Job	How much does Wife expect	How much does Wife expect to
	to receive this year?	receive this year?
	\$	\$

25. Wife's Income

Source of Income	Amount Per Month	(or zero) before	deductions/taxes
Self Employment Income		\$	per month
Self Employment income mean	s gross receipts minus costs	of goods	
sold minus ordinary and necess	sary business expenses.		
Job with		\$	per month
Monthly income from a job $=$ H	lourly wage x Hours worked	per week x 4.33 (wee	ks per month)
Second Job with		\$	per month
Third Job with		\$	per month
Commissions from all jobs		\$	per month
Divide the total amount you exp	pect this year by 12 to get a r	nonthly average	
Unemployment benefits		\$	per month
Social Security Retirement, S	Survivors or Disability		
Income (RSDI) (do no	ot include SSI)	\$	per month
Investment and Rental Incom	ne	\$	per month
Annuity payments		\$	per month
Pension or Disability from w	ork or military	\$	per month
Worker's Compensation		\$	per month
Court-ordered spousal mainte	enance received	\$	per month
Other incomeIdentify Sou	rce	\$	per month
Add all of the above. Total	monthly income	\$	per month
Enter the amount of child sup to pay for any nonjoint child	-		per month
Enter the amount of spousal i			
to pay to a current or former	r spouse	\$	per month

because of Wife's retirement, disability, or other eligibility Which parent receives the payment for the child? Husband Wife 26. Child Care Costs Are there child care costs for joint children because of work or school? YES If YES, 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? c. Does the County child support agency pay for child care through a subsidy assistance? Yes, child care assistance is being received. Husband co-pay for child care per month is No, there is no county child care assistance received. d. The parties agree that Husband should pay month for her proportional share of child care costs. These amounts are based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance? Husband Wife Joint Children No one	
Are there child care costs for joint children because of work or school? If YES, 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? c. Does the County child support agency pay for child care through a subsidy assistance? Yes, child care assistance is being received. Husband co-pay for child care per month is No, there is no county child care assistance received. d. The parties agree that Husband should pay per mo proportional share of child care costs and Wife should pay month for her proportional share of child care costs. These amounts abased upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	
Are there child care costs for joint children because of work or school? YES If YES, 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? \$ c. Does the County child support agency pay for child care through a subsidy assistance? Yes, child care assistance is being received. Husband co-pay for child care per month is \$ No, there is no county child care assistance received. d. The parties agree that Husband should pay \$ per mo proportional share of child care costs and Wife should pay \$ month for her proportional share of child care costs. These amounts are based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	
If YES, 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? \$ c. Does the County child support agency pay for child care through a subsidy assistance? □ Yes, child care assistance is being received. □ Husband co-pay for child care per month is \$ No, there is no county child care assistance received. d. The parties agree that Husband should pay \$ per mo proportional share of child care costs and Wife should pay \$ per mo month for her proportional share of child care costs. These amounts □ and based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	
 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? \$	
b. How much does the daycare center(s) or babysitter charge per month? \$	
c. Does the County child support agency pay for child care through a subsidy assistance? Yes, child care assistance is being received. Husband co-pay for child care per month is \$ No, there is no county child care assistance received. d. The parties agree that Husband should pay \$ per mo proportional share of child care costs and Wife should pay \$ month for her proportional share of child care costs. These amounts a based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	_
assistance? Yes, child care assistance is being received. Husband co-pay for child care per month is \ No, there is no county child care assistance received. d. The parties agree that Husband should pay \ per mo proportional share of child care costs and Wife should pay \ month for her proportional share of child care costs. These amounts \ are based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	or child care
co-pay for child care per month is \$ No, there is no county child care assistance received. d. The parties agree that Husband should pay \$ per mo proportional share of child care costs and Wife should pay \$ month for her proportional share of child care costs. These amounts [] are based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	
 No, there is no county child care assistance received. d. The parties agree that Husband should pay \$ permo proportional share of child care costs and Wife should pay \$ month for her proportional share of child care costs. These amounts □ are based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance? 	's Wife's
d. The parties agree that Husband should pay \$ permo proportional share of child care costs and Wife should pay \$ month for her proportional share of child care costs. These amounts [] are based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	
proportional share of child care costs and Wife should pay \$ month for her proportional share of child care costs. These amounts are based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	
month for her proportional share of child care costs. These amounts a based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	onth for his
based upon calculations using the child support guidelines worksheet. 27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	per
27. Health Care Coverage a. Who receives Minnesota Care or Medical Assistance?	re are not
a. Who receives Minnesota Care or Medical Assistance?	
a. Who receives Minnesota Care or Medical Assistance?	
 b. Does Husband have medical insurance? (other than MN Care or Medical Assist Yes No. If no, skip to c. 	tance)
i. Where does Husband get the medical insurance?	
through his 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	

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	iii. Who is currently covered by this medical insurance?
	☐ Husband ☐ Wife ☐ All the joint children ☐ Some of the joint children:
	Name the joint children who are covered
	Nonjoint children covered
c.	Does Husband have dental insurance? (other than MN Care or Medical Assistance)
	Yes No. If no, skip to d.
	i. Where does Husband get the dental insurance?
	through his 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
	Or, Dental is included in the medical insurance costs.
	iii. Who is currently covered by this dental insurance?
	☐ Husband ☐ Wife ☐ All the joint children ☐ Some of the joint children:
	Name the joint children who are covered
	☐ Nonjoint children
d.	Does Wife have medical insurance? (other than MN Care or Medical Assistance)
	Yes No If No, skip to e.
	i. Where does Wife get the medical insurance?
	through 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?
	☐ Husband ☐ Wife ☐ All the joint children ☐ Some of the joint children:
	Name the joint children who are covered
	☐ Nonjoint children

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e.	Does Wife have dental insurance? (other than MN Care or Medical Assistance)
	Yes No If No, skip to f.
	i. Where does Wife get the dental insurance?
	through 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
	Or,
	iii. Who is currently covered by this dental insurance?
	☐ Husband ☐ Wife ☐ All the joint children ☐ Some of the joint children:
	Name the joint children who are covered
	☐ Nonjoint children
f.	If the joint children are without health care coverage, is coverage available for
	purchase through Husband's or Wife's employer? YES NO The joint
	children currently have health coverage.
œ	Other:
g.	Ouiei.
Ba	sic Support: Basic support is for a child's housing, food, clothing, transportation,
edı	acation costs, and other expenses related to the child's care.
	Husband
\$_	per month by the first day of the month, starting the first month
	er entry of the judgment for divorce. Payment shall be through income withholding.
Th	is amount is based on the calculations from the child support guidelines worksheet,
	ich is attached and incorporated into this Joint Petition.
	Husband Wife shall pay basic support to the other party in the amount of
<u></u> \$	per month by the first day of the month, starting the first month
Ψ <u>_</u>	
arte	er entry of the judgment for divorce. Payment shall be through income withholding.

28.

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This amount is a deviation from guidelines. The parties agree that this amount adequately meets the needs of the child(ren) and is in the best interests of the child(ren).

29. Spousal Maintenance

Spousal Maintenance is money paid by one spouse to the other for living expenses.

Check only one box:
☐ Husband and Wife do not need spousal maintenance at this time, or in the future.
Both parties agree that each party is fully capable of self-support and is not dependent
upon the other for additional support in the form of spousal maintenance. Each party has
made a full and fair disclosure of all income and assets and liabilities that each is
responsible for, and agrees that this waiver is reasonable. The waiver is fair and
equitable and is supported by the above consideration and was signed by both parties
after full financial disclosure to each other.
☐ Husband or Wife 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)
☐ Husband needs spousal maintenance from Wife now. Husband is years of
age, Husband and Wife have been married for years. Husband has the
following education: Husband's gross
monthly income totals \$ Husband's monthly expenses total
\$ and Husband is not able to maintain the standard of living established
during the marriage because:
Wife has the ability to pay Husband \$per month for spousal maintenance.

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	☐ Wife needs spousal maintenance from Husband now. Wife isyears of age
	Husband and Wife have been married foryears. Wife has the following
	education: Wife's gross monthly income
	totals \$, wife's monthly expenses total \$, and Wife
	is not able to maintain the standard of living established during the marriage because:
	Husband has the ability to pay Wife \$per month for spousal maintenance.
30.	Name Change
	a. Neither person wants to change his/her name.
	☐ b. ☐ Wife ☐ Husband wants to change his/her name to: (full name, not initials)
	first middle last
	This name change request is made with no intent to defraud or mislead anyone:
	☐ True ☐ False.
	The person requesting the name change has been convicted of a felony
	☐ YES ☐ NO.
	If YES:
	i. Notice of this request for name change has been given to the proper authority as
	required by Minn.Stat.§259.13. (IMPORTANT NOTICE: If you are a convicted
	felon and you request a name change without following the requirements of Minn
	Stat § 259.13, using the new last name after your divorce is a gross misdemeanor.)
	ii. An Affidavit of Service of the Notice marked Exhibit "A" has been submitted along
	with this Joint Petition.
31. (Other Findings

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AGF	REEMENT OF HUS	SBAND AND WIFE	
1.		is agreement to settle once and for all what we owe to each other and	
	what we can expe	ct to receive from each other. Each of us states that nothing has been	
	held back, and tha	t we have honestly included everything we could think of in listing our	
	assets (everything	we own and that is owed to us) and our debts (everything we owe) and	
	that we believe th	e other has been open and honest in writing this agreement. We will	
	sign and exchange	any papers that might be needed to complete this agreement before or	
	after the divorce.		
2.	Legal Custody means	which parent(s) have a say in the major decisions regarding the joint child(ren)'s life	
	including education, religious upbringing and medical treatment.		
	It is in the best interests of the child(ren) to grant legal custody of each minor joint child		
	of the parties as fo	llows:	
Nar	ne of Child	Granting Legal Custody:	
		☐ Solely to Husband OR ☐ Solely to Wife OR ☐ Jointly to	

Name of Child	Granting Legal Custody:
	Solely to Husband OR Solely to Wife OR Jointly to
	both parties.
	Solely to Husband OR Solely to Wife OR Jointly
	to both parties.
	Solely to Husband OR Solely to Wife OR Jointly
	to both parties.
	Solely to Husband OR Solely to Wife OR Jointly
	to both parties.
	Solely to Husband OR Solely to Wife OR Jointly
	to both parties.

3. Physical custody identifies which parent(s) will handle the routine daily care and control of the joint child(ren).

It is in the best interests of the child(ren) to grant **physical** custody of each of the minor joint child(ren) of the parties as follows:

Name of Child	Granting Physical Custody:
	Solely to Husband OR Solely to Wife OR Jointly to
	both parties.
	Solely to Husband OR Solely to Wife OR Jointly
	to both parties.
	Solely to Husband OR Solely to Wife OR Jointly
	to both parties.

		Solely to Husband	OR	Solely to Wife OR	Jointly
	to	both parties. Solely to Husband	OR	Solely to Wife OR	Jointly
	to	both parties.	OK	Solely to whe OR	Jointry
	<u>, </u>	•			
	Parenting Time				
	a. Husband's parenting	g time shall be: U	Jnsup	ervised Supervised [Reserved
	b. Wife's parenting tin	ne shall be: Unsup	ervise	d Supervised Res	served
	c. Parenting Time sha	all be scheduled as foll	lows:		
	(o'clock) when the chil	ld will transfer from o	one pa	nd with each child. Inclurent to the other. If you valude that under "Other.")	
	Regular schedule:				
	Monday through Frida	ıy:			
	_				
Weekends:					
Summer (if you want a different schedule in summer)					
	Telephone contact with	th the child(ren):	<u>Unlim</u>	nited or Only at ce	ertain times as
		· · · · ·		arent and child(ren) may h	
	contact)				
	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	
Any school release day schedule will supercede the regula	r parenting schedule.
Birthdays (child's birthday, parent's birthday)	
Holidays	
Any holiday or birthday schedule will supercede the regul	ar and school release parenting
schedule.	
Other	
d. Under the above Schedule:	
The children are with Husband: The children are w	
less than 10% of the time less than 10%	
☐ 10-45% of the time ☐ 10-45% of the ☐ 45.1-50% of the time ☐ 45.1-50% of the	
more than 50% of the time and a 43.1-30% of the time are than 50% of the time are	
more than 30% of the time	of the time
Basic Support for the Joint Child(ren)	
(Fill in a or b)	
a.	Vife \$ per
month starting on (date):as the b	asic support obligation for the
parties' joint child(ren). This amount is based on the calc	ulations from the child support

5.

guidelines worksheet, which is attached and incorporated into this Joint Petition. An
past due amounts pursuant to a different court order of child support are still owed.
☐ This amount is a deviation from the basic support obligation under Minnesot
laws, and the facts supporting the deviation from the basic amount are:
The monthly amount shall be:
subject to income withholding from the payor's income, regardless of source, b
his by his or her employer, trustee, or other payor of funds and mailed to: Minnesot
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 Chil
Support Payment Center, P.O. Box 64306, St. Paul, MN 55164-0306. To star
income withholding, Husband or Wife must apply for IV-D services or incom
withholding-only services at the Child Support office in the County where th
children live. Until income withholding starts, the person owing support shall pay th
other parent directly.
OR
be paid directly by the parent owing the child support to the parent receiving th
child support, payable on theday of each month.
b. Child Support shall be reserved because:
Either party can ask the court to order the payment of child support in the future b
filing a Motion stating that there is a change in circumstances.
Medical and Dental Insurance for the Joint Children
Ordering Medical insurance as follows:
a. Husband Wife shall provide medical insurance for the joint child(ren
through his/her employer or union. The other parent must pay a pro rata share of th

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6.

health coverage costs by paying \$	OR		pay
nothing toward the medical insurance costs because he/she is finar	icially i	ınable	e to
contribute to the costs.			
OR			
□ b. □ Husband □ Wife shall provide medical insurance for the joint insurance	nt child	d(ren)	by
obtaining and paying for private insurance. The other parent must	pay a	pro r	ata
share of the health coverage costs by paying			
	_OR		pay
nothing toward the medical insurance costs because he/she is finan	cially v	ınable	to
contribute to the costs.			
OR			
c. Husband Wife shall pay \$per month as	reimb	arsem	ent
for Medical Assistance or Minnesota Care, payable by income with			
the Minnesota Child Support Payment Center, provided Medical	Assis	tance	or
Minnesota Care is open for the joint child(ren).			
OR			
d. Reserving the issue of medical insurance for the joint child(ren).			
Ordering Dental Insurance as follows:			
☐ a. ☐ Husband ☐ Wife shall provide dental insurance for the	joint c	hild(r	en)
through his/her employer or union. The other parent must pay a pro-	rata sha	re of	the
dental coverage costs by paying			
	_OR		pay
nothing toward the dental insurance costs because he/she is finance	cially u	nable	to
contribute to the costs.			
OR			
☐ b. ☐ Husband ☐ Wife shall provide dental insurance for the joi	nt child	l(ren)	by
obtaining and paying for private insurance. The other parent must	pay a	pro r	ata
share of the dental coverage costs by paying			
		_ OR	

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	pay nothing toward the dental insurance costs because he/she is financially unable			
	to contribute to the costs.			
	OR			
	c. Reserving the issue of dental insurance.			
	Other:			
_				
_				
7.	Uninsured and Unreimbursed Medical and Dental Expenses for the Joint Children			
	a. Husband shall pay % of the uninsured and/or unreimbursed medical			
	and dental costs for the joint child(ren) of the parties, and Wife shall pay%			
	based on the percentage share of combined PICS (parental income for determining			
	child support.)			
	The parent who paid the bill must tell 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 of your percentage share. 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 and not paid by medical assistance or MinnesotaCare. Examples include			
	deductibles co-pays and procedures not covered by insurance or assistance. Usually the			

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parent with physical custody of the child will receive and pay the bill for the unreimbursed costs. 8. **Medical and Dental Insurance 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. Husband shall pay \$ _____ per month for child care expenses, and Wife 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. Petitioner and Respondent have waived any claims to spousal maintenance for the past, present, or future, and expressly waive all rights to modify their waivers of maintenance. This court is divested of jurisdiction to award or modify maintenance in the future pursuant to Karon v. Karon, 435 N.W. 2d 501 (Minn. 1989). Consideration for this agreement is: (check all that apply) the parties' mutual waivers of maintenance the property settlement the parties' respective incomes and ability to earn income other:

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The Court has reviewed this agreement and finds it to be fair and equitable under all of the circumstances, and supported by sufficient consideration including the parties' mutual waivers, incomes per year and the property division. Full disclosure of each party's financial circumstances has occurred.

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. ☐ Husband ☐ Wife shall pay permanent spousal maintenance to the other party
in the amount of \$ per month starting on (date):
☐ d. ☐ Husband ☐ Wife shall pay temporary spousal maintenance to the other party in the amount of \$ per month starting on (date): and ending on (date):
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,
Husband or Wife must apply for income withholding only services at the Child
Support office in their County and must send a copy of this Order to the Child
Support office. Until income withholding starts, the person owing maintenance shall
pay the amount directly to the spouse receiving it.
OR

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	maintenance shall be paid directly by the spouse owing the maintenance to the spouse			
	receiving it, payable on theday of each month.			
11.	Real Estate			
	Real estate includes a homestead, condominium, apartment building, vacant land, contract for deed interest, remainder interest, and more.			
	☐ Husband owns no real estate by himself or with anyone else.			
	☐ Wife owns no real estate by herself or with anyone else.			
	Husband and/or Wife own real estate as described on the Real Estate Attachment(s).			
	(Use a separate Real Estate Attachment sheet for each parcel of real estate. The Real			
	Estate Attachment sheet(s) must be attached to this Joint Petition, even if Husband and			
	Wife have no real estate.)			
	All Real Estate Attachments are incorporated into this Joint Petition, Agreement,			
	Judgment and Decree and Husband and Wife agree that the real estate shall be awarded			
	as stated on the Real Estate Attachment(s) in Attachment "C".			
	Check one:			
	There is one Real Estate Attachment; OR			
	There are Real Estate Attachments.			
12.	Non-Marital Property			
	Non-marital Property means: (1) anything that you or your spouse owned before the marriage; (2)			
	a gift, bequest, devise, or inheritance made by a third party to one but not to the other spouse; (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 (STOP: Property can be part non-			
	marital and part marital. Defining and valuing non-marital property can be complicated. If you			
	have any concerns or questions, you should stop here and talk to an attorney.) (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. Husband owns non-marital property:			
	☐ YES ☐ NO			

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If YES, Husband and Wife agree that that the following property is Husband's non-
marital property and shall be awarded to Husband:
The total value of Husband's non-marital property is \$
b. Wife owns non-marital property:
☐ YES ☐ NO
If YES, Husband and Wife agree that the following property is Wife's non-marital
property and shall be awarded to Wife:
The total value of Wife's non-marital property is \$

13. Division of Marital Property

<u>Marital Property</u> means almost anything that you or your spouse own that you or your spouse received during the marriage, even during the times that you and your spouse were separated. This includes real estate, boats, cabins, household goods, furniture, jewelry, and other things.

(See attached Asset Sheet listing all assets. The Asset Sheet must be attached to the Joint Petition, even if husband and wife have no assets.)

The Asset Sheet is incorporated into this Joint Petition, Agreement, Judgment and Decree and Husband and Wife agree to divide their marital property as listed by them in Attachment "A".

14. Division of Marital Debts

<u>Marital Debts</u> means debts incurred by you or your spouse during the marriage, even during the times that you and your spouse were separated. Do not include monthly expenses you pay in full each month, such as telephone and utilities.

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(See attached Debt Sheet listing all debts. The Debt Sheet must be attached to the Joint Petition, even if wife and husband have no debts.)

The Debt Sheet is incorporated into this Joint Petition, Agreement, Judgment and Decree and Husband and Wife agree to divide their marital debts as listed by them in Attachment "B".

15.	Name Change				
	☐ Neither party is requesting a name change.				
	Changing Husband's name to				
		First	Middle	Last	
	Changing Wife's name to:	First	Middle	Last	
16.	Paternity Question				
	Check only if applicable:				
	The Husband does not have named:	•	•	nild or children	
	born to Wife during the marriage, and Husband is not the father.				
	☐ The issue of paternity of the u				
17.	Other:				
	BASED UPON THE ABOVE 1	INFORMATION	N. Husband and Wife rec	quest that the	
Cour	t issue a final judgment and decree			•	
	ement.		ge und ordering in		
•	D and SIGN the Verification and .	Acknowledgmen	ts.		
STA'	TE OF MINNESOTA)) SS			
COU	UNTY OF				
	(County where documen	its signed)			

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Verification and Acknowledgments

- a. I have read this document. To the best of my knowledge, information and belief the information contained in this document is well grounded in fact and is warranted by existing law.
- b. I have not been determined by any Court in Minnesota or in any other State to be a frivolous litigant and I am not the subject of an *Order* precluding me from serving or filing this document.
- c. I am not serving or filing this document for any improper purpose, such as to harass the other party or to cause delay or needless increase in the cost of litigation or to commit a fraud on the Court.
- d. I understand that if I am not telling the truth or if I am misleading the Court or if I am serving or filing this document for an improper purpose, the Court can order me to pay money to the other party, including the reasonable expenses incurred by the other party because of the cost of serving or filing this document, Court costs, and reasonable attorney's fees.
- e. **WAIVER** (Rule 306.01(c)): I know I have the right to be represented by a lawyer of my choice. I hereby expressly waive that right and I freely and voluntarily sign this Joint Petition and Agreement.

DATE:	DATE:		
Signature of Husband (Sign only in presence of notary public)	Signature of Wife (Sign only in presence of notary public)		
() Daytime Telephone Number of Husband	() Daytime Telephone Number of Wife		
Sworn / affirmed to before me this,,	Sworn / affirmed to before me this,		
Notary Public	Notary Public		

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HUSBAND'S ATTORNEY	WIFE'S ATTORNEY
Husband is	Wife is
acting as his own attorney	acting as her own attorney
OR	OR
is represented by the following attorney:	is represented by the following attorney:
Name	Name
Address	Address
City / State / Zip	City / State / Zip
Telephone	Telephone
Attorney Registration Number	Attorney Registration Number
(If public assistance is being provided to a part	rty or joint child(ren), the public authority must
sign off on this Joint Petition and Agreement.)	
The public authority responsible for the collec-	tion and enforcement of child support reviewed
and agreed to the Joint Petition and Agreement	of the above-named parties.
DATE:	
Name and Title	
Attorney Registration No.	
Address	
City / State / Zip	
Telephone	

COURT ORDER

	This case came before the Court without a hearing on the parties' Joint Petition for				
Dissol	ution of Marriage	because both parties are represe	ented by attorneys. The Court, havi	ing	
review	ved the file, makes	the following Order:			
		<u>OR</u>			
	This proceeding	for dissolution of marriage came	e before the undersigned judge of d	istrict	
court o	on	(date) at	(location	ı) in	
the Sta	ate of Minnesota.	Husband did did not ap	pear. Wife 🗌 did 🔲 did not app	pear.	
		appeared as	s attorney for		
	Husband is N	NOT represented by an attorney	OR		
	Husband 🗌 is re	epresented by the following attor	rney:		
	Wife is NOT	represented by an attorney OI	R		
	Wife is repre	sented by the following attorney	<i>]</i> :		
1.	The parties' Join	nt Petition and Attachments con	tains the necessary facts and inclu	des an	
	agreement on all	issues before the Court. The rea	al estate, if any, and the personal pr	operty	
	of the parties is	hereby awarded according to th	e division set out in their foregoing	g Joint	
	Petition, which	is made part of this final judgr	ment. Debts and liabilities of the	parties	
	must be paid as I	provided in their foregoing Joint	t Petition. Spousal maintenance, cu	ıstody,	
	parenting time,	and child support are ordered	d as set out in the Joint Petitio	n and	
	Agreement. The	parties are ordered to obey all o	of its provisions.		
2.	The marriage bet	tween the parties is dissolved an	d the parties are single.		
3.	☐ Husband's	☐ Wife's name is changed to):		
	first	middle	last		
4.	Each party shall	execute any documents neces	sary to transfer real estate and pe	ersonal	
		•	r of the Court. Should either party		

execute the necessary documents, a certified copy of the Judgment and Decree shall operate to transfer title as awarded herein.

5. NOTICE: IF THE AGREEMENT OF THE PARTIES INCLUDES AN AWARD OF SPOUSAL MAINTENANCE AND / OR CHILD SUPPORT, Appendix A is incorporated and made a part of this final judgment. Appendix A contains, among other things, provisions regarding payments to the Public Agency pursuant to 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 Child 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.

General Rule of Practice 125 notwithstanding, 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:
I certify the above constitutes the Judgr	Judgment nent of the Court and Judgment is hereby entered.
	Court Administrator
	Deputy
Dated:	

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Attachment "A" DIVISION OF ASSETS AND VALUE

Husband's Name:_	
Wife's Name:	

- 1. We agree on how to divide our assets (everything we own and that is owed to us).
- 2. Each person shall receive as their own all assets in their column.

Definitions: Current Fair Market Value is an estimate of the amount of money you could get if you sold the item to a stranger, such as through a newspaper advertisement. It does **not** mean what you paid for it originally, and it does **not** mean what it would cost you to replace it if you lost it. If you are still paying for an item, list it in husband's or wife's column at the *present value*.

Present value means the current fair market value minus the amount you still owe.

Who Gets the Item and What is the Value

who Gets the Item and what is the value			
DESCRIPTION OF ASSETS □ If you do not have the type of property described, enter a zero in the columns for Husband and Wife.	*Enter the current fair market value or present value of the item in the column of the person getting the item.		
in the columns for riusband and whe.			
☐ To avoid confusion at a later date, describe each item as clearly as possible. For example, include the last 4 digits of account numbers (xxx2873), names of banks, & whose name is on the title or account, if applicable.	*HUSBAND	*WIFE	
☐ List all property owned separately or together, no matter when it was acquired, except do not list the non-marital property described at #12 of the Joint Petition.			
Cash on hand:	\$	\$	
Cash in banks/credit unions: (Name of bank, last 4 digits of			
account number, whose name is on the account)			
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
Stocks/Bonds:			
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	

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Notes (money owed to you in writing):		
Titles (money owed to you in writing).	\$	\$
	\$	\$
	Ψ	Ψ
	Husband	Wife
Money owed to you (not evidenced by a note):		
,	\$	\$
	\$	\$
	\$	\$
Business interests : (Name of business, who owns it)		
	\$	\$
	\$	\$
Automobiles: (Year, Make, Model) (Reminder: Use present value if you are still paying for the items.)	4	¥
,	\$	\$
	\$	\$
	\$	\$
	\$	\$
Boats:	Ψ	Ψ
	\$	\$
	\$	\$
Other vehicles: (Snowmobiles, 4-Wheelers, etc.)	Ψ	Ψ
other venicles. (Showmoones, 4 wheelers, etc.)	\$	\$
	\$	\$
	\$	\$
Retirement plans	Ψ	Ψ
Profit Sharing or Pension: (Enter "present value". Contact plan administrator for the present value. Include name of employer/group providing the plan, and type of plan.)		
	\$	\$
	\$	\$
401(k), IRAs or other: (Enter current account balance, name of bank where funds are held, whose name is on the account.)		
	\$	\$
	\$	\$
	\$	\$
Furniture & furnishings:		
We have already divided the furniture and furnishings in a fair manner. (Enter in each spouses' column the total value of their share of the furniture and furnishings already divided);	\$	\$
We agree to divide the furniture and furnishings as follows: (List items not included above.)		
	\$	\$
	\$	\$
	\$	
	Ф	\$

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	\$	\$
	\$	\$
	\$	\$
	\$	\$
	Φ	Ψ
	Husband	Wife
Collectibles & Jewelry:		
<i>y</i> .	\$	\$
	\$	\$
	\$	\$
	\$	\$
Life insurance: (cash surrender value) (Name of insurance company and last 4 digits of policy number.)		·
<u> </u>	\$	\$
	\$	\$
Sporting & entertainment & electronic equipment: (TV, stereo, guns, etc.)		
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Real Estate:		
Do Not List Here. Use Real Estate Attachment.		
Other assets:		
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Total Value of Property To Each Person: (Excluding Real Estate, and any Non-Marital Property listed at	Husband	Wife
Paragraph #12 of the Joint Petition.)	\$	\$

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Attachment "B" **DIVISION OF LIABILITIES/DEBTS**

Ηι	ısband's Name:			
W	ife's Name:			
Date we filled out this form: 1. We agree on how to divide our marital debts (debts we have incurred since our marriage date, either separately or together). 2. Each person shall pay as their own the debts listed in their column, and shall not ask the other person to pay these debts/bills. 3. We have listed all marital debts we know of on this Attachment. Any debts incurred by one of us alone and not listed on this Attachment shall be paid by the person whose name is on the debt/bill.				
	DESCRIPTION OF DEBT(S)		*Write the current amount owed in the column of the person who will pay it.	
	columns for Husband and Wife. To avoid confusion at a later date, describe each debt as clearly	*HUSBAND	*WIFE	
	as possible. For example, state who the debt is owed to, whether husband's or wife's name is on the debt, and the last 4 digits of account numbers (xxx3094), if applicable.	HUSBAND	WIFE	
	List all debts in husband's name alone and in wife's name alone and in both names together. Include debts incurred during the marriage and after separation. Do not include bills you pay in full each month.			
	ortgages and loans on Real Estate:			

	Ψ	Ψ
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Auto loans:		
	\$	\$
	\$	\$
	\$	\$

Charge/credit card accounts:

\$

\$

Bank/credit union loans:		
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	Husband	Wife
	\$	\$
	\$	\$
Student loans:		
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Money you owe: (not evidenced by a note)		
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Judgments:		
	\$	\$
	\$	\$
	\$	\$
Other debts:		
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	Husband	Wife
Total Debts to be Paid by Each Person:		
(Excluding Real Estate mortgages and loans.)	\$	\$

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Attachment "C" REAL ESTATE ATTACHMENT

Fill out a separate Attachment for each parcel of real estate.

~·				
City	State		Zip Code	
The property is in		County.		
	(Use the full legal do			f tł
Purchase date		(month, da	ıy, year) an	d p

	2 nd Mortgage: Amount currently owed \$	_ and name of lender
6.	Current Market Value of this property: \$	
7.	This property is the homestead: Yes No	
AGI	REEMENT OF HUSBAND AND WIFE	
1.	All right, title, and interest of Husband and Wife in the real estate be awarded to: Husband Wife	e described above shall
2.	Husband and Wife also agree that: (Describe any liens in favor other agreements about the use, sale of, or award of the property. if needed. If there are no other agreements, write "None".)	
3.	The Mortgage(s) or Loan(s) described above shall be paid by starting on the following date: (write "NONE" if there is no mortgage or loan.)	Husband Wife

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