

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

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City State Zip Code

\_\_\_\_\_  
Phone Number

PETITIONER PRO SE

MONTANA \_\_\_\_\_ JUDICIAL DISTRICT COURT  
\_\_\_\_\_ COUNTY

In re the Marriage of:

\_\_\_\_\_,  
Petitioner,

and

\_\_\_\_\_,  
Respondent.

Cause No.: \_\_\_\_\_

**Petition for Dissolution**

The Petitioner respectfully submits the following:

1. Information about Petitioner

a. Name: \_\_\_\_\_

b. Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

c. Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_

d. Length of Residence in County: \_\_\_\_\_

e. Length of Residence in Montana, if applicable: \_\_\_\_\_

f. Occupation: \_\_\_\_\_

2. Information about Respondent

- a. Name: \_\_\_\_\_
- b. Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
- c. Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_
- d. Length of Residence in County: \_\_\_\_\_
- e. Length of Residence in Montana, if applicable: \_\_\_\_\_
- f. Occupation: \_\_\_\_\_

3. **Date and Place of Marriage**

Choose One:

- The parties were married on (*date*):\_\_\_\_\_. The marriage was registered in the County of \_\_\_\_\_, State of \_\_\_\_\_.
- The parties were married at common law. The parties assumed a marital relationship by mutual consent and agreement and confirmed their marriage by cohabitation and public repute.

4. **Separation**

Choose One:

- The parties separated on (*date*):\_\_\_\_\_.
- The parties are not yet separated.

5. **Jurisdiction**

- a. The jurisdictional requirements of M.C.A. § 40-4-104 exist.
- b. Choose One:
  - The marriage is irretrievably broken in that there is serious marital discord which adversely affects the attitude of one of the parties towards the marriage, and there is no reasonable prospect of reconciliation.
  - The marriage is irretrievably broken in that the parties have lived separate and apart for a period of more than one hundred eighty (180) days preceding

the commencement of these proceedings, and there is no reasonable prospect of reconciliation.

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

**6. Pregnancy**

Choose One:

- The wife is not pregnant.
- The wife is pregnant. However, the husband is not the father, and the child is not at issue in this proceeding.

**7. The Child(ren) of the Marriage**

There is/are \_\_\_\_ child(ren) of the marriage as follows:

Name (first and last) \_\_\_\_\_ Date of Birth: \_\_\_ / \_\_\_ / \_\_\_

Address \_\_\_\_\_

Name (first and last) \_\_\_\_\_ Date of Birth: \_\_\_ / \_\_\_ / \_\_\_

Address \_\_\_\_\_

Name (first and last) \_\_\_\_\_ Date of Birth: \_\_\_ / \_\_\_ / \_\_\_

Address \_\_\_\_\_

Name (first and last) \_\_\_\_\_ Date of Birth: \_\_\_ / \_\_\_ / \_\_\_

Address \_\_\_\_\_

Name (first and last) \_\_\_\_\_ Date of Birth: \_\_\_ / \_\_\_ / \_\_\_

Address \_\_\_\_\_

If needed, attach additional sheets as Exhibit \_\_\_\_\_.

**8. Jurisdiction over the Child(ren)**

This Court has jurisdiction to make a parenting determination regarding the minor child(ren) listed above. Choose One:

- [ ] The child(ren) has/have lived in Montana for at least six consecutive months immediately before the start of this proceeding. If a child is less than six months old, the child has lived in Montana since his/her birth.
- [ ] Montana was the home state of the child(ren) within six months of the start of this proceeding, and one parent continues to reside in Montana.
- [ ] The child(ren) and one parent have had significant connections to Montana, and substantial evidence about them is available here.
- [ ] The child(ren) is/are physically present in Montana, and the child(ren) has/have been abandoned or an emergency exists requiring the child(ren)'s protection.

**9. Required Information Regarding the Child(ren)**

This proceeding will affect the custody of the minor child(ren) of the marriage. The following information is required by M.C.A. § 40-7-110:

- a. During the last five years, the child(ren) have lived at the following places with the following persons. *List each place the child(ren) have lived, the dates the child(ren) lived there, and all person(s) with whom the child(ren) lived:*

Address	Dates	with Whom

List the names and present addresses, if known, of the persons listed above, other than Petitioner and Respondent, with whom the child(ren) have lived in the last five years:

Names	Present Address(es)

If needed, attach additional sheet(s) as Exhibit \_\_\_\_.

b. Choose One:

I have not participated as a party or witness or in any other capacity in any other proceeding concerning the custody of or visitation with the child(ren).

I have participated as a  party/  witness /  other: \_\_\_\_\_ in another proceeding concerning the custody of the child(ren).

Court: \_\_\_\_\_ Case No.: \_\_\_\_\_

Date of Child Custody Determination: \_\_\_\_\_.

If needed, attach additional sheet(s) as Exhibit \_\_\_\_.

c. Choose One:

I know of no other proceeding that could affect the current proceeding.

The following proceeding could affect the current proceeding:

Nature of Proceeding: \_\_\_\_\_

Court: \_\_\_\_\_ Case No.: \_\_\_\_\_

If needed, attach additional sheet(s) as Exhibit \_\_\_\_.

d. Choose One:

I know of no other person (not a party to this action) that has physical custody of the child(ren), or who claims rights of legal custody, physical custody or visitation with the child(ren).

The following person(s) have physical custody of the child(ren) or claim rights of legal custody, physical custody or visitation with the child(ren):

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**10. Preliminary Disclosure**

The Petitioner is complying with the preliminary disclosure requirements of M.C.A. § 40-4-252 and will serve a Declaration of Disclosure of Assets, Debts, Income and Expenses upon the Respondent at the time of service of this Petition.

**11. Real Property**

Choose One:

The parties do not own any real property.

**or**

a. The  Petitioner/ Respondent/ both parties is/are the owner(s) of record of real property located at \_\_\_\_\_

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The legal description of the property is \_\_\_\_\_

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\_\_\_\_\_.

b. This real property should be distributed as follows. Choose One:

The  Petitioner/ Respondent should be awarded ownership of this real property.

**or**

Describe the proposed distribution of the real property:

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If needed, attach additional sheets as Exhibit \_\_\_\_\_.

**12. Vehicles**

Choose One:

- The parties do not own any vehicles.
- The parties own the following vehicle(s). It is equitable that the vehicle(s) be distributed as follows (*Please include the year, make, and model for each vehicle listed.*):

To Petitioner:

Vehicle:	_____	VIN#:	_____
Vehicle:	_____	VIN#:	_____
Vehicle:	_____	VIN#:	_____

To Respondent:

Vehicle:	_____	VIN#:	_____
Vehicle:	_____	VIN#:	_____
Vehicle:	_____	VIN#:	_____

If needed, attach additional sheets as Exhibit \_\_\_\_\_.

**13. Personal Property**

Choose One:

The parties have already divided their personal property. It is equitable that each party retain the property currently in his or her possession.

**or**

The parties have not divided their personal property. It is equitable that the property be divided as follows:

To Petitioner:

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To Respondent:

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If needed, attach additional sheets as Exhibit \_\_\_\_\_.

**14. Debts**

Choose One:

There are no debts of the marriage.

The parties have accumulated debts during the course of their marriage. It is equitable that each party retain responsibility for the debts currently in his or her name.

**or**

The parties have accumulated debts during the course of their marriage. It is equitable that responsibility for the debts be divided as follows:



To Petitioner:

<b>Description of Debt</b>	<b>Creditor</b>	<b>Current Balance</b>	<b>Amount to Petitioner</b>

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

To Respondent:

<b>Description of Debt</b>	<b>Creditor</b>	<b>Current Balance</b>	<b>Amount to Respondent</b>

Description of Debt	Creditor	Current Balance	Amount to Respondent

Any and all other debts in Respondent's name only; any and all other debts incurred solely by the Respondent since the parties' separation; and any and all other debts not disclosed by the Respondent to the Petitioner.

If needed, attach additional sheets as Exhibit \_\_\_\_\_.

**15. Wife's Former Name**

Choose One:

- The wife would like to be restored to her former name of \_\_\_\_\_
- The wife does not want to be restored to her former name.
- The husband does not know whether the wife would like to be restored to her former name.

**16. Parenting Plan**

It is in the best interest(s) of the minor child(ren) that the Court adopt the Petitioner's Proposed Parenting Plan, filed separately from this Petition.

**17. Child Support Order**

Choose One:

Child support in the amount of \$ \_\_\_\_\_ per month per child has been established by the Montana Child Support Enforcement Division or another appropriate administrative agency or court. A copy of the Order is attached hereto as Exhibit \_\_\_\_\_. (Skip to Number 18.)

**or**

The  Petitioner/  Respondent needs financial assistance from the  Petitioner/  Respondent to support the minor child(ren) and requests that the Court enter the following proposed Child Support Order:

a. The  Petitioner/  Respondent shall pay \$ \_\_\_\_\_ per month per child. This amount was determined in accordance with the Montana Child Support Guidelines, worksheet attached hereto as Exhibit \_\_\_\_\_.

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

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

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

Petitioner/ Respondent. This child support order should be exempt from immediate income withholding because \_\_\_\_\_.

**or**

Clerk of Court. This child support order should be exempt from immediate income withholding because \_\_\_\_\_.

d. The Petitioner requests that the following warning be included in the Final Child Support Order:

**WARNING: If a parent is delinquent in payments, that parent's income may be subject to income withholding procedures under M.C.A. Title 40, Chapter 5, without need for any further action by the Court. Support is delinquent when it is 8 days overdue.**

- e. Whenever the case is receiving services under Title IV-D of the Social Security Act, support payments must be paid through the Department of Public Health and Human Services Child Support Enforcement Division as provided in M.C.A. § 40-5-909.
- f. This order is subject to review and modification by the Department of Public Health and Human Services upon the request of the Department or a party under M.C.A. §§ 40-5-271 through 40-5-273, when the Department is providing services for enforcement under Title IV-D of the Social Security Act.
- g. The obligations to provide financial child support, provide medical care for a child, and provide or comply with parenting arrangements shall be independent of each other, and the failure or inability to provide one or more shall not reduce any other obligation.
- h. Each party should promptly inform the Court of any changes in the following information:
  - (i) Name, social security number, mailing address, residential address, telephone number, and driver's license number; and
  - (ii) Names, addresses, and telephone numbers of current employers.
- i. The Petitioner requests that the following warning be included in the Final Child Support Order:

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

## 18. Medical Support Order

Choose One:

A Medical Support Order has been established by the Montana Child Support Enforcement Division or another appropriate administrative agency or court. A copy of the Order is attached hereto as Exhibit \_\_\_\_\_. (*Skip to Number 19.*)

**or**

Medical support is needed to cover the medical and dental expenses of the minor child(ren) of the parties. The Petitioner requests that the Court adopt the following Medical Support Order:

**Existing Coverage**

Choose All That Apply:

The child(ren) are presently covered under the following insurance plan:  
Carrier Name: \_\_\_\_\_  
Policy No.: \_\_\_\_\_

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

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

The child(ren) are not covered under an existing insurance plan.

**Contingency Medical Support**

If the minor child(ren) are either (i) covered by Medicaid, (ii) are not covered under an existing insurance plan, or (iii) if the existing coverage becomes no longer available, the following provisions shall apply:

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

reasonable cost, and as long as no other plan or individual insurance is available that will better serve the interests of the parties.

- c. If health benefit plans are available to both parties at a combined cost that is reasonable or cost-beneficial and with benefits that are complementary or compatible as primary and secondary coverage, both parties shall provide coverage for the child(ren).
- d. Coverage is presumed to be available at reasonable cost if the cost of premiums does not exceed 25 percent of the obligated party's total child support obligation when calculated under the child support guidelines without credit for the medical support obligation.
- e. If circumstances change and a party believes that corresponding changes in cost are not reasonable or cost-beneficial, the party may move to petition any appropriate tribunal for relief.

**Duties of the Parties**

- a. The Petitioner shall be responsible for \_\_\_\_% and the Respondent shall be responsible for \_\_\_\_% of all medical expenses of the minor child(ren), including the costs of the premium for coverage, all co-payments and deductibles required for coverage, and any uncovered medical expenses.
- b. Each party shall promptly execute and deliver to the insurance provider all forms necessary to ensure the child(ren)'s continuous participation in insurance coverage. Each party shall timely submit claims for processing, verification, and payment. Each party shall provide the other party with identification cards or other methods for access to coverage.
- c. If a party receives a reimbursement but did not pay the underlying bill, that party shall promptly pay over the proceeds to the proper party.
- d. If the party responsible for providing medical insurance coverage for the child(ren) allows such coverage to lapse without securing a comparable replacement, that party shall be liable for all the child(ren)'s medical expenses and shall indemnify the other party, the Department of Public

Health and Human Services, or any third-party custodian for the cost of obtaining medical coverage and medical expenses.

- e. Any liability for unpaid medical costs and expenses may be entered as a judgment for unpaid support against the obligated party. A party may apply to the Court for expedited enforcement procedures.
- f. If an obligated party fails to pay a required premium, the other parent, the Department of Public Health and Human Services, or the custodian may advance the cost of premiums and keep benefits continually in force for the child. The advance should be entered as a judgment for unpaid child support in favor of the advancing party and against the obligated parent.
- g. The obligation to provide medical coverage for the child(ren) ceases only when the child support obligation ceases.
- h. The costs of providing individual insurance or a health benefit plan may not be used as a direct offset to the child support obligation. However, as provided by the child support guidelines, the costs may be considered in making or modifying a child support order.
- i. Each party shall promptly inform the Court of any changes in the following information:
  - (i) If the child(ren) is/are covered by a health or medical insurance plan, the name of the plan, the policy identification number, and the name(s) of the person(s) covered;
  - (ii) If the child(ren) is/are not covered by a health or medical insurance plan, whether health insurance coverage for the child(ren) is available through the party's employer or other group, and if so, whether the employer or other group pays any portion of the coverage premium.
- j. A civil penalty not to exceed \$25 per day may be imposed for an intentional violation of this medical support order or the provisions of M.C.A Title 40, Chapter 5, Part 8 or the regulations promulgated under that Part.
- k. The Petitioner requests that the following warning be placed in the Final Child and Medical Support Orders:

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

**119. Notice to the Department of Public Health and Human Services**

Choose One:

- The Department of Public Health and Human Services is not providing services to the parties or minor child(ren) of the parties under the provisions of Title IV-D of the Social Security Act.
- The Department of Public Health and Human Services is providing services to the parties or minor child(ren) of the parties under the provisions of Title IV-D of the Social Security Act. The Petitioner will notify the Montana Child Support Enforcement Division and the Office of the Attorney General of this proceeding.
- Not applicable. The Petitioner is not seeking to establish, enforce, or modify the parties' previously established child support order.

**20. Other**

**Provisions:**

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WHEREFORE, the Petitioner requests as follows:

1. That this Court enter a Decree of Dissolution of Marriage dissolving the marital status between the parties;
2. That each party be granted real and personal property as requested above;
3. That each party be granted ownership of the vehicles as requested above;
4. That each party be ordered to pay debts as requested above;
5. That the wife be restored to use of her former name, if requested above;
6. That this Court adopt the Petitioner's Proposed Parenting Plan, filed separately from this Petition;
7. That a Child Support Order be established, if requested above;



8. That a Medical Support Order be established, if requested above;

9. Other Provisions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_ ; and

10. For such other and further relief as the Court deems just and proper.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Petitioner Pro Se

\_\_\_\_\_  
Print Name

STATE OF MONTANA )  
 ) ss  
COUNTY OF \_\_\_\_\_)

\_\_\_\_\_, being first duly sworn on oath, says that he/she is the Petitioner in the above-entitled proceeding; that he/she has read the foregoing Petition and knows the contents thereof; and that the matter, facts and things stated therein are true to the best of his/her knowledge and belief.

\_\_\_\_\_  
Petitioner Pro Se

\_\_\_\_\_  
Print Name

SUBSCRIBED AND SWORN to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Seal)

\_\_\_\_\_  
Name (*printed*): \_\_\_\_\_  
Notary Public for the State of Montana.  
Residing at \_\_\_\_\_  
My Commission Expires \_\_\_\_\_