

**DISSOLUTION OF  
MARRIAGE  
FORMS**

**APPROVED BY**

**The Missouri Supreme Court**

**July, 2012**

# DISSOLUTION OF MARRIAGE FORMS PACKAGE

## Introduction

### **The Unauthorized Practice of Law**

These forms are provided at no cost to you by the Missouri Supreme Court Committee on Access to Family Courts so that you may have access to the Missouri Courts. It is a crime for another person to charge you a fee for preparing these forms for you unless that person is a licensed lawyer. If anyone other than a lawyer attempts to charge you for preparing these forms, you should notify the Office of Chief Disciplinary Counsel, 3335 American Avenue, Jefferson City, Missouri, 65109.

### **General Information about All Forms**

Information that you enter on these forms can be saved on your computer ONLY if you are using Adobe Acrobat version 8.0 or higher. They can be completed using the free Adobe Reader, but you will not be able to save the information you enter.

The forms listed below are interactive. You can enter the information on these forms before you print them. If you fill the forms in on your computer, much of the information you enter on one form is automatically transferred to other forms. For example, if you type your first name on the "Petition for Dissolution of Marriage," your first name will also appear on the other forms.

Some forms refer to the husband and wife as the parties, while other forms refer to the parties as the Petitioner and the Respondent. The Parenting Plan refers to the Mother and Father. It is assumed that you are the petitioner, or the person filing the case. Because of this, you must indicate whether you are the Husband or the Wife so that information from one form can be automatically transferred to the other forms.

This package also contains bookmarks. These bookmarks help you to navigate throughout these forms. In addition, there are "links" embedded in the forms. These links are usually green, and can take you to a related location in the forms.

If your spouse signs the "Answer" so that service of process is not required, then you only have to file one copy of the "Petition for Dissolution of Marriage", "Statement of Income and Expenses", "Statement of Property and Debt and Proposed Separation Agreement", and "Parenting Plan". If your spouse does not sign an "Answer", then you must file one additional copy of all of these forms. You should also keep a copy of these forms for your records.

Some additional forms may be required by some Missouri Courts. You should check with your local court.

## TABLE OF CONTENTS

### **1. Petition for Dissolution of Marriage (Form CAFC001)**

This is the first form you should complete. Information that you enter on this form will be transferred to all the other forms in the package.

### **2. Certificate of Dissolution of Marriage (Form CAFC065)**

Most courts require that you file two copies of the Certificate of Dissolution of Marriage.

### **3. Statement of Income and Expenses (Form CAFC050)**

This form requires that you list income and expenses for both you and your spouse. A lawyer can assist you in finding out this information.

### **4. Statement of Property and Debt and Proposed Separation Agreement (Form CAFC040)**

READ THE INSTRUCTIONS ON THIS FORM CAREFULLY.

If both you and your spouse agree on the disposition of property and debt and on all issues concerning maintenance, you may both sign this form. This "Separation Agreement" can then be introduced into evidence at your hearing.

### **5. Respondent's Answer to Petitioner's Petition for Dissolution of Marriage (Form CAFC010)**

Your spouse may sign this form if he or she does not want to be personally served. By signing this form, your spouse is allowing the court to decide your case. Your spouse may also use this form to disagree with your statements on your forms.

### **6. Judgment of Dissolution of Marriage (Form CAFC070)**

This is a "proposed" judgment. Different courts handle the preparation of the judgment in different ways. In some courts, the judge will direct you to prepare a judgment, and in other courts, the judge will prepare the judgment.

### **7. Filing Information Sheet (Form CAFC067)**

This form is required by most courts to enter the information about your case into the Court's computer system.

### **8. Parenting Plan (Form CAFC501)**

This form is only required if there are unemancipated children of this marriage. If there are no unemancipated children of this marriage, then you do not have to print this form, nor do you have to file this form.

There are two parts to this form, Part A and Part B. Part A deals with custody issues of the children, and Part B deals with support issues of the children. You must complete both parts of the Parenting Plan.

If you have different custody or support arrangements for some of the children, you must complete a separate Parenting Plan for each set of children.

**IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI**  
*(County where court is located)*

**In re the Marriage of**

\_\_\_\_\_  
*(First) (Middle) (Last) (Jr./Sr./III)*  
**Petitioner,** *(Your full name should be entered here)*

**-and-**

\_\_\_\_\_  
*(First) (Middle) (Last) (Jr./Sr./III)*  
**Respondent.** *(Enter your spouse's full name here)*

**Case No.** \_\_\_\_\_  
*(Will be assigned when case is filed)*

**Division No.** \_\_\_\_\_  
*(Will be assigned when case is filed)*

**Petition for Dissolution of Marriage**

**1. How many petitions have you filed in this case?**

- This is the first petition I have filed in this case. (Original Petition)
- This is the second petition I have filed in this case.
- This is the third petition I have filed in this case.

*Throughout this entire case, you will always be the "Petitioner" and your husband or wife will always be the "Respondent". Your husband or wife is also referred to as your "spouse".*

**2. Are you the Husband or the Wife?**

- I am the Wife.
- I am the Husband.

If you change addresses, make sure to tell the court in writing your new address.

**3. What is your mailing address?**

\_\_\_\_\_  
*(Street)*

\_\_\_\_\_  
*(City) (State) (Zip)*

\_\_\_\_\_  
*(Telephone Number) (E-Mail Address)*

*This is the address that the court will use to send information concerning your case to you. This address is not necessarily the same as the address at which you reside. Even if you do not wish to disclose the address at which you reside, you MUST still provide the court with a mailing address.*

**4. What are the last four numbers of your social security number?**

XXX-XX- \_\_\_\_\_

*The last four digits of your social security number are required by §452.312, RSMO.*

**5. What is your spouse's mailing address?**

\_\_\_\_\_  
*(Street)*

\_\_\_\_\_  
*(City) (State) (Zip)*

\_\_\_\_\_  
*(Telephone Number) (E-Mail Address)*

*This is the address that the court will use to send information concerning your case to your spouse. If you do not know your spouse's current address, you should enter the last known address of your husband or wife.*

**6. What are the last four numbers of your spouse's social security number?**

XXX-XX- \_\_\_\_\_

*The last four digits of your spouse's social security number are required by §452.312, RSMo. Do not leave this field blank. If you do not know your spouse's social security number, enter "Unknown" in this field.*

ONE and only ONE box should be checked on this page.

**7. DIRECTIONS FOR SERVICE ON RESPONDENT**  
**How will your spouse receive legal notice of this proceeding?**

Respondent has signed a verified "Answer to Petition for Dissolution of Marriage" which is being filed with the "Petition for Dissolution of Marriage." Therefore, do not issue a summons.

Respondent has signed a verified "Waiver of Service and Entry of Appearance" which is being filed with the "Petition for Dissolution of Marriage." Therefore, do not issue a summons.

Respondent will voluntarily enter his/her appearance in this case and therefore summons should be issued but held in the Sheriff's office for this County. If a verified "Waiver of Service and Entry of Appearance" is not filed within thirty (30) days, this case may be dismissed without further notice to Petitioner.

Summons should be served upon Respondent at his/her residence:

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip)

Summons should be served upon Respondent at his/her place of employment:

\_\_\_\_\_  
(Employer's Name - if applicable)

\_\_\_\_\_  
(Hours of Employment)

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip)

Respondent cannot be served in Missouri. Therefore, service by registered mail is requested. A copy of the "Affidavit for Service by Mail" is attached to this form. See Missouri Supreme Court Rule 54.12(b)

The whereabouts of Respondent are unknown and there is no way of contacting him or her. I have attempted to locate the Respondent and have been unable to do so. Therefore, service by publication will be required. A copy of the "Affidavit for Service by Publication" is attached to this form. Child support, maintenance or other money judgments will not be allowed against Respondent if service is by publication. Publication must be made in the county where this matter is filed in a newspaper of general circulation. See Missouri Supreme Court Rule 54.12(c).

Other: \_\_\_\_\_

*Before your case can proceed, your spouse must be given notice that you have filed this case. This notice can be given in one of the methods described on this page.*

*If you check this box, you must file the "Answer to Petition for Dissolution of Marriage" at the same time you file this petition. The "Answer" must be signed by your spouse in front of a notary public.*

*If your spouse signs a "Waiver of Service and Entry of Appearance," he or she has 30 days in which to file an answer to the petition. The "Waiver of Service and Entry of Appearance" must be signed by your spouse in front of a notary public.*

*Your spouse can either sign an answer or waiver within 30 days, or your spouse can pick up a copy of the papers in the sheriff's office for this county within 30 days.*

*If you select this option, the clerk will issue a summons, which will be "held" in the sheriff's office.*

*Respondent may be served either at his/her place of employment or at his/her home. You should check the appropriate box.*

*Your spouse must be served within 30 days of the issuance of the summons.*

**IF YOU ARE GOING TO HAVE YOUR SPOUSE SERVED, YOU MUST FILE ANOTHER COPY OF ALL YOUR DOCUMENTS IN THIS CASE TO BE SERVED ON YOUR SPOUSE.**

*Service by registered mail is only available if your spouse resides outside the State of Missouri.*

*If you have service by mail, you are not entitled to obtain any kind of money judgment against your spouse for such things as child support or maintenance.*

*You can only obtain service by publication if the whereabouts of your spouse are unknown and you cannot locate him or her by making all reasonable attempts to find out where he or she can be served.*

*If you have service by publication, you are not entitled to obtain any kind of money judgment against your spouse for such things as child support or maintenance.*

*This option should only be utilized as a last resort.*

**NOTE: Must be authorized by Supreme Court rule or statute.**

8. What is your age? \_\_\_\_\_  
(Number of Years)

You should enter your age in years on this line.

9. In what country do you currently reside? \_\_\_\_\_  
(Country)

Read each question carefully. This question requests the COUNTRY in which you reside. It does not request the COUNTY in which you reside.

10. In what state do you currently reside and for what length of time have you resided in your state of residence?

\_\_\_\_\_  
(State of Residence)      \_\_\_\_\_  
Years    Months    Days  
(Length of Residence in this State)

You should enter state in which you reside and the length of time you have been a resident of the State. Missouri law requires that one party to a dissolution of marriage proceeding must have been a resident of the State of Missouri for at least 90 days. If the time is less than four months, state the number of days you have resided in the state.

11. In what county do you currently reside and for what length of time have you resided in your county of residence?

\_\_\_\_\_  
(Name of County)      \_\_\_\_\_  
Years    Months    Days  
(Length of Residence in this County)

Not the City  
Not the Country  
(See Explanation)

The "City of St. Louis" is considered a county. If you live in the City of St. Louis, you should write "St. Louis City" in the blank.

Also you should enter the length of time you have been a resident of the county.

12. What is your current employment status?

- Employed
- Unemployed
- Self-employed

13. If you are employed or self-employed, where do you currently work?

\_\_\_\_\_  
(Employer's Name or type of self-employment)  
  
\_\_\_\_\_  
(Street)  
  
\_\_\_\_\_  
(City)    \_\_\_\_\_  
(State)    \_\_\_\_\_  
(Zip)

If you are self-employed, enter a brief description of the type of work you perform such as "Landscaping" or "Day care" on the line for the name of your employer. If you are self-employed, you should also enter the address information for your self-employment.

14. What is your total monthly gross income from all sources?

\_\_\_\_\_  
(Total Monthly Gross Income)

Enter the total amount of gross income you earn each month. "Gross income" is the amount of money a person earns before anything such as taxes is deducted. For a more detailed definition of "gross income" see Supreme Court Form No. 14

15. Can you support yourself through the combined income from your employment and income from property that you will receive in the dissolution?

- Yes
- No

This does not include supporting any minor children.

16. What is your spouse's age? \_\_\_\_\_  
(Number of Years)

You should enter your spouse's age in years on the line.

**17. In what country does your spouse currently reside?**

\_\_\_\_\_  
(Country)

**18. In what state does your spouse currently reside and for what length of time has your spouse resided in his or her state of residence?**

\_\_\_\_\_  
(State of Residence)                                            
Years    Months    Days  
(Length of Residence in this State)

*You should enter state in which your husband or wife resides and the length of time your spouse has been a resident of the State. If the time is less than four months, state the number of days your spouse has resided in the state.*

**19. In what county does your spouse currently reside and for what length of time has your spouse resided in his or her county of residence?**

\_\_\_\_\_  
(Name of County)                                            
Years    Months    Days  
(Length of Residence in this County)

Not the City  
Not the Country

*If you do not know in which county your spouse resides and cannot find out this information from any source such as family, friends, telephone listings, or the internet, then you should enter "Unknown". Also you should enter the length of time your spouse has been a resident of the county. The "City of St. Louis" is considered a county.*

**20. If your spouse does not live in Missouri, did you and your spouse live together in Missouri during your marriage?**

- Yes.
- No.
- Not Applicable. (My spouse currently resides in Missouri)

*If you and your spouse have never lived together in the State of Missouri during your marriage and he or she does not voluntarily enter his or her appearance in this proceeding, the court will lack personal jurisdiction over your spouse. This means that the court cannot award any money judgment to you. It may be better to file this case in the state where your spouse resides. You should consult a lawyer for further information.*

**21. What is your spouse's current employment status?**

- Employed
- Unemployed
- Self-employed
- Unknown

**22. If your spouse is employed or self-employed, where does he or she currently work?**

\_\_\_\_\_  
(Employer's Name or type of self-employment)  
  
\_\_\_\_\_  
(Street)  
  
\_\_\_\_\_  
(City)                      \_\_\_\_\_  
(State)                      \_\_\_\_\_  
(Zip)

*If your spouse is self-employed, enter a brief description of the type of work he or she performs, such as "Landscaping" or "Day care," on the line for the name of your employer. If your spouse is self-employed you should also enter the address information for his or her self-employment.*

**23. What is your spouse's total monthly gross income from all sources?**

\_\_\_\_\_  
(Total Gross Monthly Income)

*Enter the total amount of gross income your spouse earns each month. "Gross income" is the amount of money a person earns before anything such as taxes is deducted. If you do not know the exact amount of gross monthly income for your spouse, you should enter your best estimate here.*

**24. Can your spouse support him or herself through the combined income from his or her employment and income from property that he or she will receive in the dissolution?**

- Yes
- No
- Unknown

*This does not include supporting any minor children born of the marriage.*

**25. Is your spouse on active duty in the military?**

- Yes
- No

You must enter a date on this line.

*If your spouse is on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may prevent you from obtaining a dissolution of marriage without your spouse's consent. You should contact a lawyer about this situation prior to filing this petition.*

**26. On what date were you married?** \_\_\_\_\_  
(MM/DD/YYYY)

**You must answer this question.**

**27. In what country, state and county did you get your marriage license?**

\_\_\_\_\_ (Country) \_\_\_\_\_ (State)  
 \_\_\_\_\_  
 (Name of County)

*You should enter the Country, State and County where you marriage is registered. This is not necessarily the same as the county where you were married. The City of St. Louis is considered a county and is the only city in the state of Missouri that is a county.*

**28. On what date did you and your spouse separate?**

\_\_\_\_\_ (MM/DD/YYYY)

You must enter a date on this line.

*The date of separation is not necessarily the same as the date one party moved out of the joint residence of the parties. Under some circumstances, the parties may be separated and still be residing in the same residence.*

**29. Is there any reasonable likelihood that your marriage can be preserved?**

- Yes
- No

*If you answered "Yes", then the court will not grant a dissolution of marriage but may grant a legal separation.*

**30. Is your marriage irretrievably broken?**

- Yes
- No

*If you answered "No", then the court will not grant a dissolution of marriage but may grant a legal separation.*

**31. State any arrangements which you and your spouse have made for the maintenance of the other party or the custody and support of any children.**

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

*If you have unemancipated children, please state any arrangements you and your spouse have concerning the support and custody of the children. Maintenance is what used to be called alimony. It refers to an amount paid by one party to the other party for his or her support. It is not the same as child support.*

**32. Is Wife pregnant?**

- Yes
- No

*You should answer "Yes" if Wife is pregnant even if Husband is not the father of this child.*

**33. How many living children do you and your spouse have together that were born after the date of your marriage?**

\_\_\_\_\_ (Number of Children)

Do not answer this question "N/A" or "Not Applicable." You MUST enter a number on this line.

**Each one of these children should be listed in your answers to Questions 38 through 41.**  
*Include in this number all living children born to Wife during this marriage as a result of sexual intercourse with Husband including children who are grown. Do not include deceased children.*



**34. How many living children did you and your spouse adopt?**

\_\_\_\_\_  
(Number of Children)

Do not answer this question "N/A" or "Not Applicable." You MUST enter a number on this line.

**Each one of these children should be listed in your answers to Questions 38 through 41.**

Include in this number all living children that were (a) born to Wife and subsequently adopted by Husband; or (b) fathered by Husband and subsequently adopted by Wife; or (c) adopted by both parties. Include in this number children who are grown. Do not include deceased children.

**35. How many living children do you and your spouse have together that were born before the date of your marriage?**

\_\_\_\_\_  
(Number of Children)

Do not answer this question "N/A" or "Not Applicable." You MUST enter a number on this line.

**Each one of these children should be listed in your answers to Questions 38 through 41.**

Include in this number all living children born to Wife before this marriage as a result of sexual intercourse with Husband including children who are grown. You should attach a copy of the birth certificate for these children to your petition. If Husband is not listed as the father on the birth certificate, additional information may be required to be included in your petition.

**36. How many living children did Wife have with someone other than Husband that were born after the date of their marriage? (This number includes children born since the parties separated)**

\_\_\_\_\_  
(Number of Children)

Do not answer this question "N/A" or "Not Applicable." You MUST enter a number on this line.

**Each one of these children should be listed in your answers to Questions 38 through 41.**

Include in this number all living children born to Wife during this marriage as a result of sexual intercourse with a man other than Husband including any children who are grown. Do not include deceased children. Information in addition to the information on this petition will be required before the court may proceed with your case.

**37. Enter the total number of children from lines 33, 34, 35, and 36.**

\_\_\_\_\_  
(Number of Children)

Do not answer this question "N/A" or "Not Applicable." You MUST enter a number on this line.

**Each one of these children should be listed in your answers to Questions 38 through 41.**

Add the numbers you entered on lines 33, 34, 35, and 36 above and enter the total.

**NOTE: If line 37 is zero, then you may skip Questions 38 through 49 and go directly to Question 50.**

**INSTRUCTIONS FOR QUESTIONS 38 THROUGH 41 PERTAINING TO CHILDREN**

Questions 38 through 41 each have 10 subparts lettered 'a' through 'j'. These subparts are arranged vertically in two columns on each page. Each of these two columns represents the information for one child. Question 38 pertains to the first child, Question 39 pertains to the second child, and so on.

**If you answered Question 37 with '0', you should skip Questions 38 through 49 and go directly to Question 50.**

**If you answered Question 37 with '1', you should answer Question 38 for the one child you listed in your answer to Question 37 and if the child is not emancipated, you should also answer questions 42 through 49 inclusive.**

**If you answered Question 37 with '2', you should answer Questions 38 and 39 for the two children you listed in your answer to Question 37. If either of the children is not emancipated, you should also answer questions 42 through 49 inclusive.**

**If you answered Question 37 with '3', you should answer Questions 38 through 40 for the three children you listed in your answer to Question 37. If any of the children are not emancipated, you should also answer questions 42 through 49 inclusive.**

**If you answered Question 37 with '4', you should answer Questions 38 through 41 for the four children you listed in your answer to Question 37. If any of the children are not emancipated, you should also answer questions 42 through 49 inclusive.**

**If you answered Question 37 with a number greater than '4', you should answer Questions 38 through 41 for the four children you listed in your answer to Question 37. Additionally, you should attach additional pages answering all the questions asked in Question 38 for each child you have in addition to the children you have described in Questions 38 through 41. If any of the children are not emancipated, you should also answer questions 42 through 49 inclusive.**

**You must list the children even if they are adults or if they are in someone else's custody. You must also list each child that was born after the date of the marriage even if Husband is not the father of the child.**

| QUESTION 38<br><small>(To be answered if the answer to question 37 is one or more)</small>   | CHILD ONE  |
|--|------------|
| 38a. What is the full name of this child?  | a.         |
| 38b. What are the last four numbers of this child's Social Security Number?  | b. XXX-XX- |
| 38c. What is the current address of this child?  | c.         |
| 38d. What is this child's age?   | d.         |
| <p>38e. Check all of the following boxes that apply: <span style="float: right;"><small>(To be answered for each child)</small></span></p> <p><input type="checkbox"/> This child is married or is on active duty in the military.</p> <p><input type="checkbox"/> This child is self-supporting and the custodial parent has relinquished parental control over this child by express or implied consent.</p> <p><input type="checkbox"/> This child is over the age of 21, is not insolvent, and is not physically or mentally incapacitated from supporting himself or herself.</p> <p>This child is over the age of 18, has not yet reached the age of 21, is not insolvent, is not physically or mentally incapacitated from supporting himself or herself, and one or more of the following is true:</p> <p><input type="checkbox"/> This child is not currently enrolled in or attending high school or college.</p> <p><input type="checkbox"/> This child graduated from high school, but has not been continuously enrolled in college since October 1 immediately following his or her graduation from high school.</p> <p><input type="checkbox"/> This child graduated from high school and has been continuously enrolled in college since October 1 immediately following his or her graduation from high school, but has failed to complete at least 12 hours each semester or complete at least 9 hours and work at least 15 hours per week during the same period. (This provision does not apply to a child who has been diagnosed with a learning disability or whose physical disability or diagnosed health problem limits the child's ability to carry sufficient credit hours.)</p> <p><small>If the circumstances of the child manifestly dictate, the court may waive the October 1 deadline for enrollment. "College" means any junior college, community college, college or university at which the child attends classes regularly. As used in this form, "college" also includes any postsecondary training or schooling for which the student is assessed a fee and attends classes regularly.</small></p> |            |

**If you did not check any of the boxes in Question '38e', you must answer the rest of the information for this child on this page (parts '38f' through '38j') and you must also answer questions 42 through 49 for this child. This child IS NOT emancipated and the court must make orders with respect to custody and support of this child.**

**If you checked any of the boxes in Question '38e', you do not need to answer the rest of the information for this child and questions 42 through 49 do not apply to this child. This child IS emancipated.**

|  |  |
|--|--|
| 38f. With whom has this child primarily resided during the previous 60 days?   | f.   |
| 38g. Who should have legal custody of this child? <small>NOTE: Legal custody refers to who will make the decisions concerning health, education and welfare for this child. §452.375.1(2), RSMo.</small> | g. <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Joint Husband/Wife<br><input type="checkbox"/> Third Person |
| 38h. Who should have physical custody of this child? <small>NOTE: Physical custody refers to where this child will reside and what time this child spends with each parent. §452.375.1(3), RSMo.</small> | h. <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Joint Husband/Wife<br><input type="checkbox"/> Third Person |
| 38i. Who is the father of this child? <small>If Husband is not the father of this child, you must state the name of each person who could be the father.</small>   | i. <input type="checkbox"/> Husband<br><input type="checkbox"/> Other (State Name(s))<br>_____   |
| 38j. If this child was born prior to the marriage, is Husband listed as the father on the birth certificate?   | j. <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Not Applicable  |

| QUESTION 39<br><small>(To be answered if the answer to question 37 is two or more)</small>   | CHILD TWO  |
|--|------------|
| 39a. What is the full name of this child?  | a.         |
| 39b. What are the last four numbers of this child's Social Security Number?  | b. XXX-XX- |
| 39c. What is the current address of this child?  | c.         |
| 39d. What is this child's age?   | d.         |
| <p>39e. Check all of the following boxes that apply: <span style="float: right;"><small>(To be answered for each child)</small></span></p> <p><input type="checkbox"/> This child is married or is on active duty in the military.</p> <p><input type="checkbox"/> This child is self-supporting and the custodial parent has relinquished parental control over this child by express or implied consent.</p> <p><input type="checkbox"/> This child is over the age of 21, is not insolvent, and is not physically or mentally incapacitated from supporting himself or herself.</p> <p>This child is over the age of 18, has not yet reached the age of 21, is not insolvent, is not physically or mentally incapacitated from supporting himself or herself, and one or more of the following is true:</p> <p><input type="checkbox"/> This child is not currently enrolled in or attending high school or college.</p> <p><input type="checkbox"/> This child graduated from high school, but has not been continuously enrolled in college since October 1 immediately following his or her graduation from high school.</p> <p><input type="checkbox"/> This child graduated from high school and has been continuously enrolled in college since October 1 immediately following his or her graduation from high school, but has failed to complete at least 12 hours each semester or complete at least 9 hours and work at least 15 hours per week during the same period. (This provision does not apply to a child who has been diagnosed with a learning disability or whose physical disability or diagnosed health problem limits the child's ability to carry sufficient credit hours.)</p> <p><small>If the circumstances of the child manifestly dictate, the court may waive the October 1 deadline for enrollment. "College" means any junior college, community college, college or university at which the child attends classes regularly. As used in this form, "college" also includes any postsecondary training or schooling for which the student is assessed a fee and attends classes regularly.</small></p> |            |

**If you did not check any of the boxes in Question '39e', you must answer the rest of the information for this child on this page (parts '39f' through '39j') and you must also answer questions 42 through 49 for this child. This child IS NOT emancipated and the court must make orders with respect to custody and support of this child.**

**If you checked any of the boxes in Question '39e', you do not need to answer the rest of the information for this child and questions 42 through 49 do not apply to this child. This child IS emancipated.**

|  |  |
|--|--|
| 39f. With whom has this child primarily resided during the previous 60 days?   | f.   |
| 39g. Who should have legal custody of this child? <small>NOTE: Legal custody refers to who will make the decisions concerning health, education and welfare for this child. §452.375.1(2), RSMo.</small> | g. <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Joint Husband/Wife<br><input type="checkbox"/> Third Person |
| 39h. Who should have physical custody of this child? <small>NOTE: Physical custody refers to where this child will reside and what time this child spends with each parent. §452.375.1(3), RSMo.</small> | h. <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Joint Husband/Wife<br><input type="checkbox"/> Third Person |
| 39i. Who is the father of this child? <small>If Husband is not the father of this child, you must state the name of each person who could be the father.</small>   | i. <input type="checkbox"/> Husband<br><input type="checkbox"/> Other (State Name(s))<br>_____   |
| 39j. If this child was born prior to the marriage, is Husband listed as the father on the birth certificate?   | j. <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Not Applicable  |

| QUESTION 40<br><small>(To be answered if the answer to question 37 is three or more)</small>   | CHILD THREE |
|--|-------------|
| 40a. What is the full name of this child?  | a.          |
| 40b. What are the last four numbers of this child's Social Security Number?  | b. XXX-XX-  |
| 40c. What is the current address of this child?  | c.          |
| 40d. What is this child's age?   | d.          |
| <p>40e. Check all of the following boxes that apply: <span style="float: right;"><small>(To be answered for each child)</small></span></p> <p><input type="checkbox"/> This child is married or is on active duty in the military.</p> <p><input type="checkbox"/> This child is self-supporting and the custodial parent has relinquished parental control over this child by express or implied consent.</p> <p><input type="checkbox"/> This child is over the age of 21, is not insolvent, and is not physically or mentally incapacitated from supporting himself or herself.</p> <p>This child is over the age of 18, has not yet reached the age of 21, is not insolvent, is not physically or mentally incapacitated from supporting himself or herself, and one or more of the following is true:</p> <p><input type="checkbox"/> This child is not currently enrolled in or attending high school or college.</p> <p><input type="checkbox"/> This child graduated from high school, but has not been continuously enrolled in college since October 1 immediately following his or her graduation from high school.</p> <p><input type="checkbox"/> This child graduated from high school and has been continuously enrolled in college since October 1 immediately following his or her graduation from high school, but has failed to complete at least 12 hours each semester or complete at least 9 hours and work at least 15 hours per week during the same period. (This provision does not apply to a child who has been diagnosed with a learning disability or whose physical disability or diagnosed health problem limits the child's ability to carry sufficient credit hours.)</p> <p><small>If the circumstances of the child manifestly dictate, the court may waive the October 1 deadline for enrollment. "College" means any junior college, community college, college or university at which the child attends classes regularly. As used in this form, "college" also includes any postsecondary training or schooling for which the student is assessed a fee and attends classes regularly.</small></p> |             |

**If you did not check any of the boxes in Question '40e', you must answer the rest of the information for this child on this page (parts '40f' through '40j') and you must also answer questions 42 through 49 for this child. This child IS NOT emancipated and the court must make orders with respect to custody and support of this child.**

**If you checked any of the boxes in Question '40e', you do not need to answer the rest of the information for this child and questions 42 through 49 do not apply to this child. This child IS emancipated.**

|  |  |
|--|--|
| 40f. With whom has this child primarily resided during the previous 60 days?   | f.   |
| 40g. Who should have legal custody of this child? <small>NOTE: Legal custody refers to who will make the decisions concerning health, education and welfare for this child. §452.375.1(2), RSMo.</small> | g. <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Joint Husband/Wife<br><input type="checkbox"/> Third Person |
| 40h. Who should have physical custody of this child? <small>NOTE: Physical custody refers to where this child will reside and what time this child spends with each parent. §452.375.1(3), RSMo.</small> | h. <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Joint Husband/Wife<br><input type="checkbox"/> Third Person |
| 40i. Who is the father of this child? <small>If Husband is not the father of this child, you must state the name of each person who could be the father.</small>   | i. <input type="checkbox"/> Husband<br><input type="checkbox"/> Other (State Name(s))<br>_____   |
| 40j. If this child was born prior to the marriage, is Husband listed as the father on the birth certificate?   | j. <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Not Applicable  |

| QUESTION 41<br><i>(To be answered if the answer to question 37 is four or more)</i>   | CHILD FOUR |
|---|------------|
| 41a. What is the full name of this child?   | a.         |
| 41b. What are the last four numbers of this child's Social Security Number?   | b. XXX-XX- |
| 41c. What is the current address of this child?   | c.         |
| 41d. What is this child's age?  | d.         |
| <p>41e. Check all of the following boxes that apply: <span style="float: right;"><i>(To be answered for each child)</i></span></p> <p><input type="checkbox"/> This child is married or is on active duty in the military.</p> <p><input type="checkbox"/> This child is self-supporting and the custodial parent has relinquished parental control over this child by express or implied consent.</p> <p><input type="checkbox"/> This child is over the age of 21, is not insolvent, and is not physically or mentally incapacitated from supporting himself or herself.</p> <p>This child is over the age of 18, has not yet reached the age of 21, is not insolvent, is not physically or mentally incapacitated from supporting himself or herself, and one or more of the following is true:</p> <p><input type="checkbox"/> This child is not currently enrolled in or attending high school or college.</p> <p><input type="checkbox"/> This child graduated from high school, but has not been continuously enrolled in college since October 1 immediately following his or her graduation from high school.</p> <p><input type="checkbox"/> This child graduated from high school and has been continuously enrolled in college since October 1 immediately following his or her graduation from high school, but has failed to complete at least 12 hours each semester or complete at least 9 hours and work at least 15 hours per week during the same period. (This provision does not apply to a child who has been diagnosed with a learning disability or whose physical disability or diagnosed health problem limits the child's ability to carry sufficient credit hours.)</p> <p><small><i>If the circumstances of the child manifestly dictate, the court may waive the October 1 deadline for enrollment. "College" means any junior college, community college, college or university at which the child attends classes regularly. As used in this form, "college" also includes any postsecondary training or schooling for which the student is assessed a fee and attends classes regularly.</i></small></p> |            |

**If you did not check any of the boxes in Question '41e', you must answer the rest of the information for this child on this page (parts '41f' through '41j') and you must also answer questions 42 through 49 for this child. This child IS NOT emancipated and the court must make orders with respect to custody and support of this child.**

**If you checked any of the boxes in Question '41e', you do not need to answer the rest of the information for this child and questions 42 through 49 do not apply to this child. This child IS emancipated.**

|  |  |
|--|--|
| 41f. With whom has this child primarily resided during the previous 60 days?   | f.   |
| 41g. Who should have legal custody of this child? <small>NOTE: Legal custody refers to who will make the decisions concerning health, education and welfare for this child. §452.375.1(2), RSMo.</small> | g. <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Joint Husband/Wife<br><input type="checkbox"/> Third Person |
| 41h. Who should have physical custody of this child? <small>NOTE: Physical custody refers to where this child will reside and what time this child spends with each parent. §452.375.1(3), RSMo.</small> | h. <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Joint Husband/Wife<br><input type="checkbox"/> Third Person |
| 41i. Who is the father of this child? <small>If Husband is not the father of this child, you must state the name of each person who could be the father.</small>   | i. <input type="checkbox"/> Husband<br><input type="checkbox"/> Other (State Name(s))<br>_____   |
| 41j. If this child was born prior to the marriage, is Husband listed as the father on the birth certificate?   | j. <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> Not Applicable  |

# Additional Information about Unemancipated Children

Questions 42 through 49 below pertain to all unemancipated children listed in your answers to questions 38 through 41. If there are no unemancipated children, you may skip questions 42 through 49 and go directly to question 50 on page 12 of this Petition. The information on this page is required under the Uniform Child Custody Jurisdiction and Enforcement Act, §452.700, RSMo et seq., and under §454.501, RSMo.

**42. State all addresses at which the unemancipated children have resided during the past five years and the name of the person or persons with whom said children resided.**

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**43. Do you know of anyone other than you or your spouse that has physical custody of any of the unemancipated children or claims to have custody or visitation rights with respect to any of the unemancipated children?**

- Yes  
 No

**44. Do you have any information of any other custody proceeding concerning any of the unemancipated children pending in a court of this or any other state?**

- Yes  
 No

**45. Have you participated in any other litigation concerning the custody of any of the unemancipated children in this or any other state?**

- Yes  
 No

**46. Have any of the unemancipated children been a victim of abuse or neglect?**

- Yes  
 No

**47. If you answered "Yes" to questions 43, 44, 45, or 46 please explain.**

---

---

**48. Have any orders pertaining to any of the unemancipated children been entered by the Family Support Division?**

- Yes, I have attached a copy of the order to this petition.  
 No

**49. Are you or your spouse currently receiving benefits pursuant to TANF?**

- Yes  
 No  
 Unknown

**Do not leave these questions blank if there are unemancipated children.**

**50. Are there any other allegations?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*If there are any other statements you wish to include in your petition, you should enter them here. Specific allegations of misconduct are not necessary unless and until your spouse denies that the marriage is irretrievably broken.*

**Request for Relief**

I want the court to do the following: *(Check all that apply)*

Grant a dissolution of my marriage

Grant custody of the child(ren) of the marriage as stated herein (if applicable)

Enter appropriate orders with respect to the support of the child(ren) (if applicable)

Divide the marital property and debts

Award maintenance to me

Award maintenance to my spouse

Change my name to my former name of \_\_\_\_\_.

I am without sufficient funds to pay for my attorney and I request that the other party pay my attorney's fees.

Other (Please state the other requests)

\_\_\_\_\_

\_\_\_\_\_

Petitioner, of lawful age, being duly sworn on his or her oath states that he or she is the petitioner named above and that the facts stated in the Petition for Dissolution of Marriage are true according to his or her best knowledge and belief.

▶ \_\_\_\_\_  
 Petitioner – SIGN HERE    Petitioner – PRINT YOUR NAME HERE

Subscribed and sworn to this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 Notary Public

My Commission Expires:  
 \_\_\_\_\_

You must sign this petition in front of a Notary Public.

|  |   |
|--|---|
| <p><b>ATTORNEY INFORMATION</b> <i>(May be completed by your attorney)</i></p> <p>_____<br/>         Attorney – SIGN HERE    Missouri Bar Number</p> <p>_____<br/>         Attorney for Petitioner – PRINT YOUR NAME HERE</p> <p>_____<br/>         (Street)</p> <p>_____<br/>         (City)    (State)    (Zip)</p> <p>_____<br/>         (Telephone Number)                          (Fax Number)                          (Email Address)</p> | <p><i>Do not enter any information here if you are filing this case without the assistance of a lawyer. This information may be completed by your attorney.</i></p> <p><input type="checkbox"/> <i>I have assisted Petitioner in the preparation of these pleadings, but I am not entering my appearance on behalf of Petitioner.</i></p> |
|--|---|

TYPE/PRINT  
IN  
PERMANENT  
BLACK INK.  
FOR  
INSTRUCTIONS  
SEE HANDBOOK.

MISSOURI DEPARTMENT OF HEALTH  
**CERTIFICATE OF DISSOLUTION OF MARRIAGE**

CASE NUMBER

STATE FILE NUMBER

**HUSBAND**

VS 800  
Rev. 6/97  
MO 580-0716  
(6/97)

**WIFE**

**MARRIAGE**

**ATTORNEY**

**DECREE**

**HUSBAND**

**WIFE**

|  |   |   |   |
|--|---|---|---|
| 1. HUSBAND'S NAME (First, Middle, Last)  |   | 1a. SOCIAL SECURITY NO.   |   |
| 2a. RESIDENCE - CITY, TOWN, OR LOCATION  |   | 2b. STATE   | 2c. ZIP CODE  |
| 2d. COUNTY   | 3. DATE OF BIRTH (Month, Day, Year)   | 4. BIRTHPLACE (State or Foreign Country)  |   |
| 5a. WIFE'S NAME (First, Middle, Last)  |   | 5b. MAIDEN SURNAME  | 5c. SOCIAL SECURITY NO.   |
| 6a. RESIDENCE - CITY, TOWN, OR LOCATION  |   | 6b. STATE   | 6c. ZIP CODE  |
| 6d. COUNTY   | 7. DATE OF BIRTH (Month, Day, Year)   | 8. BIRTHPLACE (State or Foreign Country)  |   |
| 9a. PLACE OF THIS MARRIAGE - CITY, TOWN OR LOCATION  | 9b. COUNTY  | 9c. STATE OR FOREIGN COUNTRY  | 10. DATE OF THIS MARRIAGE (Month, Day, Year)  |
| 11. DATE COUPLE LAST RESIDED IN SAME HOUSEHOLD (Month, Day, Year)  | 12. NUMBER OF CHILDREN UNDER 18 IN THIS HOUSEHOLD AS OF THE DATE IN ITEM 11<br>Number _____ <input type="checkbox"/> None   | 13. PETITIONER<br>0 <input type="checkbox"/> Husband 1 <input type="checkbox"/> Wife 2 <input type="checkbox"/> Joint<br>3 <input type="checkbox"/> Other (Specify) _____   |   |
| 14a. NAME OF PETITIONER'S ATTORNEY (Type or Print)   |   | 14b. ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip code)   |   |
| 15. I CERTIFY THAT THE MARRIAGE OF THE ABOVE-NAMED PERSONS WAS DISSOLVED ON:<br>(Month, Day, Year)   | 16. TYPE OF DECREE<br>0 <input type="checkbox"/> Dissolution 1 <input type="checkbox"/> Legal Separation 2 <input type="checkbox"/> Annulment   |   | 17. DATE RECORDED (Month, Day, Year)  |
| 18. NUMBER OF CHILDREN UNDER 18 WHOSE PHYSICAL CUSTODY WAS AWARDED TO:<br>Husband _____ Wife _____<br>Joint (Husband/Wife) _____ Other _____<br><input type="checkbox"/> No children | 19. CHILD SUPPORT WAS AWARDED TO:<br>1 <input type="checkbox"/> Husband<br>2 <input type="checkbox"/> Wife<br>4 <input type="checkbox"/> Other<br>3 <input type="checkbox"/> No child support awarded | 20. COUNTY OF DECREE  | 21. TITLE OF COURT  |
| 22. SIGNATURE OF CERTIFYING OFFICIAL   |   | 23. TITLE OF CERTIFYING OFFICIAL  |   |
| 24. NUMBER OF THIS MARRIAGE - First, Second, etc. (Specify below)  | 25. IF PREVIOUSLY MARRIED, LAST MARRIAGE ENDED<br>By: _____ Date: (Month, Year) _____   |   | 27. EDUCATION (Specify only highest grade completed)<br>Elementary/Secondary (0-12) _____ College (1-4 or 5+) _____ |
| 24a.   | 25a. 2 <input type="checkbox"/> Death<br>3 <input type="checkbox"/> Divorce, dissolution, or annulment  | 25c.  | 27a.  |
| 24b.   | 25b. 2 <input type="checkbox"/> Death<br>3 <input type="checkbox"/> Divorce, dissolution, or annulment  | 25d.  | 27b.  |
|  |   | 26a. 1 <input type="checkbox"/> White<br>2 <input type="checkbox"/> Black<br>3 <input type="checkbox"/> American Indian<br>4 <input type="checkbox"/> Other (Specify) _____ |   |
|  |   | 26b. 1 <input type="checkbox"/> White<br>2 <input type="checkbox"/> Black<br>3 <input type="checkbox"/> American Indian<br>4 <input type="checkbox"/> Other (Specify) _____ |   |



# Form CAFC050 - Income and Expense Statement

For use in Dissolution of Marriage Cases

In what Missouri County is this case to be decided?

|                         |          |
|-------------------------|----------|
| In the Circuit Court of | MISSOURI |
|-------------------------|----------|

What is the case number? *(This number is assigned at time of filing)*

|             |                 |
|-------------|-----------------|
| Case Number | Division Number |
|-------------|-----------------|

*Answer all questions on this form completely.*

## Your Information

|  |                      |                    |                      |
|--|----------------------|--------------------|----------------------|
| My full name is:   |                      |                    |                      |
| _____  | _____                | _____              | _____                |
| <i>(First Name)</i>  | <i>(Middle Name)</i> | <i>(Last Name)</i> | <i>(Jr./Sr./III)</i> |
| <input type="checkbox"/> I filed this case. (I am the Petitioner)        |                      |                    |                      |
| <input type="checkbox"/> I did not file this case. (I am the Respondent) |                      |                    |                      |

## Other Party's Information

|   |                      |                    |                      |
|---|----------------------|--------------------|----------------------|
| The full name of my husband or wife is: |                      |                    |                      |
| _____                                   | _____                | _____              | _____                |
| <i>(First Name)</i>                     | <i>(Middle Name)</i> | <i>(Last Name)</i> | <i>(Jr./Sr./III)</i> |

## Monthly Income Information

|  | Wife  | Husband |
|--|-------|---------|
| 1. Monthly Gross Income from Salaries, Wages and Commissions including Bonuses       | _____ | _____   |
| 2. Monthly Self-Employment Income  | _____ | _____   |
| 3. Imputed Monthly Income  | _____ | _____   |
| 4. Monthly Social Security Benefits not including Supplemental Security Income (SSI) | _____ | _____   |
| 5. Monthly Retirement Benefits   | _____ | _____   |
| 6. Monthly Pension Income  | _____ | _____   |
| 7. Monthly Interest Income   | _____ | _____   |
| 8. Monthly Trust and Annuity Income  | _____ | _____   |
| 9. Monthly Income from Dividends and Partnership Distributions                       | _____ | _____   |
| 10. Monthly Unemployment Compensation Benefits                                       | _____ | _____   |
| 11. Monthly Severance Pay  | _____ | _____   |
| 12. Monthly Worker's Compensation Benefits   | _____ | _____   |

**Monthly  
Income  
Information  
(Continued)**

|   | Wife  | Husband |
|---|-------|---------|
| 13. Monthly Disability Insurance Benefits   | _____ | _____   |
| 14. Monthly Veterans Disability Benefits  | _____ | _____   |
| 15. Monthly Military Allowances for Subsistence and Quarters  | _____ | _____   |
| 16. Total Monthly Gross Income from Paragraphs 1 through 15 (Also enter on Form 14 - Line 1)  | _____ | _____   |
| 17. Monthly Supplemental Security Income Benefits (SSI)   | _____ | _____   |
| 18. Monthly Payments of Temporary Assistance for Needy Families (TANF)  | _____ | _____   |
| 19. Monthly Medicaid Benefits   | _____ | _____   |
| 20. Food Stamps   | _____ | _____   |
| 21. Number of unemancipated children who are NOT the subject of this proceeding that primarily reside with each party (also enter on Form 14 - Line 2c(1))  | _____ | _____   |
| Monthly amount of child support received pursuant to a court or administrative order for unemancipated children who are NOT the subject of this proceeding that primarily reside with each party (Also enter on Form 14 - Line 2c(3)) | _____ | _____   |
| 22. Monthly Maintenance Received in THIS case   | _____ | _____   |
| 23. Monthly Maintenance Received in OTHER cases   | _____ | _____   |
| 24. Total Monthly court ordered maintenance being received. Add lines 22 and 23. (Form 14 - Line 1a)  | _____ | _____   |

**Monthly  
Expense  
Information**

|  | Wife  | Husband |
|--|-------|---------|
| 25. Monthly court or administratively ordered child support being paid for children who are NOT the subject of this Proceeding (Form 14 - Line 2a)   | _____ | _____   |
| 26. Monthly Maintenance Paid in THIS case  | _____ | _____   |
| 27. Monthly Maintenance Paid in OTHER cases  | _____ | _____   |
| 28. Total Monthly Court Ordered Maintenance being Paid. Add lines 26 and 27. (Form 14 - Line 2b)   | _____ | _____   |
| 29. Reasonable work-related child care costs of each party for the children who are the subject of this proceeding (Form 14 - Line 6a and Line 6b)   | _____ | _____   |
| 30. Health insurance costs for the children who are the subject of this proceeding (Form 14 - Line 6c)   | _____ | _____   |
| 31. Uninsured extraordinary medical costs for the children who are the subject of this proceeding (Form 14 - Line 6d)  | _____ | _____   |
| 32. Other extraordinary child rearing costs for the children who are the subject of this proceeding (Form 14- Line 6e)   | _____ | _____   |
| 33. All Other Expenses of each person (Include housing costs, utilities, transportation costs, food, clothing, loan payments, charitable contributions, entertainment, insurance other than listed on line 30, etc.) | _____ | _____   |

I certify under oath that I have given the other party a copy of this Income and Expense Statement pursuant to Supreme Court Rule 43.01(d) by: *(You MUST check at least ONE of the following five boxes)*

- Serving a copy with the original pleadings herein.
- Mailing a copy to the other party or his or her attorney on \_\_\_\_\_ (Date) at the following address:

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip)

- Handing a copy to the other party or his or her attorney on \_\_\_\_\_(Date).

- Sending a copy to the other party or his or her attorney by fax to \_\_\_\_\_ (fax number) on \_\_\_\_\_ (Date) at \_\_\_\_\_ (Time).

- Sending a copy via electronic mail to the other party or his or her attorney at \_\_\_\_\_ (Email Address) on \_\_\_\_\_ (Date).

*Instructions: The following information MUST be filled in before a notary public. This Income and Expense Statement is required to be verified before a notary public. The "Affiant" is the person that is completing this document.*

COUNTY OF \_\_\_\_\_ )  
 ) ss.  
 STATE OF \_\_\_\_\_ )

Affiant, of lawful age, being duly sworn on his or her oath, states that he or she is the affiant named herein and that the facts stated in this Income and Expense Statement are true according to his or her best knowledge and belief.

► \_\_\_\_\_ Affiant - SIGN HERE

\_\_\_\_\_ Affiant - PRINT YOUR NAME HERE

Subscribed and sworn to on \_\_\_\_\_

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

Sign here in front of  
a Notary Public

## Form CAFC040 - Directions and Information

Do I have to file this form?

Yes. You must file Form CAFC040 with either your "Petition for Dissolution of Marriage" or your "Answer," even if it is not signed by both parties. You should not file these directions with the court.

What is marital property?

§452.330, RSMo. defines "marital property." Usually marital property is property acquired by either spouse during the marriage of the parties other than property acquired by gift, inheritance, or in exchange for nonmarital property. This means that all wages earned during the marriage are marital property. All property owned by the parties is presumed to be marital property.

Nonmarital property can be converted to marital property by placing a spouse's name on an account or title. Also, a marital interest can be acquired in nonmarital property by the contribution of marital assets to the increase in value of the nonmarital property. Finally, income from nonmarital property during the marriage of the parties is marital property.

What is nonmarital property?

"Nonmarital property" is property that was acquired prior to the marriage or property that was acquired during the marriage by gift, inheritance, or in exchange for nonmarital property. Nonmarital property is sometimes also called "separate property." Additionally, some state teacher retirement benefits are considered nonmarital. §169.572, RSMo.

Can property be marital and nonmarital?

Yes. If an item of property is partly marital and partly nonmarital, then it should be listed under both the marital and nonmarital sections. For example, if one party had earned pension benefits for five years prior to the marriage and continued to earn the same pension benefits for five years during the marriage, one-half or 50% of the pension and retirement benefits are marital and one-half or 50% are nonmarital. In that situation, the pension and retirement benefits would be listed both under marital and nonmarital property.

What is "fair market value"?

This is the amount someone would pay for this item of property today. It is not what the property cost when you purchased it. A ten year old automobile has a value far less than the amount you paid for the automobile.

What if I don't agree with this proposed separation agreement?

You must take appropriate actions to protect your interests. **CONSULT A LAWYER.** Do not fail to respond if you have been served with these papers as the court may proceed without any further notice to you.

Do we have to list our property even if we've already divided it?

Yes, all property and all debt must still be included on one of the tables.

What property should I list on this form?

ALL PROPERTY AND MARITAL DEBT must be divided in a dissolution of marriage proceeding. Your dissolution of marriage may not be final unless this is done. This includes the following types of property and debt:

Real estate, motor vehicles, bank accounts, pension and retirement plans and profit sharing plans, stocks, bonds or other securities, life insurance, cash on hand, household goods, personal goods, trust interests, businesses or partnerships, debts owed to you or your spouse by others, any interests in pending litigation or suits to be filed, farm equipment, animals or crops, interests in contracts made and not performed, and any other assets.

Do I have to list property even if my spouse's name is not on it?

Yes, you must list all property owned by you alone, by your spouse alone, and by you and your spouse together. You must list property even if it is not in joint names. Any property in which either you or your spouse claim ANY interest whatsoever MUST be listed.

In many instances, you will not be able to sell your property or receive your retirement unless you prove that these items were listed in your dissolution of marriage judgment.

Do I have to list property that either of us is buying at the present time?

YES. You must list all property that either you or your spouse is purchasing by making monthly payments. So, even if you owe money on your car or home, it still must be listed. Actually, it must be listed twice: once as an item of property and once as a debt secured by the property.

Do I have to list property I owned before the marriage?

Yes. This is normally nonmarital property, but under some circumstances it may be considered marital property.

Do I have to list property my spouse owned before the marriage?

Yes. Just as you had to list property you owned before the marriage, you should also list property your spouse owned before the marriage. Once again, this is normally nonmarital property, but under some circumstances it may be considered marital property.

I don't know what my spouse owns so how can I list it?

You should hire a lawyer to assist you. A lawyer has the ability to assist you in locating the assets of your spouse.

Do I have to list property I acquired after we separated?

Yes. You are still married, so any property or debt that you have acquired since your separation has to be included.

What happens if I don't list all the property and marital debt?

It would be a VERY BIG mistake not to list all your property and marital debt. Your dissolution of marriage may not be final, and your spouse will be able to come back in the future and try and get this item of property. In some cases, you may not be able to receive your pension or sell your property without proof that your dissolution of marriage judgment listed the property.

Should I list my pension even though I can't receive any benefits now?

Yes. It is very important that you list all pension plans in which you or your spouse participate. They should be listed even if you can't receive any benefits for a long time. If you don't list a pension plan, you may not be able to receive any benefits in the future without further legal proceedings.

Do I have to list every last dish and towel?

No. You do not need to list property if it is of minimal value. If the item of property is worth less than \$100.00, you may omit it from your list.

What if I acquire some property or debt after I file my case?

If you acquire any additional property or debt during the time this case is pending, you must notify the court of that fact at the time of your hearing. If you dispose of any property or pay off any debt during the time this case is pending, you must notify the court of that fact at the time of your hearing.

What if I need more space on the tables?

You may make copies of any of the four tables if you need additional room for more property or debt. When you have listed all the property and debt, you should number the pages. Make sure you write "Not Applicable" or "N/A" in each box under "Item of Property" or "Item of Debt" that you do not fill. (Someone could fill this in later with some other information)

## IMPORTANT

This document is placed in a court file, which is an open document available to the public. In listing your bank or other accounts, or your credit card or other debt, do not include the entire account number. You should include only enough information to distinguish your account from other accounts owned by you and your spouse. For example, in listing a credit card number, you should include only the last four digits of the account, such as xxxx-xxxx-xxxx-1234.

# Form CAFC040 - Property and Debt Statement and Proposed Separation Agreement (For use in Dissolution of Marriage Cases)

In what Missouri county will this case be filed?

|                         |          |
|-------------------------|----------|
| In the Circuit Court of | MISSOURI |
|-------------------------|----------|

What is the case number of the pending case?

|             |
|-------------|
| Case Number |
|-------------|

|                 |
|-----------------|
| Division Number |
|-----------------|

*Answer all questions on this form completely.*

## Petitioner's Information

The full name of the person that filed this case is:

\_\_\_\_\_  
(First Name)                      (Middle Name)                      (Last Name)                      (Jr./Sr./III)

- Wife filed this case and is the Petitioner.  
 Husband filed this case and is the Petitioner.

## Respondent's Information

The full name of the person that did NOT file this case:

\_\_\_\_\_  
(First Name)                      (Middle Name)                      (Last Name)                      (Jr./Sr./III)

What does this form cover?

There are two parts to this document. Part One is your division of property and debt and Part Two pertains to spousal support or "maintenance." This document does not have anything to do with child support or custody. Issues addressing child support and custody are contained in a parenting plan.

What is a Separation Agreement?

It is an agreement in which you and your spouse agree to a distribution of property and debt and to provisions concerning maintenance and attorney's fees. If both you and your spouse sign this document, it is called a "Separation Agreement." It does not include provisions for child custody and child support.

Even if both you and your spouse have signed the agreement, the court is not bound by it. If the court finds that your agreement is "unconscionable" or does not divide all property and marital debt, it will not be approved by the court. The court can divide the property in any manner it considers fair, and it may or may not order maintenance to be paid.

How do I complete Part One of this Form?

You must list all of your marital and nonmarital property and marital debt on one of the four tables.

Use a separate row for each item of property or debt. You should draw a line through all rows that do not contain an item of property. This is very important because someone could alter this document after you have signed it. Keep a copy of this document after you have signed it.

## Part One – Division of Property and Debt

You must answer “Yes” or “No” to each of the following questions.

**Property  
Owned by  
Wife**  
(either alone or  
with anyone else)

|   |                              |                             |
|---|------------------------------|-----------------------------|
| Does Wife own a house, condominium or other real estate?<br><i>(You should attach a copy of the deed for each item of real estate to this form)</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife own a car, truck or motorcycle?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife own a mobile home, trailer, boat or airplane?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife have any bank accounts?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife have any right to receive any pension or retirement benefits other than Social Security?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife have an IRA or 401(k) or other retirement account?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife have any furniture, appliances or other household goods worth more than \$100?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife have any jewelry, clothing or other personal items worth more than \$100?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife own a business?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife own any stocks or bond?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife have any life insurance that could be cashed in?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does anyone owe Wife any money?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife have any lawsuits against anyone?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife have any farm equipment, animals or crops?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife have any interest in any trusts?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife have any other asset or property?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**Property  
Owned by  
Husband**  
(either alone or  
with anyone else)

|  |                              |                             |
|--|------------------------------|-----------------------------|
| Does Husband own a house, condominium or other real estate?<br><i>(You should attach a copy of the deed for each item of real estate to this form)</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband own a car, truck or motorcycle?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband own a mobile home, trailer, boat or airplane?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband have any bank accounts?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband have any right to receive any pension or retirement benefits other than Social Security?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband have an IRA or 401(k) or other retirement account?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband have any furniture, appliances or other household goods worth more than \$100?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband have any jewelry, clothing or other personal items worth more than \$100?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband own a business?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband own any stocks or bond?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband have any life insurance that could be cashed in?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does anyone owe Husband any money?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband have any lawsuits against anyone?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband have any farm equipment, animals or crops?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband have any interest in any trusts?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband have any other asset or property?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered “Yes” to any of the above questions, you must list each item of property in either Table 1 or Table 2 on the following pages.



**TABLE 1. PROPERTY TO BE AWARDED TO WIFE** - The following property is to become the sole and separate property of WIFE.

| Item of Property | Present Fair Market Value                          | Is there an amount owed on this property?   | Is this marital or nonmarital property?  | Party with Possession of this Property  |
|------------------|--|---|--|---|
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |

**TABLE 2. PROPERTY TO BE AWARDED TO HUSBAND** - The following property is to become the sole and separate property of HUSBAND.

| Item of Property | Present Fair Market Value                          | Is there an amount owed on this property?   | Is this marital or nonmarital property?  | Party with Possession of this Property  |
|------------------|--|---|--|---|
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |
|                  | <i>(Do not deduct amount owed from this value)</i> | <input type="checkbox"/> Yes - List debt in Tables 3 or 4.<br><input type="checkbox"/> No | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both | <input type="checkbox"/> Wife<br><input type="checkbox"/> Husband<br><input type="checkbox"/> Other |

**Debts that  
Wife Owes**  
(either alone or  
with anyone else)

|  |                              |                             |
|--|------------------------------|-----------------------------|
| Does Wife owe a mortgage on a house or condominium or land?                      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife owe money on a car?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife owe money on any credit cards?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife owe any money to any family or friends?                                | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is Wife currently in a bankruptcy proceeding? ( <i>Chapter 7 or Chapter 13</i> ) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife owe any medical or dental bills?                                       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Wife owe any other debts?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**Debts that  
Husband  
Owes** (either  
alone or with  
anyone else)

|   |                              |                             |
|---|------------------------------|-----------------------------|
| Does Husband owe a mortgage on a house or condominium or land?                      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband owe money on a car?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband owe money on any credit cards?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband owe any money to any family or friends?                                | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is Husband currently in a bankruptcy proceeding? ( <i>Chapter 7 or Chapter 13</i> ) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband owe any medical or dental bills?                                       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does Husband owe any other debts?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered “Yes” to any of the above questions, you must list each item of debt in either Table 3 or Table 4 on the following pages.

What debts should I list on this form?

You should list all loans from any individual, bank, credit card company, credit union, savings and loan association or other lending institution. Include all debts owed by either you or your spouse. Make sure to list all credit cards and any amounts owed pursuant to any bankruptcy or other repayment plans.  
Debts that the Wife should pay are to be listed in Table 3 and Debts that the Husband should pay are to be listed in Table 4.

What does “security” mean?

The mortgage on a home is traditionally secured by the home. When you finance the purchase of an automobile, the company that loans you the money is listed on the title to the automobile. They too have a security interest in your car. Usually, a debt is secured by an item of property if the person to whom you owe the money can take the item of property if you fail to pay the debt. The schedules of debt ask you to list any security for that debt. You must also list the property that secures the debt under the property listings.

How do you get the other party’s name off of this debt?

This agreement does not affect the rights of the person to whom you or your spouse owe the money. They can still collect the money from both or your spouse.  
Each party is to attempt to refinance or obtain the release of any liability of the other party as soon as reasonably practicable after the dissolution of marriage.

**TABLE 3. DEBTS TO BE PAID BY WIFE - List** all loans from any individual, bank, credit card company, credit union, savings and loan association or other lending institution that are to be paid by WIFE. Wife is to indemnify and hold Husband harmless for all debts listed on Table 3.

The creditor's rights to collect these debts from Husband are NOT affected without the consent of the creditor. Wife is to refinance or obtain the release of any liability of Husband on all debts listed in Table 3 as soon as reasonably practicable.

| <b>Item of Debt</b><br><i>(Who is the money owed to?)</i> | Current Balance | Monthly Payment | What is the security for this debt, if any?<br><i>(This property should be listed in Table 1 or Table 2)</i> | Marital or Separate Debt   |
|---|-----------------|-----------------|--|--|
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |

**TABLE 4. DEBTS TO BE PAID BY HUSBAND - List** all loans from any individual, bank, credit card company, credit union, savings and loan association or other lending institution that are to be paid by HUSBAND. Husband is to indemnify and hold Wife harmless for all debts listed on Table 4.

The creditor's rights to collect these debts from Wife are NOT affected without the consent of the creditor. Husband is to refinance or obtain the release of any liability of Wife on all debts listed in Table 4 as soon as reasonably practicable.

| <b>Item of Debt</b><br><i>(Who is the money owed to?)</i> | Current Balance | Monthly Payment | What is the security for this debt, if any?<br><i>(This property should be listed in Table 1 or Table 2)</i> | Marital or Separate Debt   |
|---|-----------------|-----------------|--|--|
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |
|   |                 |                 |  | <input type="checkbox"/> Marital<br><input type="checkbox"/> Nonmarital<br><input type="checkbox"/> Both |

## Part Two – Maintenance and Other Provisions

What is maintenance?

Maintenance is money paid on a regular schedule by one spouse to the other for support after the dissolution of marriage. It may be for a set period of time or it may be for an indefinite period of time. It usually terminates upon the death of either party or the remarriage of the party receiving maintenance unless the parties agree otherwise. It may or may not be subject to future modification upon a showing of changed circumstances. Maintenance used to be referred to as "alimony."

Maintenance to Wife

The court lacks jurisdiction to enter any orders with respect to maintenance of Wife.  
 No maintenance is to be paid to Wife by Husband. This agreement is not subject to modification.  
 Husband shall pay to Wife the sum of \_\_\_\_\_ per month as and for maintenance. Said maintenance is \_\_\_\_\_ subject to modification. Said maintenance shall terminate upon the death of either party, the remarriage of Wife, or at such earlier time as set forth herein.  
\_\_\_\_\_  
\_\_\_\_\_

Maintenance to Husband

The court lacks jurisdiction to enter any orders with respect to maintenance of Husband.  
 No maintenance is to be paid to Husband by Wife. This agreement is not subject to modification.  
 Wife shall pay to Husband the sum of \_\_\_\_\_ per month as and for maintenance. Said maintenance is \_\_\_\_\_ subject to modification. Said maintenance shall terminate upon the death of either party, the remarriage of Husband, or at such earlier time as set forth herein.  
\_\_\_\_\_  
\_\_\_\_\_

Wage Withholding for Maintenance

*(Answer only if maintenance is to be paid by either party.)*  
 Income withholding shall be prepared by the person receiving maintenance and issued by the Circuit Clerk upon the effective date of this order.  
 Income withholding shall not issue for the following reason(s):  
\_\_\_\_\_

Additional Provisions

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

I certify under oath that I have given the other party a copy of this Property and Debt Statement pursuant to Supreme Court Rule 43.01(d) by: (You MUST check at least ONE of the following five boxes)

- Serving a copy with the original pleadings herein.
- Mailing a copy to the other party or his or her attorney on \_\_\_\_\_ (Date) at the following address:

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- Handing a copy to the other party or his or her attorney on \_\_\_\_\_ (Date).
- Sending a copy to the other party or his or her attorney by fax to \_\_\_\_\_ (fax number) on \_\_\_\_\_ (Date) at \_\_\_\_\_ (Time).
- Sending a copy via electronic mail to the other party or his or her attorney at \_\_\_\_\_ (Email Address) on \_\_\_\_\_ (Date).

*Instructions: The following information MUST be filled in before a notary public. Your Statement of Property and Debt is required to be verified before a notary public.*

COUNTY OF \_\_\_\_\_ )  
STATE OF \_\_\_\_\_ ) ss.

Wife, of lawful age, being duly sworn on her oath, states that she is the Wife named herein and that the facts stated in this Statement of Property and Debt are true according her best knowledge and belief, and that she agrees with the terms and conditions set forth herein.

Further, Wife states that she executed this Statement of Property and Debt as her free act and deed.

► \_\_\_\_\_ WIFE – SIGN HERE WIFE – PRINT YOUR NAME HERE

Subscribed and sworn to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires:

COUNTY OF \_\_\_\_\_ )  
STATE OF \_\_\_\_\_ ) ss.

Husband, of lawful age, being duly sworn on his oath, states that he is the Husband named herein and that the facts stated in this Statement of Property and Debt are true according his best knowledge and belief, and that he agrees with the terms and conditions set forth herein.

Further, Husband states that he executed this Statement of Property and Debt as his free act and deed.

► \_\_\_\_\_ HUSBAND – SIGN HERE HUSBAND – PRINT YOUR NAME HERE

Subscribed and sworn to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires:

IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI  
*(County where court is located)*

**In re the Marriage of**

\_\_\_\_\_  
*(First) (Middle) (Last) (Jr./Sr./III)*  
**Petitioner,** *(Your full name should be entered here)*

**-and-**

\_\_\_\_\_  
*(First) (Middle) (Last) (Jr./Sr./III)*  
**Respondent.** *(Enter your spouse's full name here)*

**Case No.** \_\_\_\_\_  
*(Will be assigned when case is filed)*

**Division No.** \_\_\_\_\_  
*(Will be assigned when case is filed)*

**Respondent's Answer to Petitioner's  
Petition for Dissolution of Marriage**

1. I am answering the following pleading (One of the following **MUST** be checked)

- The first petition my spouse filed in this case (Original Petition)
- The second petition my spouse filed in this case (First Amended Petition)
- The third petition my spouse filed in this case (Second Amended Petition)

2. I understand that by voluntarily entering my appearance and filing this pleading, I am subjecting myself to the jurisdiction of this court, and the court may enter such orders and judgments as are authorized by law, including orders awarding maintenance (formerly alimony), child support, child custody, parenting time/visitation, division of property, division of debts, and attorney's fees.

3. I admit as true **EVERYTHING** my spouse stated in his or her Petition for Dissolution of Marriage and incorporate all of those allegations herein **EXCEPT** the following:

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

*Instructions: Any allegation not specifically denied will be deemed admitted and you will not have the opportunity to disagree with this allegation when the case is presented to the court. Identify each paragraph that contains any allegation with which you disagree.*

4. What are the last four numbers of your social security number?

XXX-XX-\_\_\_\_\_  
*(Social Security Number)*

*Instructions: The last four digits of your social security number are required by §452.312.2(6), RSMo.*

5. Check **ONE** of the following boxes:

- I am not on active duty in the armed services of the United States of America.
- I am on active duty in the armed services of the United States of America, but waive my rights pursuant to the Servicemembers Civil Relief Act of 2003.



## Request for Relief

I want the court to do the following: *(Check all that apply)*

- Grant a dissolution of my marriage
- Grant custody of the child(ren) of the marriage as stated herein (if applicable)
- Enter appropriate orders with respect to the support of the child(ren) (if applicable)
- Divide the marital property and debts
- Award maintenance to me
- Award maintenance to my spouse
- Change my name to my former name of \_\_\_\_\_.
- I am without sufficient funds to pay for my attorney and I request that the other party pay my attorney's fees.
- Other (Please state the other requests)

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

I certify under oath that I have given the other party a copy of this Answer pursuant to Supreme Court Rule 43.01(d) by:  
*(You MUST check at least ONE of the following five boxes)*

- Mailing a copy to the other party or his or her attorney on \_\_\_\_\_ (Date) at the following address:

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

- Handing a copy to the other party or his or her attorney on \_\_\_\_\_ (Date).

- Sending a copy to the other party or his or her attorney by fax to  
\_\_\_\_\_ (fax number) on \_\_\_\_\_ (Date) at \_\_\_\_\_ (Time).

- Sending a copy via electronic mail to the other party or his or her attorney at  
\_\_\_\_\_ (Email Address) on \_\_\_\_\_ (Date).

### NOTICE

Some local rules may also require that you file an income and expense statement and a property statement at the time you file your answer. Failure to do so could cause your answer to be stricken. Also, if there are any unemancipated children, you are required to file a proposed parenting plan within 30 days after the date you were served or the date you filed this answer. You may file a joint parenting plan with your spouse. See §452.310.7, RSMo.

### MAILING ADDRESS OF RESPONDENT (THIS MUST BE COMPLETED)

If you do not complete this portion of this document, the court will have no way to notify you of court dates and other proceedings in your case. The court will then be forced to proceed without giving you notice.

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip)

\_\_\_\_\_  
(Telephone Number) (E-Mail Address - Optional)

*This is the address that the court will use to send information concerning your case to you. If you move during the time this case is pending, you must send a letter to the court notifying it of your new address. It is your duty to keep the court informed as to your correct address.*

*This address is not necessarily the same as the address at which you reside. Even if you do not wish to disclose the address at which you reside, you MUST still provide the court with a mailing address.*

*Instructions: The following information MUST be filled in before a notary public. Your answer is required to be verified before a notary public. §452.310.1, RSMo.*

COUNTY OF \_\_\_\_\_ }  
 } ss.  
 STATE OF \_\_\_\_\_ }

Respondent, of lawful age, being duly sworn on his or her oath, states that he or she is the respondent named above and that the facts stated in Respondent's Answer to Petitioner's Petition for Dissolution of Marriage are true according to his or her best knowledge and belief.

▶ \_\_\_\_\_ Respondent – SIGN HERE  
 \_\_\_\_\_ Respondent – PRINT YOUR NAME HERE

Subscribed and sworn to this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 Notary Public  
 My Commission Expires:  
 \_\_\_\_\_

The Respondent must sign this answer in front of a Notary Public.

|  |   |
|--|---|
| <p><b>ATTORNEY INFORMATION</b> <i>(May be completed by your attorney)</i></p> <p>_____<br/> <i>Attorney – SIGN HERE</i></p> <p>_____<br/> <i>Attorney for Respondent – PRINT YOUR NAME HERE</i></p> <p>_____<br/> <i>(Street)</i></p> <p>_____<br/> <i>(City)</i></p> <p>_____<br/> <i>(State)</i></p> <p>_____<br/> <i>(Zip)</i></p> <p>_____<br/> <i>(Telephone Number)</i></p> <p>_____<br/> <i>(Fax Number)</i></p> <p>_____<br/> <i>(Email Address)</i></p> | <p><i>Do not enter any information here if you are filing this answer without the assistance of a lawyer.</i></p> <p><i>This information may be completed by your attorney.</i></p> <p><input type="checkbox"/> <i>I have assisted Respondent in the preparation of these pleadings, but I am not entering my appearance on behalf of Respondent.</i></p> |
|--|---|

Approved for Use in Uncontested Cases Only

**IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI**

**In re the Marriage of**

\_\_\_\_\_  
*(First)*                      *(Middle)*                      *(Last)*                      *(Jr./Sr./III)*

**Petitioner,**

**-and-**

\_\_\_\_\_  
*(First)*                      *(Middle)*                      *(Last)*                      *(Jr./Sr./III)*

**Respondent.**

**Case No.** \_\_\_\_\_

**Division No.** \_\_\_\_\_

**Judgment of Dissolution of Marriage**

**Parties**

1.  As used herein, "Wife" refers to Petitioner and "Husband" refers to Respondent.  
 As used herein, "Husband" refers to Petitioner and "Wife" refers to Respondent.
  
2. *Appearances (Check all that apply)*

|   |   |   |
|---|---|---|
| <input type="checkbox"/> Wife appears in person.              | <input type="checkbox"/> Wife appears by attorney.              | <input type="checkbox"/> Guardian ad Litem appears in person.       |
| <input type="checkbox"/> Husband appears in person.           | <input type="checkbox"/> Husband appears by attorney.           | <input type="checkbox"/> Cause submitted upon affidavit of Wife.    |
| <input type="checkbox"/> Third Party _____ appears in person. | <input type="checkbox"/> Third Party _____ appears by attorney. | <input type="checkbox"/> Cause submitted upon affidavit of Husband. |
  
3. The last four digits of Wife's Social Security Number are \_\_\_\_\_ and the last four digits of Husband's Social Security Number are \_\_\_\_\_.
  
4.  Respondent is not on active duty in the armed services of the United States now or any time since the filing of the petition herein.  
 Respondent is on active duty in the armed services of the United States, but has waived his or her rights pursuant to the Servicemembers Civil Relief Act of 2003.

**Jurisdiction**

5. Thirty (30) days have elapsed since the filing of the petition herein.
  
6.  The court has personal jurisdiction over Respondent.  
 The court does not have personal jurisdiction over Respondent.
  
7.  Wife has been a resident of the State of Missouri for at least 90 days immediately prior to the filing of the petition herein.  
 Husband has been a resident of the State of Missouri for at least 90 days immediately prior to the filing of the petition herein.

**Marriage**

- 8. The parties were married on \_\_\_\_\_, and the marriage was registered in \_\_\_\_\_.
- 9. The parties continued to live together until \_\_\_\_\_, on or about which date they separated.
- 10. There is no reasonable likelihood that the marriage of the parties can be preserved, and the marriage is, therefore, irretrievably broken.

**Children**

- 11. Wife is not now pregnant.
- 12.  There are no unemancipated children born or adopted of the marriage.
- There is/are \_\_\_\_\_ unemancipated living child(ren) born or adopted of the marriage. The name(s) and age(s) of said child(ren) are:

| Name of Child | Age |
|---------------|-----|
|               |     |
|               |     |
|               |     |
|               |     |
|               |     |
|               |     |

As used herein, "minor child(ren)" refers to the unemancipated living child(ren) listed above.

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**It is therefore ordered, adjudged and decreed that:**

- 13. The marriage of Wife and Husband is dissolved.

**Maintenance**

- 14. Maintenance to Wife
  - No maintenance is to be paid to Wife by Husband. This order is not subject to modification.
  - Husband is ordered to pay to Wife the sum of \_\_\_\_\_ per month as and for maintenance. Said maintenance is \_\_\_\_\_ subject to modification.

---

- The court lacks jurisdiction to enter any orders with respect to maintenance of Wife.

15. Maintenance to Husband

- No maintenance is to be paid to Husband by Wife. This order is not subject to modification.
  - Wife is ordered to pay to Husband the sum of \_\_\_\_\_ per month as and for maintenance. Said maintenance is \_\_\_\_\_ subject to modification.
- 
- 

- The court lacks jurisdiction to enter any orders with respect to maintenance of Husband.

16. Wage Assignment for Maintenance (*If maintenance is to be paid by either party*)

- Income withholding shall be prepared by the obligee and issued by the Circuit Clerk upon the effective date of this order.
  - Income withholding shall not issue for the following reason(s):
- 

**Child Custody** (*If there are unemancipated children*)

17.  The court does NOT have “jurisdiction” (as defined in the Uniform Child Custody Jurisdiction and Enforcement Act, §452.700, RSMo et seq.) over the custody arrangements of the minor child(ren) and, therefore, enters no further orders with respect to the custodial arrangements of the minor child(ren).

- The court has “jurisdiction” (as defined in the Uniform Child Custody Jurisdiction and Enforcement Act, §452.700, RSMo et seq.) over the custody arrangements of the minor child(ren).

The court approves the provisions of Part A of the parenting plan marked exhibit \_\_\_\_\_ pertaining to the custodial arrangements of the minor child(ren) and finds that the custodial arrangements contained in said parenting plan are in the best interests of the minor child(ren).

Therefore, the court orders the provisions of Part A of the said parenting plan pertaining to the custodial arrangements of the minor child(ren) and incorporates by reference all of the terms and conditions pertaining to the custodial arrangements of the minor child(ren) set forth in Part A of said parenting plan as if fully set forth herein.

The sheriff or other law enforcement officers shall enforce the rights of any person to custody or visitation pursuant to §452.425, RSMo.

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**Child Support** (*If there are unemancipated children*)

18.  The court does not have jurisdiction to enter any orders with respect to the support of the minor child(ren).

- The court orders the provisions of Part B of the parenting plan marked exhibit \_\_\_\_\_ , pertaining to the support of the minor child(ren) and incorporates by reference all of the terms and conditions set forth in Part B of said parenting plan as if fully set forth herein.
- 
- 
-

## Marital and Nonmarital Property and Marital Debt

### 19. Division of Property

The parties have entered into a separation agreement marked exhibit \_\_\_\_\_ that is found to be **not unconscionable**. Said separation agreement is incorporated herein, and the parties are ordered to perform the terms and conditions set forth therein as well as such further and other orders contained in this judgment.

The parties have **not** entered into a separation agreement. All marital and non-marital property and marital debt are divided in exhibit \_\_\_\_\_. Said division is fair and equitable, and the parties are ordered to perform the terms and conditions set forth therein.

### 20. Real Property

The legal description of the real property or properties divided herein is more fully set forth in Exhibit(s) \_\_\_\_\_, which is incorporated into and made a part of this judgment. The Circuit Clerk is ordered to record a certified copy of this judgment with the Recorder of Deeds in the following county or counties where the real property or properties is located:

\_\_\_\_\_

### 21. Pension and Retirement Plans

If this judgment divides any pension or retirement benefits, the court intends its judgment to be a qualified domestic relations order and retains jurisdiction for the purpose of establishing or maintaining this order as a qualified domestic relations order or to revise or conform its terms so as to effectuate the expressed intent of this order.

### 22. Other Orders Concerning Property and Debt

\_\_\_\_\_ is ordered to pay to \_\_\_\_\_ the sum of \_\_\_\_\_ as and for \_\_\_\_\_.

23. This judgment divides all marital and nonmarital property and marital debt. No other marital or non-marital property or marital debt remains to be divided by the court except as set forth herein.

### Attorney's Fees

24.  Neither party is awarded attorney's fees from the other party.

Wife shall pay to \_\_\_\_\_ the sum of \_\_\_\_\_ as and for Husband's attorney's fees herein.

Husband shall pay to \_\_\_\_\_ the sum of \_\_\_\_\_ as and for Wife's attorney's fees herein.

### Name Change

25.  The name of \_\_\_\_\_ is changed to \_\_\_\_\_.  
(Current Full Name) (New Full Name)

### Other Orders:

26.  Other orders are as per the attached Exhibit Number \_\_\_\_\_, which is incorporated by reference as if fully set forth herein.

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

**Court Costs**

27.  Court costs are to be paid from the court cost deposit(s) previously posted.  
 Court costs are waived.

**Waiver of Right to Rehearing** *(If case is heard by a Commissioner pursuant to §487.010, RSMo et seq.)*

- We, the undersigned parties, do hereby acknowledge receipt of the findings and recommendations of the commissioner and waive the right to file a motion for rehearing in this case.

*(If heard by a Family Court Judge)*

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Judge \_\_\_\_\_ Date \_\_\_\_\_

*(If heard by a Family Court Commissioner)*  
**Findings and Recommendations of Commissioner:**

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Commissioner \_\_\_\_\_ Date \_\_\_\_\_

All orders and these findings and recommendations of the Commissioner are confirmed and adopted as the judgment of the court.

---

Judge \_\_\_\_\_ Date \_\_\_\_\_

A certified copy of this judgment is to be mailed to the following person(s): *(Check all applicable boxes)*

- Petitioner's Attorney       Respondent's Attorney       Guardian ad Litem

\_\_\_\_\_  
*(Signature of Petitioner's Attorney)*

\_\_\_\_\_  
*(Street)*

\_\_\_\_\_  
*(City)*      \_\_\_\_\_  
*(State)*      \_\_\_\_\_  
*(Zip)*

\_\_\_\_\_  
*(Telephone Number)*

\_\_\_\_\_  
*(Signature of Respondent's Attorney)*

\_\_\_\_\_  
*(Street)*

\_\_\_\_\_  
*(City)*      \_\_\_\_\_  
*(State)*      \_\_\_\_\_  
*(Zip)*

\_\_\_\_\_  
*(Telephone Number)*

\_\_\_\_\_  
*(Signature of Guardian ad Litem)*

\_\_\_\_\_  
*(Street)*

\_\_\_\_\_  
*(City)*      \_\_\_\_\_  
*(State)*      \_\_\_\_\_  
*(Zip)*

\_\_\_\_\_  
*(Telephone Number)*

- Petitioner

\_\_\_\_\_  
*(Signature of Petitioner)*

\_\_\_\_\_  
*(Street)*

\_\_\_\_\_  
*(City)*      \_\_\_\_\_  
*(State)*      \_\_\_\_\_  
*(Zip)*

\_\_\_\_\_  
*(Telephone Number)*

- Respondent

\_\_\_\_\_  
*(Signature of Respondent)*

\_\_\_\_\_  
*(Street)*

\_\_\_\_\_  
*(City)*      \_\_\_\_\_  
*(State)*      \_\_\_\_\_  
*(Zip)*

\_\_\_\_\_  
*(Telephone Number)*

- Third Party

\_\_\_\_\_  
*(Signature of Third Party)*

\_\_\_\_\_  
*(Street)*

\_\_\_\_\_  
*(City)*      \_\_\_\_\_  
*(State)*      \_\_\_\_\_  
*(Zip)*

\_\_\_\_\_  
*(Telephone Number)*

## CONFIDENTIAL CASE FILING INFORMATION SHEET – DOMESTIC RELATIONS CASES

Required at Case Initiation and with Responsive Filings

**INSTRUCTIONS:**

- ✓ Complete this form for all parties known at the time of filing. Provide the most appropriate Case Type and Party Type codes and descriptions. (Found on the Case Types List and Party Types List at [www.courts.mo.gov](http://www.courts.mo.gov) on the Court Forms/Filing Information page.)
- ✓ If additional space is needed, complete additional Confidential Case Filing Information Sheets.

**NOTE:** The **full** Social Security Number (SSN) is **required** pursuant to Section 509.520 RSMo if the party is a person.

Filing Date: \_\_\_\_\_ County/City of St. Louis: \_\_\_\_\_

Style of Case: \_\_\_\_\_  
(i.e. Petitioner v. Respondent)

Case Type Code: \_\_\_\_\_ Case Type Description: \_\_\_\_\_

**Petitioner/Plaintiff Information:**

Party Type Code: \_\_\_\_\_ Party Type Description: \_\_\_\_\_

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender:  Male  Female SSN: \_\_\_\_\_

Attorney Name (if represented by counsel): \_\_\_\_\_ Bar ID: \_\_\_\_\_ Party Type Code: \_\_\_\_\_

**Respondent/Defendant Information:**

Party Type Code: \_\_\_\_\_ Party Type Description: \_\_\_\_\_

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender:  Male  Female SSN: \_\_\_\_\_

Attorney Name (if represented by counsel): \_\_\_\_\_ Bar ID: \_\_\_\_\_ Party Type Code: \_\_\_\_\_

Party Type Code: \_\_\_\_\_ Party Type Description: \_\_\_\_\_

Name (if person): (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Organization (if non-person): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender:  Male  Female SSN: \_\_\_\_\_

Attorney Name (if represented by counsel): \_\_\_\_\_ Bar ID: \_\_\_\_\_ Party Type Code: \_\_\_\_\_

Party Type Code: \_\_\_\_\_ Party Type Description: \_\_\_\_\_

Name (if person): (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Organization (if non-person): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender:  Male  Female SSN: \_\_\_\_\_

Attorney Name (if represented by counsel): \_\_\_\_\_ Bar ID: \_\_\_\_\_ Party Type Code: \_\_\_\_\_



**Employer Information**

Petitioner/Plaintiff Employer Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Respondent/Defendant Employer Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

The following information regarding children is required. Complete this section for any child subject to the action of this case.

\*MACSS – Missouri Automated Child Support System

**Children:**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Gender:  Male  Female Optional: MACSS Member Number (to be completed by the court): \_\_\_\_\_

Check if more than ten children and attach additional sheet

Submitted by: \_\_\_\_\_ Bar ID (required if attorney): \_\_\_\_\_

Address (if not shown on previous page): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

\*IMPORTANT: It is the parties' responsibility to keep the court informed of any change of address or employment.\*

**Instructions to Clerk**

**Maintain the closed portion(s) of the record in a sealed manila envelope within the file. The file can be maintained with other open records. If a request is made to review the open portion of the file, the envelope can be removed from the file. Access to the record must be restricted to avoid access to the closed portion of the record.**

EXHIBIT NO. \_\_\_\_\_

**IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI**  
*(County where court is located)*

If this parenting plan is filed after the case has been filed, you MUST enter the Case Number.

\_\_\_\_\_  
*(First) (Middle) (Last) (Jr./Sr./III)*  
**Petitioner/Plaintiff,**

**-and-**

\_\_\_\_\_  
*(First) (Middle) (Last) (Jr./Sr./III)*  
**Respondent/Defendant.**

**Case No.** \_\_\_\_\_

**Division No.** \_\_\_\_\_

**PARENTING PLAN**  
**Part A – Custody of the Children**

**1. Identification of the Parties**

*Check one, and only one, of the following two boxes.*

- Mother is the Petitioner/Plaintiff. Father is the Respondent/Defendant.
- Father is the Petitioner/Plaintiff. Mother is the Respondent/Defendant.

**2. Plan Author(s)**

*Check all applicable boxes.*

- Court
- Mother
- Father
- Guardian ad Litem
- \_\_\_\_\_

**3. Names and Ages of Children**

Enter the total number of children to whom this parenting plan is applicable: \_\_\_\_\_.  
The names and ages of the children (hereinafter referred to simply as “the children”) are as follows:

| Full Name of Child | Child's Age |
|--------------------|-------------|
|                    |             |
|                    |             |
|                    |             |
|                    |             |
|                    |             |
|                    |             |

**4. Duration of Plan**

The terms and conditions set forth in this parenting plan shall remain in full force and effect until the children are emancipated or until this plan is modified by a court of competent jurisdiction.

## Decisions Concerning the Children

“Joint legal custody” means that the parents share the decision-making rights, responsibilities, and authority relating to the health, education and welfare of the child, and, unless allocated, apportioned, or decreed, the parents shall confer with one another in the exercise of decision-making rights, responsibilities, and authority. §452.375.1(2), RSMo.

### 5. Types of Decisions

The three types of decisions that parents must make concerning their children are major decisions, daily or everyday decisions, and emergency decisions.

#### A. Major Decisions

Major decisions are the significant decisions about the children. Major decisions are made by the parent or parents with legal custody. The following are examples of major decisions:

- The choice or change of schools, including college or special tutoring,
- The choice or change of physician, surgeon or dentist,
- Religious instruction, training or education,
- Selection of child care providers,
- Major medical care, surgery, or any medical procedure requiring hospitalization or out-patient surgery,
- Major dental work and orthodontia,
- Psychological or psychiatric treatment or counseling,
- The choice or change of camps or other special or extracurricular activities,
- The extent of any travel away from home,
- Part or full-time employment,
- Purchase or operation of a motor vehicle,
- Contraception and sex education,
- Actual or potential litigation on behalf of the children.

#### B. Daily or Everyday Decisions

Daily or everyday decisions are routine decisions like minor medical treatment, bedtimes, homework, chores, selection of clothing and normal daily activities.

Daily decisions shall be made by the parent having actual physical custody at the time of the decision. The parents shall cooperate in establishing mutually agreeable policies regarding such decisions in order that routine decisions remain as consistent as possible.

#### C. Emergency Decisions

Emergency decisions are decisions of an urgent nature. They affect the health and safety of the children and have to be made before it is possible to contact the other parent.

The parent who is with the minor child requiring emergency care may make the emergency decision. The parent making the emergency decision shall advise the other parent of the nature and extent of the emergency as soon as possible.

### 6. Access to Medical, Dental and Educational Records of the Children

Unless otherwise provided in this parenting plan, both parents are entitled to access to records and information pertaining to the children, including, but not limited to, full and complete medical, dental, and educational records subject to Part A, Paragraph 19.

## 7. Legal Custody

You **must** check one and only one of the following four boxes.

Mother and Father – Joint Legal Custody

It is in the best interests of the children that Mother and Father have joint legal custody of the children. Major decisions shall be made by Mother and Father jointly. If Mother and Father disagree on a major decision they shall resolve their disagreement through the dispute resolution procedure set forth herein.

Mother – Sole Legal Custody to Mother

It is in the best interests of the children that Mother has sole legal custody of the children. Major decisions affecting the children shall be made by Mother. Mother and Father cannot share joint legal custody because: *(Missouri Law requires a statement of the reasons for a request for no shared decision-making. If you do not enter a reason on this line, the court MUST grant joint legal custody.)*

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Father – Sole Legal Custody to Father

It is in the best interests of the children that Father has sole legal custody of the children. Major decisions affecting the children shall be made by Father. Mother and Father cannot share joint legal custody because: *(Missouri Law requires a statement of the reasons for a request for no shared decision-making. If you do not enter a reason on this line, the court MUST grant joint legal custody.)*

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Third Party – Sole Legal Custody to Third Party

It is in the best interest of the children that \_\_\_\_\_ (hereinafter referred to as “Third Party”) has sole legal and sole physical custody of the children. Major decisions affecting the children shall be made by Third Party. Both parents are unfit, unsuitable, or unable to be a custodian of the children or the welfare of the children requires that neither parent have physical custody. *(If this box is checked, the same box MUST be checked under Part A, Paragraph 10.)*

## 8. Communication between Parents

Communication between the parents concerning the children may be by any of the following methods:

Check each box that is appropriate in your case.

- In person  
 Home telephone  
 Work telephone  
 Mobile telephone  
 Letter via U.S. Postal Service  
 Email  
 Fax  
 Via a designated third person. This third person will be \_\_\_\_\_.

The children shall not be used as messengers.

## 9. Issues not to be Discussed in the Presence of the Children

Mother and Father shall each refrain from making negative, derogatory or degrading statements about the other parent in front of the children. Both parents shall exercise their best efforts to foster the respect, love and affection of the children toward the other parent. Mother and Father shall avoid discussing parenting issues, financial issues, and other topics related to these proceedings when the children are present.

Mother and Father should prevent other persons from making negative, derogatory or degrading statements about the other parent in the presence of the children.

## When the Children Will Be with Each Parent

“Joint physical custody” means an order awarding each of the parents significant but not necessarily equal, periods of time during which a child resides with or is under the care and supervision of each of the parents. Joint physical custody shall be shared by the parents in such a way as to assure the child of frequent, continuing and meaningful contact with both parents. §452.375.1(3), RSMo.

### 10. Physical Custody

You **must** check one and only one of the following nine boxes.

Joint Physical Custody Using Mother’s Address –It is in the best interest of the children that Mother and Father have joint physical custody of the children. The address of the children for mailing and educational purposes is the same as that of Mother.

Joint Physical Custody Using Father’s Address – It is in the best interest of the children that Mother and Father have joint physical custody of the children. The address of the children for mailing and educational purposes is the same as that of Father.

Sole Physical Custody to Mother and Visitation to Father – It is in the best interests of the children that Mother has sole physical custody of the children and that Father have visitation as set forth herein.

Sole Physical Custody to Father and Visitation to Mother –It is in the best interests of the children that Father has sole physical custody of the children and that Mother have visitation as set forth herein.

Sole Physical Custody to Mother and Supervised Visitation to Father – It is in the best interests of the children that Mother have sole physical custody of the children and Father have supervised visitation as set forth herein. Unsupervised visitation would endanger the children’s physical health or impair their emotional development because: \_\_\_\_\_

Visitation will be supervised by \_\_\_\_\_.

Sole Physical Custody to Father and Supervised Visitation to Mother - It is in the best interests of the children that Father have sole physical custody of the children and Mother have supervised visitation as set forth herein. Unsupervised visitation would endanger the children’s physical health or impair their emotional development because: \_\_\_\_\_

Visitation will be supervised by \_\_\_\_\_.

Sole Physical Custody to Mother and No Visitation to Father – It is in the best interests of the children that Mother has sole physical custody of the children and Father has no visitation with the children. Visitation would endanger the children’s physical health or impair their emotional development. Father shall not have access to records and information pertaining to the children pursuant to §452.376.1, RSMo.

Sole Physical Custody to Father and No Visitation to Mother - It is in the best interests of the children that Father has sole physical custody of the children and Mother has no visitation with the children. Visitation would endanger the children’s physical health or impair their emotional development. Mother shall not have access to records and information pertaining to the children pursuant to §452.376.1, RSMo.

Physical and Legal Custody to a Third Party – It is in the best interest of the children that \_\_\_\_\_ (hereinafter referred to as “Third Party”) has sole legal and sole physical custody of the children. Both parents are unfit, unsuitable, or unable to be a custodian of the children or the welfare of the children requires that neither parent have physical custody. (If this box is checked, the same box **MUST** be checked in Part A, Paragraph 7.)

**11. Residential Schedules**

Mother and Father shall have physical custody of the children as they agree. In the event they do not agree, then Mother and Father shall exchange the children as set forth in the residential schedules.

Each parent shall consider reasonable changes when requested by the other parent or the children. If a significant change is made, either parent may reduce their agreement to writing. All changes are unenforceable unless in writing and signed by both parents.

**12. Location of Exchanges**

If a specific location for an exchange is not stated on the schedule, then the exchange shall occur at the following location:

*You must check one and only one of the following four boxes.*

- All exchanges shall occur at the children’s school or child care provider.
- All exchanges shall occur at the Mother’s Residence.
- All exchanges shall occur at the Father’s Residence.
- All exchanges shall occur at \_\_\_\_\_.

**13. Transportation**

The parent who has the children takes the children to the exchange location. Each party will pay the expenses associated with his or her own transportation to and from the exchange location unless otherwise indicated in this parenting plan.

**14. Notification of Change from Residential Schedule**

In the event either parent cannot exercise the scheduled time with the children, he or she should tell the other parent as soon as possible, but not later than 24 hours before the start of the scheduled time with the children. If a parent anticipates that he or she may have to cancel at the last minute, he or she should advise the other parent of the possible last minute conflict. If a parent fails to notify the other as set forth above, he or she shall be responsible for the reasonable costs incurred by the other parent.

**15. Telephone Contact with Children**

Each parent may contact the children in a reasonable manner when the children are with the other parent. Neither parent shall contact the children at the other parent’s residence later than \_\_\_\_\_. *(If this line is left blank, there are no restrictions as to time.)*

Each parent shall provide the other parent with the telephone number at which the children may be contacted. Neither parent shall configure their telephone system in such a manner as to “block” or prevent the other parent from calling.

When a parent travels with the children, he or she must notify the other parent of the children’s destination. He or she must also provide a telephone number where the children can be reached.

**16. Children’s Activities**

Both parents must attempt to accommodate the social and academic commitments of the children during the time the children are with them. Each parent should attempt to refrain from scheduling activities that occur primarily when the children are with the other parent. If an activity will affect the other parent’s time with the children, the parent scheduling the activity should obtain the affected parent’s permission before committing the children to the activity.

**17. Dispute Resolution Procedure**

This is the manner in which Mother and Father will resolve disagreements concerning the children. This includes disagreements on the meaning or interpretation of any provision of this plan. Mother and Father shall present their disagreements to a mediator chosen by them for non-binding mediation. In the event that the parents cannot resolve the dispute by mediation, they may submit the issue to the Court through appropriate proceedings.

Additional dispute resolution procedures are as follows:

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## Other Provisions Concerning the Children

### 18. Relocation

§452.377, RSMo states:

“Absent exigent circumstances as determined by a court with jurisdiction, you as a party to this action are ordered to notify, in writing by certified mail, return receipt requested, and at least sixty days prior to the proposed relocation, each party to this action of any proposed relocation of the principal residence of the child, including the following information:

- (1) The intended new residence, including the specific address and mailing address, if known, and if not known, the city;
- (2) The home telephone number of the new residence, if known;
- (3) The date of the intended move or proposed relocation;
- (4) A brief statement of the specific reasons for the proposed relocation of the child; and
- (5) A proposal for a revised schedule of custody or visitation with the child.

Your obligation to provide this information to each party continues as long as you or any other party by virtue of this order is entitled to custody of a child covered by this order. Your failure to obey the order of this court regarding the proposed relocation may result in further litigation to enforce such order, including contempt of court. In addition, your failure to notify a party of a relocation of the child may be considered in a proceeding to modify custody or visitation with the child. Reasonable costs and attorney fees may be assessed against you if you fail to give the required notice.”

The residence of the child may be relocated sixty (60) days after providing notice unless a parent files a motion seeking an order to prevent the relocation within thirty (30) days after receipt of notice. Such motion shall be accompanied by an affidavit setting forth the specific factual bases supporting a prohibition of the relocation.

### 19. Domestic Violence between the Parents

*You **must** check one and only one of the following five boxes.*

- There has been no domestic violence between the parents.
- There has been domestic violence by Mother against Father. Any educational records of the children shall not include the address of Father or the children.
- There has been domestic violence by Father against Mother. Any educational records of the children shall not include the address of Mother or the children.
- There has been domestic violence by Mother against Father; however, the educational records of the children may include the address of Father or the children.
- There has been domestic violence by Father against Mother; however, the educational records of the children may include the address of Mother or the children.

### 20. Pattern of Domestic Violence between the Parents

*You **must** check one and only one of the following three boxes.*

- There has been no **pattern** of domestic violence by either Mother or Father.
- There has been a **pattern** of domestic violence by Mother against Father. This parenting plan best protects the children and Father from any further violence.
- There has been a **pattern** of domestic violence by Father against Mother. This parenting plan best protects the children and Mother from any further violence.

### 21. Other Custody Provisions

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Mother

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Father

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Guardian ad Litem

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Attorney for Mother

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Attorney For Father

# Residential Schedules

## 1. Weekend and Weekday Schedule

Each exchange should be written on the Weekend and Weekday Exchange Schedule. A sample entry for one of the exchanges may be as follows: “5:30 p.m. Father receives children”. This means that at 5:30 p.m., Father will begin a period of time during which the children will be with him.

The last person to receive custody on the Weekend and Weekday Schedule must be different than the first person to receive custody on the schedule because after each two week period, the cycle repeats itself. There is always an even number of exchanges for a two week period.

**A sample two week exchange schedule is located on Page 5 of these Residential Schedules.**

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## 2. Vacation Schedule

*You must select one and only one of the following two options.*

- No specific weeks will be set aside for our vacations.
- Each parent may designate \_\_\_\_\_ week(s) each year during which they will have exclusive physical custody of the children and the regular or special exchange schedules do not apply. Father shall have first choice of weeks in odd-numbered years. Mother will have first choice of weeks in even-numbered years. The parent with the first choice of weeks must designate the vacation weeks by March 31 of each year.

During this period, the holiday schedule still applies. Neither parent can select a week which would deny the other parent of a holiday to which they are entitled.

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## 3. Holidays

A different schedule can apply on holidays. The times each parent will have with the children during the holidays are set forth on the Holiday Exchange Schedule on page 3 of these Residential Schedules.

Include the name of the parent that will have the holiday and how the holiday will be structured. For example, Memorial Day is always on a Monday. Should the Memorial Day holiday begin at 6:00 p.m. on Sunday before Memorial Day? Alternatively, should it include the entire weekend? If the entire weekend is included, then it is possible that one parent may not have a weekend with the children for several weeks.

Holidays and vacations do not alter the “Week One” or “Week Two” designation, but they do apply ahead of the regular schedule. If the holiday schedule conflicts with any other schedule, the holiday schedule takes precedence.

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## Weekday and Weekend Exchange Schedule

| Enter the parent who is receiving custody and the specified time for each exchange.<br>See page 5 of these Residential Schedules for a sample schedule. |             |                   |
|---|-------------|-------------------|
|   | DAY OF WEEK | EXCHANGES FOR DAY |
| <b>WEEK ONE</b>   | Sunday      |                   |
|   | Monday      |                   |
|   | Tuesday     |                   |
|   | Wednesday   |                   |
|   | Thursday    |                   |
|   | Friday      |                   |
|   | Saturday    |                   |
| <b>WEEK TWO</b>   | Sunday      |                   |
|   | Monday      |                   |
|   | Tuesday     |                   |
|   | Wednesday   |                   |
|   | Thursday    |                   |
|   | Friday      |                   |
|   | Saturday    |                   |

## Holiday Exchange Schedule

| Holiday                        | Even<br>Numbered<br>Years   | Odd<br>Numbered<br>Years    | Physical Custody |             |
|--------------------------------|-----------------------------|-----------------------------|------------------|-------------|
|                                |                             |                             | From             | To          |
|                                | <i>FATHER or<br/>MOTHER</i> | <i>FATHER or<br/>MOTHER</i> | <i>Time</i>      | <i>Time</i> |
| New Year's Eve                 |                             |                             |                  |             |
| New Year's Day                 |                             |                             |                  |             |
| King Day                       |                             |                             |                  |             |
| President's Day                |                             |                             |                  |             |
| Memorial Day                   |                             |                             |                  |             |
| Independence Day               |                             |                             |                  |             |
| Labor Day                      |                             |                             |                  |             |
| Thanksgiving                   |                             |                             |                  |             |
| Christmas Eve                  |                             |                             |                  |             |
| Christmas Day                  |                             |                             |                  |             |
| Easter                         |                             |                             |                  |             |
| Other Holidays<br>(specify)    |                             |                             |                  |             |
|                                |                             |                             |                  |             |
|                                |                             |                             |                  |             |
| Special Occasions<br>(specify) |                             |                             |                  |             |
| Halloween                      |                             |                             |                  |             |
| Mother's Day                   |                             |                             |                  |             |
| Father's Day                   |                             |                             |                  |             |
| Mother's Birthday              |                             |                             |                  |             |
| Father's Birthday              |                             |                             |                  |             |
| Child's Birthday               |                             |                             |                  |             |
|                                |                             |                             |                  |             |
|                                |                             |                             |                  |             |

## DETERMINATION OF WEEK ONE AND WEEK TWO

### Determination of “Week One” or “Week Two” on the Weekday and Weekend Exchange Schedule

For purposes of this Parenting Plan, **WEEK ONE** is defined as a week that has Sunday on one of the following dates:

|           |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|-----------|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| January   | 1 | 2 | 3  | 4  | 5  | 6  | 7  | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 29 | 30 | 31 |
| February  | 1 | 2 | 3  | 4  | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 26 | 27 | 28 | 29 |    |    |
| March     | 1 | 2 | 3  | 4  | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 26 | 27 | 28 | 29 | 30 | 31 |
| April     | 1 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 23 | 24 | 25 | 26 | 27 | 28 | 29 |    |    |
| May       | 7 | 8 | 9  | 10 | 11 | 12 | 13 | 21 | 22 | 23 | 24 | 25 | 26 | 27 |    |    |    |
| June      | 4 | 5 | 6  | 7  | 8  | 9  | 10 | 18 | 19 | 20 | 21 | 22 | 23 | 24 |    |    |    |
| July      | 2 | 3 | 4  | 5  | 6  | 7  | 8  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 30 | 31 |    |
| August    | 1 | 2 | 3  | 4  | 5  | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 27 | 28 | 29 | 30 | 31 |
| September | 1 | 2 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |    |
| October   | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 22 | 23 | 24 | 25 | 26 | 27 | 28 |    |    |    |
| November  | 5 | 6 | 7  | 8  | 9  | 10 | 11 | 19 | 20 | 21 | 22 | 23 | 24 | 25 |    |    |    |
| December  | 3 | 4 | 5  | 6  | 7  | 8  | 9  | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 31 |    |    |

For purposes of this Parenting Plan, **WEEK TWO** is defined as a week that has Sunday on one of the following dates:

|           |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|-----------|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| January   | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 22 | 23 | 24 | 25 | 26 | 27 | 28 |    |    |    |
| February  | 5 | 6 | 7  | 8  | 9  | 10 | 11 | 19 | 20 | 21 | 22 | 23 | 24 | 25 |    |    |    |
| March     | 5 | 6 | 7  | 8  | 9  | 10 | 11 | 19 | 20 | 21 | 22 | 23 | 24 | 25 |    |    |    |
| April     | 2 | 3 | 4  | 5  | 6  | 7  | 8  | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 30 | 31 |    |
| May       | 1 | 2 | 3  | 4  | 5  | 6  | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 28 | 29 | 30 | 31 |
| June      | 1 | 2 | 3  | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 25 | 26 | 27 | 28 | 29 | 30 |    |
| July      | 1 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 23 | 24 | 25 | 26 | 27 | 28 | 29 |    |    |
| August    | 6 | 7 | 8  | 9  | 10 | 11 | 12 | 20 | 21 | 22 | 23 | 24 | 25 | 26 |    |    |    |
| September | 3 | 4 | 5  | 6  | 7  | 8  | 9  | 17 | 18 | 19 | 20 | 21 | 22 | 23 |    |    |    |
| October   | 1 | 2 | 3  | 4  | 5  | 6  | 7  | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 29 | 30 | 31 |
| November  | 1 | 2 | 3  | 4  | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 26 | 27 | 28 | 29 | 30 |    |
| December  | 1 | 2 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 24 | 25 | 26 | 27 | 28 | 29 | 30 |    |

## Weekday and Weekend Exchange Schedule

Enter the parent who is receiving custody and the specified time for each exchange.  
See page 5 of these Residential Schedules for a sample schedule.

|                 | DAY OF WEEK | EXCHANGES FOR DAY  |
|-----------------|-------------|--|
| <b>WEEK ONE</b> | Sunday      |  |
|                 | Monday      | 5:30 p.m. Dad receives children<br>8:30 p.m. Mom receives children at Mom's house                |
|                 | Tuesday     |  |
|                 | Wednesday   |  |
|                 | Thursday    |  |
|                 | Friday      | 5:30 Dad receives children at Daycare  |
|                 | Saturday    |  |
| <b>WEEK TWO</b> | Sunday      | 6:00 p.m. Mom receives children at her house   |
|                 | Monday      |  |
|                 | Tuesday     | 8:30 p.m. Mom receives children  |
|                 | Wednesday   |  |
|                 | Thursday    | 5:30 p.m. Dad receives children at Mom's house<br>8:30 p.m. Mom receives children at Mom's house |
|                 | Friday      |  |
|                 | Saturday    |  |

Since the parties do not specify an exchange location, the exchange would occur at the default location in Paragraph 12 in Part A of the Parenting Plan.

This entry contains a mistake. It is unclear whether it refers to 5:30 a.m. or 5:30 p.m.

SAMPLE

This entry is also a mistake. Mom already has the children with her so she can't receive the children. There should always be an even number of exchanges for any two week period.

Since Dad is the first parent to receive the children on this schedule, Mom must be the last parent to receive the children. Mom has the children at the start of this schedule.

EXHIBIT NO. \_\_\_\_\_

**IN THE CIRCUIT COURT OF \_\_\_\_\_, MISSOURI**  
*(County where court is located)*

\_\_\_\_\_  
*(First) (Middle) (Last) (Jr./Sr./III)*  
**Petitioner/Plaintiff,**

**-and-**

\_\_\_\_\_  
*(First) (Middle) (Last) (Jr./Sr./III)*  
**Respondent/Defendant.**

If this parenting plan is filed after the case has been filed, you MUST enter the Case Number.

**Case No.** \_\_\_\_\_

**Division No.** \_\_\_\_\_

**PARENTING PLAN**  
**Part B – Support of the Children**

**1. Identification of Parties**

*Check one and only one of the following two boxes.*

- Mother is the Petitioner/Plaintiff. Father is the Respondent/Defendant.
- Father is the Petitioner/Plaintiff. Mother is the Respondent/Defendant.

**2. Plan Author(s)**

*Check all applicable boxes.*

- Court
- Mother
- Father
- Guardian ad Litem
- \_\_\_\_\_

**3. Names and Ages of Children**

Enter the total number of children to whom this parenting plan is applicable: \_\_\_\_\_.

The names and ages of the children (hereinafter referred to simply as “the children”) are as follows:

| Full Name of Child | Child's Age |
|--------------------|-------------|
|                    |             |
|                    |             |
|                    |             |
|                    |             |
|                    |             |
|                    |             |

# Child Support Calculations

## Child Support

Child support is an amount of money paid by one parent to the other parent for the support of the children. In addition to a regular monthly child support payment, other expenses of the children may be divided between the parents as child support. Part B of the Parenting Plan contains the calculation of child support and the allocation of the children's expenses.

## Form 14

Form 14 is a form used to calculate a presumed amount of child support. Form 14 is part of this parenting plan and is found on Part B, Page 8. The court will usually follow Form 14, however, if the court finds that the child support calculated pursuant to Form 14 is unjust or inappropriate, it will set child support at a different amount.

Parents must also determine the allocation and amount of other expenses of the children such as medical and dental insurance, uncovered medical and dental expenses, day care, and other extraordinary expenses. These expenses constitute part of the child support obligations of each parent. These other expenses may be included in the Form 14 calculation, or they may be paid independently of the child support payment.

Parents may agree on an amount of child support and the allocation of expenses. The court does not have to accept this agreement and can set different support amounts. Even if the parents have agreed on an amount of child support, **THEY MUST STILL CALCULATE A FORM 14 FOR THE COURT.** As they work through this parenting plan, they will also be entering the information that is required for Form 14.

Missouri law further provides that "An award of joint physical custody does not preclude an award of child support pursuant to Section 452.340 and applicable supreme court rules in determining an amount reasonable or necessary for the support of the child." §452.375.12, RSMo. Child support may be appropriate even if both parties have custody of the children an equal amount of time.

## 4. Party to Pay Child Support

One party must be called the "parent paying support" and one person must be called the "parent receiving support". This is true even if no child support is going to be paid.

*You **must** check one and only one of the following four boxes.*

Mother will pay regular monthly child support to Father.

Mother is referred to as "person paying support" and Father is referred to as "person receiving support".

Father will pay regular monthly child support to Mother.

Father is referred to as "person paying support" and Mother is referred to as "person receiving support".

No regular monthly child support will be paid by either parent.

**Mother will be referred to as "person paying support" and Father will be referred to as "person receiving support"** for the purpose of the Form 14 child support calculation only.

No regular monthly child support will be paid by either parent.

**Father will be referred to as "person paying support" and Mother will be referred to as "person receiving support"** for the purpose of the Form 14 child support calculation only.

# Medical and Dental Insurance for the Children

## Cost of Medical or Dental Insurance for the Children

The cost of medical or dental insurance for the children is the monthly amount of any premium paid. If the parent's employer deducts the amount of premium from his or her pay, then the cost of medical or dental insurance includes the amount of the premium paid. It does not include the cost of medical or dental insurance for the parent, the parent's spouse, or other children that are not covered by this parenting plan. The cost of medical or dental insurance for the children is included on Line 6c of Form 14.

Form 14 states: "If the amount of the actual health insurance costs for the children who are the subject of this proceeding is not available or cannot be verified, the amount of the health insurance costs attributable to the children who are the subject of this proceeding shall be calculated by dividing the total monthly costs for the policy of health insurance by the total number of persons for whom the costs are paid or to be paid and then multiplying the resulting figure by the number of children insured under the policy who are the subject of this proceeding."

### 5. Parent Responsible for Medical Insurance

*You must check one and only one of the following three boxes.*

- Neither party is required to maintain **medical** insurance for the benefit of the children. A health benefit plan is not available at reasonable cost through either parent's employer or union. No support rights have been assigned to the state of Missouri and the Family Support Division is not providing support enforcement services to either party.
- Father shall maintain and pay the cost of **medical** insurance for the benefit of the children.
- Mother shall maintain and pay the cost of **medical** insurance for the benefit of the children.

### 6. Parent Responsible for Dental Insurance

*You must check one and only one of the following three boxes.*

- Neither party is required to maintain **dental** insurance for the benefit of the children. A health benefit plan is not available at reasonable cost through either parent's employer or union. No support rights have been assigned to the state of Missouri and the Family Support Division is not providing support enforcement services to either party.
- Father shall maintain and pay the cost of **dental** insurance for the benefit of the children.
- Mother shall maintain and pay the cost of **dental** insurance for the benefit of the children.

### 7. Medical and Dental Insurance for the Children

The total cost of medical and dental insurance paid by Father for the children is \_\_\_\_\_ per month.  
The total cost of medical and dental insurance paid by Mother for the children is \_\_\_\_\_ per month.  
*You must enter an amount on both lines, even if you enter "0". These amounts should also be entered on line 6c of Form 14.*

In the event either parent is required to maintain medical or dental insurance, the parent providing the health benefit plan shall provide to the other parent an insurance identification card.

If support rights have been assigned to the state of Missouri or the Family Support Division is providing support enforcement services to either party, the person paying support shall notify the Family Support Division regarding the availability of medical insurance coverage through an employer or a group plan, provide the name of the insurance provider when coverage is available, and inform the division of any change in access to such insurance coverage.

## Health Expenses Not Covered by Insurance

### 8. Medical, Dental, Vision, or Psychological Expenses not Covered by Insurance

You must check one and only one of the following four boxes.

The person receiving support will pay all reasonable and necessary medical and dental expenses of the children not covered by insurance and the person paying support will reimburse the person receiving support for \_\_\_\_\_ percent of all such expenses that are actually paid by the person receiving support and are in excess of \$250 per year per child. This does not include the uninsured extraordinary costs set forth in paragraph 9 below. No reimbursement of uncovered medical and dental expenses of the children will be allowed unless the person receiving support submits proof of such expenses to the person paying support in writing within 120 days of the date said expenses were incurred. Except for good cause, no legal proceedings seeking reimbursement will be allowed unless instituted within 360 days of the date said expenses were incurred.

Medical and dental expenses are defined by §213(d)(1)(A) of the Internal Revenue Code.

(§454.633.3, RSMo provides that if you have checked this first box in Paragraph 8 and you have not provided a percentage, then each parent will be responsible for one-half of all reasonable and necessary medical or dental expenses of the children not covered by insurance except as set forth in Paragraph 9 below.)

The person paying support does not have the financial resources to contribute to the payment of medical or dental expenses of the children not covered by insurance. The person receiving support will be responsible for all reasonable and necessary medical or dental expenses of the children not covered by insurance. This does not apply to the medical costs listed in Paragraph 9 below. §454.603.5(2), RSMo.

All reasonable and necessary medical or dental expenses of the children are covered by insurance. §454.603.5(1), RSMo.

The person receiving support has not substantially complied with the terms of the health benefit coverage. The person receiving support will be responsible for all reasonable and necessary medical or dental expenses of the children not covered by insurance. This does not apply to the medical costs listed in Paragraph 9 below. §454.603.5(3), RSMo.

### 9. Payment of Uninsured Extraordinary Medical Costs

Extraordinary medical costs are predictable and recurring, such as expenses for dental treatment, orthodontic treatment, asthma treatment and physical therapy. These expenses MAY be included in the Form 14 calculation. (If no extraordinary medical costs are to be included on Form 14, you may leave this information blank.)

| Uncovered Extraordinary Medical Costs to be Paid by<br>Father INCLUDED on Form 14   | Amount of Expense  |
|---|--------------------|
| _____   | \$ _____ per month |
| _____   | \$ _____ per month |
| _____   | \$ _____ per month |
| <p>The total cost of these uncovered extraordinary medical costs of the children is \$ _____ per month. This amount HAS been included in the child support calculation pursuant to Form 14. (You must include this amount on Form 14 - Line 6d)</p> |                    |

Paid by Father

| Uncovered Extraordinary Medical Costs to be Paid by<br>Mother INCLUDED on Form 14   | Amount of Expense  |
|---|--------------------|
| _____   | \$ _____ per month |
| _____   | \$ _____ per month |
| _____   | \$ _____ per month |
| <p>The total cost of these uncovered extraordinary medical costs of the children is \$ _____ per month. This amount HAS been included in the child support calculation pursuant to Form 14. (You must include this amount on Form 14 - Line 6d)</p> |                    |

Paid by Mother



# Child Care Expenses

Child care expenses related to employment are expenses incurred by a parent during periods of time while the parent is working and the children are in his or her physical custody.

## 10. Work-Related Child Care Costs

*You must check one and only one of the following five boxes*

- There are no reasonable work-related child care expenses incurred by the parties.
- The reasonable work-related child care costs of the children to be paid by Father are \$\_\_\_\_\_ per month. This amount has been included in the child support calculation pursuant to Form 14. The reasonable work-related child care costs of the children to be paid by Mother are \$\_\_\_\_\_ per month. This amount has also been included in the child support calculation pursuant to Form 14.

*(You must include these amounts on Form 14 - Line 6a(1) for the parent receiving support or Line 6b for the parent paying support.)*

Mother will pay all reasonable work-related child care expenses. The cost of reasonable work-related child care expenses has NOT been included in the child support calculation pursuant to Form 14. Father will reimburse Mother for \_\_\_\_\_ percent of all reasonable work-related child care expenses actually paid by Mother. Mother will not be entitled to reimbursement from Father unless said payments are appropriately reported to the Internal Revenue Service. No reimbursement of reasonable work-related child care expenses will be allowed unless Mother submits proof of such expense to Father in writing within 120 days of the date said expenses were incurred. Except for good cause, no legal proceedings seeking reimbursement will be allowed unless instituted within 360 days of the date said expenses were incurred.

Father will pay all reasonable work-related child care expenses. The cost of reasonable work-related child care expenses has NOT been included in the child support calculation pursuant to Form 14. Mother will reimburse Father for \_\_\_\_\_ percent of all reasonable work-related child care expenses actually paid by Father. Father will not be entitled to reimbursement from Mother unless said payments are appropriately reported to the Internal Revenue Service. No reimbursement of reasonable work-related child care expenses will be allowed unless Father submits proof of such expense to Mother in writing within 120 days of the date said expenses were incurred. Except for good cause, no legal proceedings seeking reimbursement will be allowed unless instituted within 360 days of the date said expenses were incurred.

Each parent will pay his or her own reasonable work-related child care expenses related to his or her employment. The cost of reasonable work-related child care expenses has NOT been included in the child support calculation pursuant to Form 14. Neither parent will reimburse the other parent for any portion of the child care expenses.

## 11. Child Care Expenses Unrelated to Employment

Incidental child care costs not related to employment are to be paid by the party with physical custody at the time the child care costs are incurred.

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## Extraordinary Child-Rearing Costs of the Children Including College Costs

### Extraordinary Child-Rearing Costs

Extraordinary child-rearing costs may include, but are not limited to, the following expenses:

- Educational expenses for college or post-secondary education,
- Special, private or parochial elementary and secondary schooling expenses,
- Tutoring sessions,
- Camps,
- Lessons,
- Athletic activities,
- Travel and other activities intended to enhance the athletic, social or cultural development of a child.

### 12. Educational Expenses for College or Post-Secondary Education

As used herein, educational expenses for college or post-secondary education (also referred to as college expenses) include tuition, fees, books, dormitory cost for room and board. It does not include room and board while residing with either parent. This term shall be the actual cost to the child. In the event the child receives a scholarship or other aid which reduces the tuition, fees, books, or dormitory costs for room and board, then the educational expenses for college or post-secondary education does not include the amount of such scholarship or aid. For this purpose, loans to the student shall not be considered ‘scholarship or other aid’.

The maximum educational expenses for college or post-secondary education, as defined herein, shall not exceed the cost for tuition, fees, books, and dormitory costs for room and board at the University of Missouri at Columbia, regardless of what institution the child attends.

Responsibility for educational expenses for college or post-secondary education shall not exceed more than eight semesters at a college or university.

### Continued Eligibility for Child Support when Child is in College

§452.340.5, RSMo provides that “[t]o remain eligible for such continued parental support, at the beginning of each semester the child shall submit to each parent a transcript or similar official document provided by the institution of vocational or higher education which includes the courses the child is enrolled in and has completed for each term, the grades and credits received for each such course, and an official document from the institution listing the courses which the child is enrolled in for the upcoming term and the number of credits for each such course.”

The child must carry a minimum number of credit hours each semester.

### 13. Extraordinary Child-Rearing Costs

Extraordinary child-rearing costs incurred by the parents may be included on Form 14, or the parents may agree to divide these costs on some percentage basis. The extraordinary child-rearing costs are to be paid as set forth in the next paragraph. (*Paragraph 14 of this Parenting Plan*)

**14. Payment of Extraordinary Child-Rearing Costs of the Children**

**a. Extraordinary Child-Rearing Costs INCLUDED on Form 14**

| Extraordinary Child-Rearing Costs Paid by<br>Father INCLUDED on Form 14   | Amount of Expense  |
|---|--------------------|
| _____   | \$ _____ per month |
| _____   | \$ _____ per month |
| _____   | \$ _____ per month |
| <p>The total cost of these extraordinary child-rearing costs of the children is \$ _____ per month.<br/>                     This amount HAS been included in the child support calculation pursuant to Form 14. <i>(You must include this amount on Form 14 - Line 6e)</i></p> |                    |

Paid by Father

| Extraordinary Child-Rearing Costs Paid by<br>Mother INCLUDED on Form 14   | Amount of Expense  |
|---|--------------------|
| _____   | \$ _____ per month |
| _____   | \$ _____ per month |
| _____   | \$ _____ per month |
| <p>The total cost of these extraordinary child-rearing costs of the children is \$ _____ per month.<br/>                     This amount HAS been included in the child support calculation pursuant to Form 14. <i>(You must include this amount on Form 14 - Line 6e)</i></p> |                    |

Paid by Mother

**b. Extraordinary Child-Rearing Costs NOT INCLUDED on Form 14**

| Extraordinary Child-Rearing Costs Paid by<br>Father NOT INCLUDED on Form 14  | Percentage to be Paid by<br>Mother to Father |
|--|--|
| _____  | _____ %                                      |
| _____  | _____ %                                      |
| _____  | _____ %                                      |
| <p>Mother will reimburse Father for the percentage amount of each of these extraordinary child-rearing costs of the children so long as they are actually paid by Father. No reimbursement of extraordinary child-rearing costs of the children will be allowed unless Father submits proof of such expense to Mother in writing within 120 days of the date said expenses were incurred. Except for good cause, no legal proceedings seeking reimbursement will be allowed unless instituted within 360 days of the date said expenses were incurred.</p> |  |

Paid by Father

| Extraordinary Child-Rearing Costs Paid by<br>Mother NOT INCLUDED on Form 14  | Percentage to be Paid by<br>Father to Mother |
|--|--|
| _____  | _____ %                                      |
| _____  | _____ %                                      |
| _____  | _____ %                                      |
| <p>Father will reimburse Mother for the percentage amount of each of these extraordinary child-rearing costs of the children so long as they are actually paid by Mother. No reimbursement of extraordinary child-rearing costs of the children will be allowed unless Mother submits proof of such expense to Father in writing within 120 days of the date said expenses were incurred. Except for good cause, no legal proceedings seeking reimbursement will be allowed unless instituted within 360 days of the date said expenses were incurred.</p> |  |

Paid by Mother

**FORM NO. 14 CHILD SUPPORT AMOUNT CALCULATION WORKSHEET**

| <input type="checkbox"/> FATHER / <input type="checkbox"/> MOTHER is the "Parent Paying Support"<br>Total Number of Children: _____                              | PARENT RECEIVING SUPPORT | PARENT PAYING SUPPORT | COMBINED |
|--|--------------------------|-----------------------|----------|
| 1. MONTHLY GROSS INCOME  |                          |                       |          |
| 1a. Monthly court-ordered maintenance being received   |                          |                       |          |
| 2. ADJUSTMENTS   |                          |                       |          |
| 2a. Other monthly child support being paid under court or administrative order   |                          |                       |          |
| 2b. Monthly court-ordered maintenance being paid   |                          |                       |          |
| 2c. Monthly support obligation for other children  |                          |                       |          |
| (1) Number of other children primarily residing in each parent's custody   |                          |                       |          |
| (2) Each parent's support obligation from support schedule using the parent's Line 1 monthly gross income  |                          |                       |          |
| (3) Monthly child support received under court or administrative order for children included in line 2c(1)   |                          |                       |          |
| 2c. TOTAL adjustment [Line 2c(2) minus Line 2c(3)]   |                          |                       |          |
| 3. ADJUSTED MONTHLY GROSS INCOME (sum of lines 1 and 1a, minus lines 2a, 2b and 2c)  |                          |                       |          |
| 4. PROPORTIONATE SHARE OF COMBINED ADJUSTED MONTHLY GROSS INCOME (Each parent's line 3 income divided by combined line 3 income)                                 |                          |                       |          |
| 5. BASIC CHILD SUPPORT AMOUNT (From support chart using combined line 3 income)  |                          |                       |          |
| 6. ADDITIONAL CHILD-REARING COSTS OF PARENTS   |                          |                       |          |
| 6a. Child Care Costs of Parent Receiving Support   |                          |                       |          |
| (1) Reasonable work-related child care costs of parent receiving support   |                          |                       |          |
| (2) Child Care Tax Credit ( <b>See Form 14 Directions</b> )  |                          |                       |          |
| 6a. TOTAL adjusted Child Care Costs [Line 6a(1) minus Line 6a(2)]  |                          |                       |          |
| 6b. Reasonable work-related child care costs of the parent paying support  |                          |                       |          |
| 6c. Health insurance costs for children who are the subjects of this proceeding  |                          |                       |          |
| 6d. Uninsured agreed-upon or court-ordered extraordinary medical costs   |                          |                       |          |
| 6e. Other agreed-upon or court-ordered extraordinary child-rearing costs   |                          |                       |          |
| 7. TOTAL ADDITIONAL CHILD-REARING COSTS (Enter sum of lines 6a, 6b, 6c, 6d and 6e)   |                          |                       |          |
| 8. TOTAL COMBINED CHILD SUPPORT COSTS (Sum of line 5 and line 7)   |                          |                       |          |
| 9. EACH PARENT'S SUPPORT OBLIGATION (Multiply line 8 by each parent's line 4)  |                          |                       |          |
| 10. CREDIT FOR ADDITIONAL CHILD-REARING COSTS (Line 7 of parent paying support)  |                          |                       |          |
| 11. ADJUSTMENT FOR A PORTION OF AMOUNTS EXPENDED DURING PERIODS OF OVERNIGHT VISITATION OR CUSTODY. ( <b>See Form 14 Directions</b> ) (Multiply line 5 by ____%) |                          |                       |          |
| 12. PRESUMED CHILD SUPPORT AMOUNT (Line 9 minus lines 10 and 11)   |                          |                       |          |

## Amount of Child Support

### 15. Presumed Monthly Amount of Child Support

*Complete all applicable amounts. The court-ordered support amount is set forth in Part B, Paragraph 17.*

The presumed child support amount calculated pursuant to Form 14 for six children is: \_\_\_\_\_.

The presumed child support amount calculated pursuant to Form 14 for five children is: \_\_\_\_\_.

The presumed child support amount calculated pursuant to Form 14 for four children is: \_\_\_\_\_.

The presumed child support amount calculated pursuant to Form 14 for three children is: \_\_\_\_\_.

The presumed child support amount calculated pursuant to Form 14 for two children is: \_\_\_\_\_.

The presumed child support amount calculated pursuant to Form 14 for one child is: \_\_\_\_\_.

### 16. Should the court order the child support pursuant to Missouri Child Support Guidelines?

*You must check one and only one of the following two boxes.*

Yes. The court-ordered child support is the same as the presumed children support amount. The presumed child support amount as calculated herein is not rebutted as being unjust and inappropriate.

No. The court-ordered child support is different than the presumed children support amount. After consideration of all relevant factors pursuant to §452.340.8, RSMo and Form 14, the child support as calculated herein is rebutted as being unjust and inappropriate.

NOTE: Court-ordered child support will be set at the time of the court proceeding. The court is not bound by the suggestions of the parties and may set an amount greater or lesser than the suggested amounts of court-ordered child support set forth in this parenting plan. If the court approves and adopts this plan, then the support provisions herein will become the order of the court.

### 17. Court-Ordered Child Support

This is the amount of child support that actually will be paid by the parent paying support.

*You must check all applicable boxes.*

**Six or More Children** - The person paying support is to pay to the person receiving support \_\_\_\_\_ per month when the person receiving support is entitled to support for six or more children covered by this parenting plan.

**Five Children** - The person paying support is to pay to the person receiving support \_\_\_\_\_ per month when the person receiving support is entitled to support for five children covered by this parenting plan.

**Four Children** - The person paying support is to pay to the person receiving support \_\_\_\_\_ per month when the person receiving support is entitled to support for four children covered by this parenting plan.

**Three Children** - The person paying support is to pay to the person receiving support \_\_\_\_\_ per month when the person receiving support is entitled to support for three children covered by this parenting plan.

**Two Children** - The person paying support is to pay to the person receiving support \_\_\_\_\_ per month when the person receiving support is entitled to support for two children covered by this parenting plan.

**One Child** - The person paying support is to pay to the person receiving support \_\_\_\_\_ per month when the person receiving support is entitled to support for one child covered by this parenting plan.

NOTE: You should check each box that applies. For example, if this parenting plan pertains to three children, then you should check the boxes for three children, two children and one child. You should also enter an amount of support for three children, two children, and one child respectively. You must attach a Form 14 for each level. For example, if you have three children, then you must attach one Form 14 for three children, one Form 14 for two children, and one Form 14 for one child.

If you check one of the boxes above, you must check all the boxes below it. Once again, if you only check the box for two children and do not check the box for one child, then no support is owed when only one child remains.

**18. Starting Date for Child Support**

*You must check one and only one of the following two boxes if either party is paying child support in Part B, Paragraph 17.*

- The first child support payment is due on the date of the entry of the judgment.
- The first child support payment is due on \_\_\_\_\_.

**Notification by the Person Receiving Support when Child Support Changes**

Missouri law provides that “[u]nless otherwise agreed in writing or expressly provided in the judgment, provisions for the support of the child are terminated by emancipation of the child. The parent entitled to receive child support shall have the duty to notify the parent obligated to pay support of the child’s emancipation and failing to do so, the parent entitled to receive child support shall be liable to the parent obligated to pay support for child support paid following emancipation of a minor child, plus interest.” §452.370.4, RSMo.

**Income Tax Considerations**

**19. Income Tax Dependents**

The parties shall be entitled to claim the minor children as dependents for income tax purposes as follows: (Person paying support must be current with all support obligations as of December 31 of the tax year in which the child is to be claimed. Each parent will sign any appropriate documents to allow the other parent to make such claims.)

NOTE: The Form 14 calculation assumes that the person receiving support will claim the children as dependents. If the person paying support is entitled to claim one or more of the children, then the Form 14 guidelines are unjust and inappropriate and the second box in Paragraph 16 should be checked.

If the person claiming the children is not listed below, then the person receiving support shall be entitled to claim the omitted children as dependents in all years.

| Name of Child | In odd numbered tax years, this parent will claim this child as a dependent | In even numbered tax years, this parent will claim this child as a dependent |
|---------------|---|--|
|               |   |  |
|               |   |  |
|               |   |  |
|               |   |  |
|               |   |  |
|               |   |  |

# Payment of Child Support and Wage Assignments

## Wage Assignment

A wage assignment means that the child support is taken directly out of the paycheck of the person paying support. The amount withheld is sent to the Family Support Payment Center. The Family Support Payment Center will then forward the support to the person receiving support. Child support withheld pursuant to a wage assignment cannot be sent directly to the party receiving support. A record will be kept of all payments.

If a wage assignment is not ordered, then the child support may be paid directly to the person receiving support. The person paying support may also voluntarily send payments to the Family Support Payment Center. If the child support is not paid to the Family Support Payment Center, it is extremely important that each parent keep accurate records of the amount of child support paid. This means that the party paying support may not receive credit for his or her payments if he or she does not have receipts or cancelled checks. Because of this, it is proper to request a receipt from the parent receiving support.

If the person paying support is currently unemployed or self-employed, the wage assignment may still be ordered, but it will not take effect until the person paying support begins receiving regular wages.

## 20. Method of Payment of Child Support

*You must check one and only one of the following five boxes if either party is paying child support in Part B, Paragraph 17.*

- A wage assignment will not issue because a written agreement has been reached between the parties that provides for an alternative arrangement. Child support shall be paid directly to the person receiving support.
- A wage assignment will not issue because there is good cause not to require immediate income withholding for the reason that implementation of an immediate wage withholding would not be in the best interest of the child and the person paying support has made timely payments of all previously ordered support. Child support shall be paid directly to the person receiving support.
- A wage assignment will not issue because a written agreement has been reached between the parties that provides for an alternative arrangement. Child support shall be paid directly to the Family Support Payment Center, PO Box 109001, Jefferson City, Missouri, 65110-9001.
- A wage assignment will not issue because there is good cause not to require immediate income withholding for the reason that implementation of an immediate wage withholding would not be in the best interest of the child and the person paying support has made timely payments of all previously ordered support. Child support shall be paid directly to the Family Support Payment Center, PO Box 109001, Jefferson City, Missouri, 65110-9001.
- A wage assignment will be prepared by the person receiving support and issued by the Circuit Clerk upon the effective date of this judgment. Child support is ordered to be paid to the Family Support Payment Center, PO Box 109001, Jefferson City, Missouri, 65110-9001.

## 21. Additional Provisions Pertaining to Support of the Children:

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\_\_\_\_\_  
Mother

\_\_\_\_\_  
Father

\_\_\_\_\_  
Guardian ad Litem

\_\_\_\_\_  
Attorney for Mother

\_\_\_\_\_  
Attorney For Father







# Form CAFC721 – Notice of Hearing

Notice must be sent to every party in this case

In what Missouri county is this case pending?

|                         |          |
|-------------------------|----------|
| In the Circuit Court of | MISSOURI |
|-------------------------|----------|

What is the case number in the pending case?

|             |                 |
|-------------|-----------------|
| Case Number | Division Number |
|-------------|-----------------|

## Parties

|                                |                                     |
|--------------------------------|-------------------------------------|
| 1. Petitioner or Plaintiff is: | _____                               |
|                                | (Full Name of Petitioner/Plaintiff) |
| 2. Respondent or Defendant is: | _____                               |
|                                | (Full Name of Respondent/Defendant) |

## Information about the Hearing

(What, When, Where)

|   |                                     |
|---|-------------------------------------|
| 3. Type of matter to be heard:  | _____                               |
| 4. Date and Time of Hearing:  | _____ at _____ a.m./p.m.            |
|   | (Date of Hearing) (Time of Hearing) |
| The hearing will be held promptly at the Courthouse in the above County and Division. |                                     |

## Party Giving Notice

|                    |                      |                 |
|--------------------|----------------------|-----------------|
| ▶ _____            | _____                | _____           |
| SIGN HERE          | PRINT YOUR NAME HERE | BAR NUMBER      |
| _____              |                      |                 |
| (Street)           |                      |                 |
| _____              | _____                | _____           |
| (City)             | (State)              | (Zip)           |
| _____              | _____                | _____           |
| (Telephone Number) | (Fax Number)         | (Email Address) |

## Proof of Service

|  |  |
|--|--|
| I certify under oath that I have given _____ a copy of this Notice of Hearing pursuant to Missouri Supreme Court Rule 43.01(d) by: (You MUST check at least ONE of the following four boxes)                                   |  |
| <input type="checkbox"/>   | Mailing a copy to the other party or his or her attorney on _____ (Date) at the following address:<br>_____<br>(Street)<br>_____<br>(City) (State) (Zip) |
| <input type="checkbox"/>   | Handing a copy to the other party or his or her attorney on _____ (Date).  |
| <input type="checkbox"/>   | Sending a copy to the other party or his or her attorney by fax to _____ (fax number) on _____ (Date) at _____ (Time).                                   |
| <input type="checkbox"/>   | Sending a copy via electronic mail to the other party or his or her attorney at _____ (Email Address) on _____ (Date).                                   |
| Affiant, of lawful age, being duly sworn on his or her oath, states that he or she is the affiant named herein and that the facts stated in this Notice of Hearing are true according to his or her best knowledge and belief. |  |
| ▶ _____  | _____  |
| Affiant – SIGN HERE  | Affiant – PRINT YOUR NAME HERE   |
| Subscribed and sworn to on _____.  |  |
| _____  | My Commission Expires: _____   |
| Notary Public  |  |