Self-Help Divorce Packet INSTRUCTIONS for Couples WITH Children of this Marriage Who Are Under the Age of 18 (No matter who they are living with or who has custody of them)

(Note: Any children who have been **adopted** by you and your spouse during the marriage would also be considered "children of the marriage")

These instructions will tell you how to fill out the forms and file your divorce case with the Court. Read over the instructions before you start, so you can gather the information you need to complete the forms. Make sure **ALL** forms are printed on one side.

Each form has a number in the UPPER LEFT corner of the form. These instructions will take each form in order and explain how to complete it. You must use a black or blue pen (not a pencil) to complete these forms.

Note: You will be able to submit most of these forms to the Court as soon as you complete them. However, **because you have children of the marriage**, you will need to wait 60 days after filing the Petition before filing the last four forms (these instructions will inform you which forms these are).

Civil Case Cover Sheet

- Add parties. You are the Petitioner and your spouse is the Respondent.
- Check the box indicating that **"YOU DO NOT HAVE AN ATTORNEY."**
- In the box labeled "Domestic Relations" check the box that says "Dissolution/Divorce with Children."

Form 1 (two pages): This form is a **Motion** asking the Court to let you file the divorce without having to pay a filing fee/ (If the fee is "waived" you will not have to pay.)

- On the top line (and on the top of **ALL** forms) print YOUR name where it says "Petitioner."
- On the second line (and on the top of **ALL** forms) print your spouse's name where it says "Respondent."
- Fill in your name, address, date of birth, and telephone number.
- State all Monthly Income and Expenses on the appropriate lines. (You do NOT need to include your spouse's information since this is a divorce case.)
    - Question #5, ADD together all monthly income given on the previous lines and give a total. If none, put $0.
    - Question #6, ADD together all monthly expenses given on the previous lines and give a total. If none, put $0.
        - State all Assets and Debts (next page) on the appropriate lines.
    - Question #7, ADD together all total assets given on the previous lines and give a total. If none, put $0.

    - Question #8, ADD together all total debts given on the previous lines and give a total. If none, put $0.
- Sign **IN FRONT OF A NOTARY PUBLIC AND HAVE IT NOTARIZED**

Form 2 (one page): This is the **Order** that will be signed by the judge stating whether he or she is waiving the filing fee.

- Only print your name, your spouse's name, and the name of the county in which you are filing the case.

Form 3 (one page): This form **(Case Data Information Sheet)** is used by the clerks' office to coordinate and cross-reference cases involving the same parties.

- Enter information about you, your spouse, and **the children who belong to you and your spouse together** (even if they are not living with you). This form is "redacted" (that is, it has * for part of the date of birth and Social Security numbers so that only the end of each shows).
- The left-hand column is YOUR personal information. For "relationship to Respondent," put "spouse."
- Under "other parties/children," list **all** the children who belong to you and your spouse, even if they do not live with you, with their personal information. Print the relationship to you.
- In the right-hand column, print all personal information about your spouse.
- In the lower right corner of the page, complete personal information and sign your name.

Form 4 (six pages): This is the **Petition** that formally begins your divorce case. This form is also redacted for your privacy.

Pages 1 – 4

- Print the county you are filing in on the line next to "Circuit/Family Court."
- IF you have a domestic violence order (a "protective order," or "DVO"), put the case number on the line next to "Domestic Violence Order#."
- Complete personal information entirely regarding you and your spouse. Remember, you are the Petitioner, and your spouse is the Respondent.
    - Question #2: Complete CURRENT personal information. Check the box indicating whether or not you have lived in Kentucky continuously for the past 180 days (six months). If you have moved back and forth between states during that time, then you have NOT lived in KY continuously for the past 180 days.
    - Question #3: Complete this information about your spouse. Continue completing the following Questions where there are blanks.
    - Question #7: Enter the number of children you have **WITH YOUR SPOUSE** who are under the age of 18 and complete all of their personal information.
    - Question #8: Check whether the children live with you or your spouse, enter the address that each of the children live at.
    - Question #9: List all the addresses the child(ren) has/have lived at in the past five years and with whom they lived.

- Question #10: If you have **NOT** been involved in a prior court case involving any of your children of this marriage, check the box indicating you have not participated in court. If you **HAVE** been involved in a prior court case, check the box indicating that you have.
  - Line A-Name of children involved in case.
  - Line B-Check the box indicating what court that case was in "District, Circuit, Juvenile, Family, or Other." If "Other" is checked, fill in the type of court the case was in.
  - Line C-Enter case number.
  - Line D-Enter the county and state the court was in.
  - Line E-State the outcome.
  - Line F-State the current status (if it is completed or still open).
- Question #11: Check the best person to have custody of the children and which type of custody you are requesting (joint custody or sole custody).
- Question #12: Tell the Court what type of arrangements have or have not been made for visitation and custody of child support. Check the appropriate box indicating if arrangements **HAVE** or have **NOT** been made yet.
- Question #13: Check the appropriate box of who should pay child support.
- Question #14: Check the box indicating whether or not the Respondent should pay child support.
- Question #17: Check one of the boxes about MARITAL property and debts ("marital property" is ANY property either of you bought during marriage, no matter which of you currently has possession of it, and "marital debts" are any debt either of you took on during your marriage, no matter which one of you signed for the debt).
  - At the end of question #16, print YOUR name as Petitioner.
- Question #18: Check the box WHETHER OR NOT you are requesting that your spouse pay "maintenance" ("alimony"). (Note: The Court will decide whether or not it is awarded).
- Question #19: **IF** you want to change your name back to your former name, check the box to the left and print the name that you want to have.

Pages 4 – 6

- Question #2: Mark the appropriate boxes based on what you are asking for.
- Question #3: Mark the appropriate boxes based on what you are asking for.

- Print your name and address where it says "PETITIONER PRINTED NAME" and the two lines below that. **DO NOT SIGN THIS FORM UNTIL YOU SIGN IT IN FRONT OF A NOTARY PUBLIC!**
- Give a copy of this Petition to your spouse.

Form 5: This form tells the Court about your financial situation — your property, income, debts, and expenses.

- At the top heading of the form, check the box "Preliminary."
- On the line that says "county", print the name of the county where you are filing your divorce.

- Check the box to the left of the word "Petitioner" (under the lines where you have printed the names of the parties).
- Under "Identifying Information of Both Parties" and "Income and Employment Information of both parties," Print personal information for you and your spouse.
- Under Children's information, enter the number of children you and your spouse have together and their personal information that is being requested.
    - For **B**, estimate the monthly amount that you pay to a daycare provider, and whether this is paid by the Petitioner or the Respondent.
    - For **C**, estimate monthly medical, dental, and vision insurance.
    - If either you or your pay court-ordered child support for a child WHO ARE OLDER THAN THESE CHILDREN, list which of you make these payments, monthly amount, and the personal information of the child.
- Under Summary of Assets & Debts: Check the applicable boxes on each line. (Note: "real estate" is land. If you own a mobile home, you should list that under "other assets").
- There are five sections where you must describe the property you checked "yes" to.
    - List each item separately. For each item: describe it, state who currently has it (that is, Petitioner or Respondent), estimate its worth ("fair market value"), state the total amount you owe on it, and state how much the monthly payment is. Subtract the total amount owed from "fair market value" and enter on the line "net value or equity." (If you need to list more than five items, use a separate paper to describe the rest.)
- At the question "Do you owe any debts?" answer appropriately. If you marked "yes," describe (if more than five, list on a separate paper).
    - In each section list the creditor, who is listed on the debt, the monthly payment, and the current balance. For "premarital account," the answer is "yes" IF either you or your spouse had this debt BEFORE marriage.
- Add the balances and enter the amount next to "Total Debt Balances".
- "Are you claiming a right to maintenance?" Check the appropriate box. **If "yes,"** complete the two column boxes for expenses; the court will use these to decide whether or not to award you maintenance "alimony."
    - For "Common Expenses for Family" and "Your Personal Expenses," estimate monthly expenses and total the amounts in "Grand Total."
- **Under "Verification" DO NOT SIGN THIS UNTIL YOU ARE IN FRONT OF A NOTARY PUBLIC.**
- Under the heading "CERTIFICATE OF SERVICE" check the box indicating how you will give a copy to your spouse (REQUIRED). Sign the signature line, check the box next to "Petitioner" and print your personal information.

Form 6: The Respondent must sign, saying that he or she has read the Petition and is OK with the Court going forward with this divorce, and giving up rights to have an attorney. **This must be signed IN FRONT OF A NOTARY PUBLIC.**

Form 7: **You and your spouse will need to sign in front of a Notary Public.**

- On the top line print the name of the county you are filing your divorce.
- Question #3: list the names of all children of the marriage and their dates of birth.

- Question #5: Custody If you and your spouse agree that you should have "joint custody" of the children check the appropriate box. **OR**, if you and your spouse agree only one should have legal custody, check the box indicting who should have legal custody.
- Question #6: Timesharing If the children will be living with you and your spouse equally, check the appropriate box and write out the schedule. **OR**, if you and your spouse agree that the child(ren) will live mostly with one of you, check the appropriate box and write out the schedule you have agreed on.
- Question #8: Child Support check the appropriate box indicating who will be paying child support and fill in how much child support is supposed to be paid each month if you agree that it should be paid by the Guidelines. If you and your spouse have agreed on an amount other than state guidelines, explain why. If there is already a child support order, check the correct box and fill in the case number and name of the court where child support was ordered. If you and your spouse agree that no support will be paid because the one paying cannot afford it, check the appropriate box.
- Question #9: Health Insurance If the child(ren) is/are covered by K-CHIP, Medicaid, or other government health insurance, check the box. IF NOT, check who will provide health insurance and the amount that will be paid by each for anything not covered by insurance.
- Question #10: Taxes Check the box indicating who will be claiming the children as dependents for tax purposes. OR, if you plan to share the tax credit, explain how it will be divided.
- Question #11: Non-Marital Property (property that either you or your spouse owned BEFORE you were married, no matter who is using it now).
    - If neither owns any non-marital property check the appropriate box. Or, if you have non-marital property that you will be keeping, describe it.
    - If your spouse has any non-marital property that he or she will be keeping, describe it on the lines provided.
- Question #12: Marital Property (property bought during the marriage).
    - A. Real Estate ("real estate" is land). If you and/or your spouse DID NOT buy land during the marriage, or if either/both of you bought land but no longer own it, check the box 'The parties own no marital real estate.'
        - OR, if either/both of you DID buy land during this marriage and plan to sell it after divorce, check the box that states the complete address of the house. On the lines provided state how the proceeds will be split.
        - OR, if you and your spouse agreed on who will get the house, check the appropriate person. On the lines provided, state the address of the property, the number of days you or your spouse are giving the other party to refinance the house, or number of days giving the other party to pay for their share of the property. If the party keeping the property IS NOT paying for his or her share, check the box, or enter an amount that the person keeping the property WILL pay to the other party.
    - B. Vehicles If you will not receive a vehicle in this divorce, check the box "no vehicle". If you WILL receive a vehicle, check the box "the following vehicle(s)" and describe the vehicle (make, model, year, color). Make the same entries about whether or not your spouse is receiving a vehicle. Then, state how much time (in

days) you are agreeing that the person receiving the vehicle has to refinance (if it is being financed).
    - C. Bank Accounts If you and your spouse have already divided bank accounts check the box. OR, if you and your spouse agree to divide bank accounts, check correct boxes, the state what kind of account each will receive, and what bank they are with. **DO NOT PUT BANK ACCOUNT NUMBERS.**
    - D. Personal Property/Household Goods
        - If you and your spouse have already divided all personal property and household goods check the box.
        - If you are receiving certain items through the divorce, check the appropriate box and describe those items. Give the same information for your spouse.
    - E. Retirement
        - If neither you nor your spouse have retirement check the box
        - If you and/or your spouse have a pension but are planning to keep it, check the second box.
    - F. Other Marital Property
        - If there is no other marital property check that box.
        - If you or your spouse have any other MARITAL property (bought during marriage), check the appropriate box and describe it.
- Question #13. Debts
    - If there are no marital debts (debts during the marriage) check the box.
    - OR, if there ARE marital debts that have been divided, check the box.
    - OR, if there are marital debts to be divided, check the correct boxes and describe the debts on the lines provided.
- Question #14: Equitable Division of Property and Debts
    - If both agree that the marital property and debts have been divided fairly, check the appropriate box.
    - OR, if you and your spouse do NOT believe the property and debts are divided fair, check the appropriate box. Check who will pay the other additional money to make the agreement fair. Enter the amount and date payment will be made.
- Question #15 Maintenance ("Alimony")
    - If neither you nor your spouse is asking for Maintenance, check the box. BE AWARE, if you check this box, the Court may not allow you to change your mind; you will most likely be giving up your chance to request “alimony."
    - If you and your spouse are AGREEING that one of you will pay maintenance, check the box indicating which of you will be PAYING and the monthly payments with a beginning and ending date.
    - **THIS FORM MUST BE SIGNED IN FRONT OF A NOTARY PUBLIC BY BOTH PARTIES!**

STOP!

YOU HAVE FILED EVERYTHING THAT YOU CAN FILE FOR NOW! BECAUSE YOU HAVE CHILDREN TOGETHER, YOU MUST NOW WAIT 60 DAYS AFTER YOU HAVE FILED THE PETITION BEFORE YOU CAN FILE THE REMAINING FORMS!

(THE REMAINING FORMS ARE THE "AFFIDAVIT OF NO CHANGE IN CIRCUMSTANCES," THE "DEPOSITION OF PETITIONER," THE "FINDING OF FACTS AND DECREE OF DISSOLUTION OF MARRIAGE," THE "CHILD SUPPORT ORDER," "CHILD SUPPORT WORKSHEET," AND THE "MOTION FOR FINAL DECREE").

Form 8: **Affidavit of No Change in Circumstances**

If your financial situation is the same as it was when you filed the case, you need to do this form. If your financial situation has CHANGED since you filed the case, you will need to do a new copy of **Form 5** and mark the box labeled "Final". (You can call our office if you need a second **Form 5**.)

- Fill in the blank with your name as the Petitioner and your spouse as Respondent.
- Check mark Petitioner.
- Insert date you filed the first 7 forms.
- Check the box if there were or were not any changes for either party.
- **Sign form in front of a notary.**
- **CERTIFICATE OF SERVICE:** fill out the information it is asking for, then sign form in front of a notary.

Form 9: **Deposition**

- Print the County where you are filing your divorce case AND put the case number that the clerk assigned to your case (you should have this on your copy of the Petition).
- Enter **ALL** personal information, boxes must be checked accordingly.
- Question #13: This packet assumes that you and your spouse have signed and filed a Separation Agreement; **check the box "We have entered a marital separation agreement that has been filed with the Court."** (The box saying that the Respondent is in default would be used if there were no agreement and no Response to the Petition.)

- Question #14: Check the box indicating whether or not you want to be restored to a former name; then print the name you want.
- This form must be signed **IN THE PRESENCE OF A NOTARY PUBLIC.**

Form 10: **Findings of Fact and Decree of Dissolution of Marriage**

- Print the County where you are filing and the case number.

Findings of Fact

- Complete **ALL** personal information and check **ALL** appropriate boxes.
- Question #8: If your settlement agreement states that child support will be calculated according to the standard child support guidelines, check the appropriate box. OR, if you have worked out a different amount, check "deviation from the child support guidelines to be justified because" and print why different arrangements have been made. **OR**, check if an order has already been established by the court.

Conclusions of Law

- Question #5: Fill in your current name on the first blank. Mark the box showing whether you want to be restored to a prior name and fill in the line with the FULL NAME (including middle name) you want to use from now on.

Decree of Dissolution

- Once again, complete ALL information entirely.
- LEAVE THE LINES FOR JUDGE, DOMESTIC RELATIONS COMMISSIONER, CIRCUIT COURT CLERK, AND DATE **BLANK (the court will fill these out).**

Child Support Calculation: Go to the Division of Child Support website to calculate child support and print out the worksheet. (This form will say "Estimate" on it, but it can be submitted to the court.) https://csws.chfs.ky.gov/csws/

Child Support Order

- Fill in the case number that the clerk gave you, check the box for the correct court, and fill in the county where you filed your case.
- This is a redacted form, so you will only be filling in the year of the date of birth for each person and the last 4 digits of each Social Security number.
- Remember, you are the Petitioner, and your spouse is the Respondent.
- If you have more than two children, add them on another page and attach it. Check the appropriate box.
- Question #1: Fill in the amount of child support to be paid each month and the date it is to begin. Check the box indicating whether it is based on the child support guidelines or whether it is a deviation from the guidelines.
- Question #2: Since this is a new order, skip this question.
- Question #3: Check the appropriate boxes about whether there will be health insurance coverage and who will provide it. Fill in how the parties will divide expenses that are not covered by insurance.

- Question #4: If the parties have agreed for either one to pay for other expenses, complete this section. Otherwise, skip this.
- Question #5: Add up the total amount to be paid each month. Fill in the blank and check the "monthly" box.
- Question #6: If there are any other conditions about child support, fill them in here.
- If there is a Domestic Violence Protective Order, check "yes." If not, check "no." If you are the protected party, check "Petitioner." If your spouse is the protected party, check "Respondent."
- Fill in the name of the person receiving child support and their address in the box at the bottom right of the first page.
- Question #7: If child support is going to be paid by wage withholding (that is, wage garnishment), complete section A. **If child support is going to be withheld from the payer's income, you will also need to do the Federal Income Withholding Form. It has its own separate instructions.** If child support is going to be paid directly by one party to the other, complete section B or C as appropriate.
- In the box that says "Document Preparer", fill in your name, address, and telephone number.
- Leave the date and judge's signature lines blank.

Form 11: **<u>Motion for Final Decree</u>**

- Print the county you are filing the divorce in and give case number.
- Question #1: Fill in the date that you filed the Petition.
- Question #2: Enter the date you filed the Entry of Appearance that your spouse signed.
- Where it says "Respectfully submitted", put the date you are filing the form. Sign the form and print ALL personal information.
- On the lines provided under the words "Notice and Certification" you will need to get the date and time for the court hearing from the Circuit Clerk. Enter the information in the first paragraph. In the second paragraph, fill in your spouse's address and the date you are sending them a copy, then sign the form.

DO NOT CHANGE ANY INFORMATION ON ANY OF THESE FORMS AFTER YOU HAVE SIGNED THEM IN FRONT OF A NOTARY PUBLIC!

AOC-104 Doc. Code: CCCS
Rev. 1-24
Page 1 of 1

Commonwealth of Kentucky
Court of Justice *www.kycourts.gov*

CIVIL CASE COVER SHEET

Case No.: _____
Court: _____
County: _____
Division: _____

PLAINTIFF/PETITIONER *OR* IN RE/IN THE INTEREST OF:

_____

DEFENDANT/RESPONDENT, *if applicable:*

_____

☐ Check here if **YOU DO NOT HAVE AN ATTORNEY** and are **REPRESENTING YOURSELF** (a Self-Represented *[Pro Se]* Litigant)

Nature of the Case: Place a "X" to the left of the ***ONE*** case category that most accurately describes your ***PRIMARY CASE***. If you are making more than one type of claim, check the one that you consider most important.

DOMESTIC RELATIONS *eFile Only

- ☐ Dissolution/Divorce with Children (DISSOC)
- ☐ Dissolution/Divorce without Children (DISSO)
- ☐ Paternity (PA)
- ☐ Custody (CUSTO)
- ☐ Child Support IV-D (SUPIV)
- ☐ Child Support Private Non IV-D (SUPPRI)
- ☐ URESA/UIFSA (UR)
- ☐ Visitation/Parenting Time (VISIT)
- ☐ Voluntary Termination of Parental Rights (VTPR)
- ☐ Involuntary Termination of Parental Rights (ITPR)
- ☐ Adoption (ADPT)
- ☐ Other: (DFOTH) ***eFile not required**

_____

PROBATE / ESTATE *eFile Only

- ☐ Guardianship-Adult (GCADLT) ***eFile not required**
- ☐ Guardianship-Juvenile (GCJUV)
- ☐ Adult Conservatorship - Trusteeship (CONSVA)
- ☐ Juvenile Conservatorship - Trusteeship (CONSVJ)
- ☐ Probate-Testate (with a will) (PBTEST)
- ☐ Probate-Intestate (without a will) (PBINT)
- ☐ Petition to Dispense with Administration (PBDIS)
- ☐ Name Change (NC)
- ☐ Will Contest (WC)
- ☐ Other: (PBOTH) ***eFile not required**

_____

TORT (Injury) *eFile Only

- ☐ Automobile (AUTO)
- ☐ Intentional (INTENT)
- ☐ Malpractice-Medical (MDML)
- ☐ Malpractice-Other (MLOTH)

_____

- ☐ Premises Liability (PREM)
- ☐ Product Liability (PROD)
- ☐ Property Damage (PD)
- ☐ Slander/Libel/Defamation (SLAND)
- ☐ Other: (PIOTH)

_____

_____

REAL PROPERTY

- ☐ Abandoned and Blighted Property Conservatorship (PC) ***eFile Only**
- ☐ Property Rights (PR) ***eFile Only**
- ☐ Condemnation (DOMAIN)
- ☐ Forcible Detainer - Eviction (FD) ***eFile Only**
- ☐ Forcible Entry (FENTRY)
- ☐ Foreclosure (FCL) ***eFile Only**
- ☐ Other: (COOTH) ***eFile Only**

_____

EMPLOYMENT *eFile Only

- ☐ Employment-Discrimination (DSCR)
- ☐ Employment-Other (DISPU)

_____

CONSUMER *eFile Only

- ☐ Seller Consumer Goods (DEBTG)
- ☐ Seller Consumer Services (DEBTS)
- ☐ Buyer Consumer Goods (BUYERG)
- ☐ Buyer Consumer Services (BUYERS)
- ☐ Credit Card Debt (CREDIT)
- ☐ Fraud (FRAUD)
- ☐ Other: (COOTH)

_____

_____

APPEALS

- ☐ Appeal from Administrative Agency (AB)
- ☐ Appeal from District Court (XI)
- ☐ Other: (OTH)

_____

_____

MISC CIVIL

- ☐ Constitutional Challenge (CCHAL)
- ☐ Habeas Corpus (HABEAS)
- ☐ Non-Domestic Relations Restraining Order (IP)
- ☐ Tax (TAX)
- ☐ Writs (WRITS)
- ☐ Other: (OTH) _____

BUSINESS/COMMERCIAL *eFile Only

- ☐ Business Tort (BCPI)
- ☐ Statutory Action (BCSA)
- ☐ Business Contract Dispute (BCCO)
- ☐ Other: (BCOTH) _____

Print Form **Reset Form**

FORM 1

AOC-026 Doc. Code: AFP Rev. 10-22 Page 1 of 3 Commonwealth of Kentucky Court of Justice *www.kycourts.gov* KRS 453.190; CR 5.05(4)	**MOTION FOR WAIVER OF COSTS AND FEES AND TO PROCEED *IN FORMA PAUPERIS*; AFFIDAVIT; FINANCIAL STATEMENT; AND ORDER**	Case No. _____ Court _____ County _____ Division _____

_____ PLAINTIFF/PETITIONER

VS.

_____ DEFENDANT/RESPONDENT

Motion for Waiver of Costs and Fees: Affiant is unable to pay the costs and fees of this action and hereby requests that the Court waive them and allow Affiant to proceed *in forma pauperis*.

Affiant hereby submits the following information in support of the above Motion.

NAME: _____

ADDRESS: _____

_____

DOB: _____ Telephone: (____) _____

I. MONTHLY INCOME/MONTHLY EXPENSES

1. Are you employed? ❑ Yes, full-time. ❑ Yes, part-time. ❑ No.

Employer name and address: _____

_____

2. Marital status:_____ If married, spouse's name: _____

3. Number of dependents (children, elderly, or disabled): _____ Relationship: _____ Age(s): _____

4. If married, is spouse employed? ❑ Yes ❑ No. If yes, include spouse's income and expenses below unless this is a divorce proceeding.

Monthly Income		**Monthly Expenses**	
Gross salary (before deductions)	$_____	❑ Mortgage ❑ Rent payment	$_____
Public/Gov't assistance*:*		Utilities (electric/gas)	$_____
Food stamps/SNAP	$_____	Water/Sewer/Trash	$_____
TANF	$_____	Food	$_____
K-TAP	$_____	Phone(s) (landline and/or cell)	$_____
KCHIP	$_____	Internet	$_____
LIHEAP	$_____	Cable/Satellite	$_____
WIC	$_____	Transportation	$_____
Child Care Assistance	$_____	Clothing/Shoes	$_____
Foster care	$_____	Vehicle payment(s)	$_____
Other _____	$_____	Insurance (vehicle, health, house/renter's)	$_____
Social Security (SSI/SSD)	$_____	Credit card payment(s)	$_____
Worker's Compensation	$_____	Unreimbursed childcare	$_____
Unemployment	$_____	Tuition/student loans	$_____
Retirement/Pension	$_____	Medical/Dental payments/installments	$_____
Child support	$_____	Child support	$_____
Maintenance/Alimony	$_____	Other _____	$_____
Stocks, trusts, bonds	$_____		
Student financial aid	$_____		
Other _____	$_____		
5. TOTAL MONTHLY INCOME	**$** 0	**6. TOTAL MONTHLY EXPENSES**	**$** 0

II. ASSETS / DEBTS

Assets

Cash on hand $_____

Bank accounts

Checking $_____

Savings $_____

Other _____ $_____

Value of home (if homeowner) $_____

Value of other real estate owned *(please list)*

_____ $_____

_____ $_____

_____ $_____

Value of vehicle(s) in working order

(1) Yr/Make _____ $_____

(2) Yr/Make _____ $_____

(3) Yr/Make _____ $_____

Value of personal possessions *(i.e.,jewelry, boat)*

_____ $_____

_____ $_____

_____ $_____

_____ $_____

Debts / Outstanding balances owed

Home loan, if homeowner $_____

Vehicle loan(s) $_____

Credit card(s) $_____

Student loan(s) $_____

Medical $_____

Other _____ $_____

Other _____ $_____

Other _____ $_____

Other _____ $_____

Other _____ $_____

7. TOTAL ASSETS **$** 0

8. TOTAL DEBTS **$** 0

9. Additional comments:

_____

_____

_____

_____
Date

_____
Affiant's Signature

_____
Affiant's Name *(print or type)*

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 2_____

My Commission Expires: _____

_____
Attesting Officer or Notary's Signature

FORM 2

AOC-026 Doc. Code: OFP Rev. 10-22 or OFD Page 3 of 3 Commonwealth of Kentucky Court of Justice *www.kycourts.gov* KRS 453.190; CR 5.05(4)	**MOTION FOR WAIVER OF COSTS AND FEES AND TO PROCEED *IN FORMA PAUPERIS*; AFFIDAVIT; FINANCIAL STATEMENT; AND ORDER**	Case No. _____ Court _____ County _____ Division _____

_____ PLAINTIFF/PETITIONER

VS.

_____ DEFENDANT/RESPONDENT

ORDER

This case having come on the Court's docket on a motion for waiver of fees and costs associated with this action and to proceed *in forma pauperis* pursuant to KRS 453.190, and the Court having reviewed the foregoing Affidavit and Financial Statement, and being otherwise sufficiently advised, IT IS HEREBY ORDERED AND ADJUDGED that the Motion to Proceed *In Forma Pauperis* is:

❑ **GRANTED.** (Doc Code: OFP) Affiant is a poor person pursuant to KRS 453.190(2) as follows: *(Check one)*

- ❑ Affiant is unable to pay the costs and fees associated with this action without depriving himself or herself or his or her dependents of the necessities of life, including food, shelter, or clothing. OR
- ❑ Affiant's income is at or below 100% on the sliding scale of indigency established by the Kentucky Supreme Court.

OR

❑ **DENIED.** (Doc Code: OFD) Affiant is not a "poor person" pursuant to KRS 453.190(2). Affiant shall have thirty (30) days to pay any required fees or costs to appeal this decision. If Affiant fails to pay the required fees or costs, or fails to seek review, the matter shall be treated as though not timely filed. CR 5.05(4).

_____ _____

Date Judge's Signature

Print Form Reset Form

FORM 3

AOC-FC-3
Rev. 10-17
Commonwealth of Kentucky
Court of Justice *www.courts.ky.gov*

☐ Minor Children Involved
☐ Protective Order Issued For:
☐ Petitioner
☐ Respondent

☐ CIRCUIT ☐ DISTRICT ☐ FAMILY COURT
CASE DATA INFORMATION SHEET

For Office Use Only

Case #: _____

County: _____

Division: _____

PETITIONER:

Name: _____

Address: _____

_____

_____

Telephone: *(include area code)* _____

Email: _____

DOB: **/**/ _____

SSN: ***-**- _____

Relationship to Respondent: _____

RESPONDENT:

Name: _____

Address: _____

_____

_____

Telephone: *(include area code)* _____

Email: _____

DOB: **/**/ _____

SSN: ***-** _____

Relationship to Petitioner: _____

For ALL OTHER PARTIES to this case: please list below the name, current address, date of birth (DOB), social security number (SSN), and relationship to the Petitioner, of any other parties to this action, or children of the Petitioner or Respondent. If there is not enough room below, please attach a separate sheet with all the information requested.

OTHER PARTIES/CHILDREN:

Name: _____

Address: _____

_____

Telephone: *(include area code)* _____

DOB: **/**/ _____

SSN: ***-**- _____

Relationship to Respondent: _____

Name: _____

Address: _____

_____

Telephone: *(include area code)* _____

DOB: **/**/ _____

SSN: ***-**- _____

Relationship to Petitioner: _____

Name: _____

Address: _____

_____

Telephone: *(include area code)* _____

DOB: **/**/ _____

SSN: ***-**- _____

Relationship to Respondent: _____

Name: _____

Address: _____

_____

Telephone: *(include area code)* _____

DOB: **/**/ _____

SSN: ***-**- _____

Relationship to Petitioner: _____

Please list any/all cases, pending, or heard within the last five (5) years, that have involved the parties or children of the parties in Family, District or Circuit Court. Please provide the case number, name of party and type of case:

_____

_____

NOTICE TO FILING PARTY: A REDACTED COPY MUST BE FILED PURSUANT TO CR 7.03.
This form shall be completed in full, pursuant to local rule and in compliance with federal law.

_____
Signature of Preparer/Relationship to Petitioner

Print Name: _____

Address: _____

_____

Telephone: *(include area code)* _____

DISTRIBUTION: Cabinet for Health and Family Services, placing a copy in the County Attorney's Wage Withholding Order Box in Circuit Clerk's Office

Print Reset Form

FORM 4

COMMONWEALTH OF KENTUCKY
_____ CIRCUIT/FAMILY COURT
CIVIL ACTION NO. _____

IN RE: THE MARRIAGE OF

_____ PETITIONER
(Print name of Petitioner)

AND **PETITION FOR DISSOLUTION OF MARRIAGE**
(With Children Under 18)

_____ RESPONDENT
(Print name of Respondent)

Domestic Violence Order #:_____

*** *** ***

COMES the Petitioner, *pro se*, and for their Petition for Dissolution of Marriage would state as follows:

1. The parties are spouses, having been lawfully married on _____ in _____ County, _____, where the marriage is registered.

2. The Petitioner's date of birth is **/**/____; they are ____ years of age; they reside at _____, _____, in _____ County, Kentucky; they ☐ have OR ☐ have not resided in the Commonwealth of Kentucky for at least 180 days immediately preceding the filing of this Petition; they are currently ☐ disabled OR ☐ not employed OR ☐ employed as a _____ at _____ making $_____ per hour working an average of ____ hours per week.

3. The Respondent's date of birth is **/**/____; they are ____ years of age; they reside at _____, _____, in _____ County, Kentucky; they ☐ have OR ☐ have not resided in the Commonwealth of Kentucky for at

least 180 days immediately preceding the filing of this Petition; they are currently ☐ disabled OR ☐ not employed OR ☐ employed as a _____ at _____ making $_____ per hour working an average of ____ hours per week.

4. The Petitioner's Social Security number is ***-**-_____.

5. The Respondent's Social Security number is ***-**-_____.

6. The parties are separated and have lived separate and apart without sexual cohabitation since _____.

7. The parties have _____ child(ren) together under the age of 18. They are:

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

8. The child(ren) currently live(s) with ☐ the Petitioner OR ☐ the Respondent at _____.

9. During the last five years, the child(ren) has/have lived at the following addresses:

a. _____ with ☐ the Petitioner OR ☐ the Respondent OR ☐ both.

b. _____ with ☐ the Petitioner OR ☐ the Respondent OR ☐ both.

c. _____ with ☐ the Petitioner OR ☐ the Respondent OR ☐ both.

d. _____ with ☐ the Petitioner OR ☐ the Respondent OR ☐ both.

e. _____ with ☐ the Petitioner OR ☐ the Respondent OR ☐ both.

10. ☐ The Petitioner has not participated in and does not know about any other litigation in Kentucky or any other state concerning custody of any of the children in this case.

OR

☐ The Petitioner has participated in or knows about other litigation in Kentucky or another state concerning custody of a child(ren) in this case.

a. Name(s) of child(ren): _____

b. Court: ☐ District ☐ Circuit ☐ Juvenile ☐ Family ☐ Other _____

c. Case Number(s): _____

d. County: _____ State: _____

e. Brief description of Order or Judgment entered: _____

_____

f. Type of proceeding and current status of case: _____

_____

_____

11. Neither of the parties is a member of the active military.

12. ☐ The Petitioner OR ☐ the Respondent OR ☐ both parties is/are the proper person(s) to have ☐ joint custody OR ☐ sole custody of the minor child(ren) and this would be in the child(ren)'s best interests.

13. ☐ No arrangements have been made between the parties for custody, timesharing, and child support.

OR

☐ Arrangements have been made between the parties regarding the custody, timesharing, and child support for the minor child(ren).

14. The Respondent ☐ should OR ☐ should not be ordered to pay child support.

15. To the best of the Petitioner's knowledge and belief, neither party is currently pregnant.

16. The marriage of the parties is irretrievably broken and there is no prospect for reconciliation.

17. ☐ The parties have no marital property to divide or debts to be assigned.

OR

☐ The parties have already divided their marital property and debts.

OR

☐ There is marital property to be divided and/or debts to be assigned.

18. The Petitioner ☐ is OR ☐ is not requesting that the Respondent pay maintenance.

19. The Petitioner ☐ is OR ☐ is not requesting that they be restored to their former name of _____.

WHEREFORE the Petitioner would respectfully demand as follows:

1. That the Court enter a Decree of Dissolution;

2. That ☐ the Petitioner OR ☐ the Respondent OR ☐ both be granted ☐ sole custody OR ☐ joint custody;

3. That ☐ the Petitioner OR ☐ the Respondent OR ☐ neither be designated as the primary residential custodian;

4. That the Court order timesharing based on the best interests of the child(ren);

5. That the Court equitably divide the parties' property and debts if appropriate;

6. That the Court order the Respondent to pay maintenance if appropriate;

7. That the Court restore the Petitioner to their former name if appropriate; and

8. Any and all other relief to which it may appear that they are entitled.

Respectfully submitted,

_____
PETITIONER, *PRO SE* SIGNATURE

_____
PETITIONER PRINTED NAME

_____

_____
PETITIONER ADDRESS

The Petitioner, _____, states that they have read the statements contained in the foregoing Petition and that the same are true and accurate to the best of their knowledge and belief.

_____
PETITIONER

Subscribed and sworn to before me by _____, to me personally known and/or properly identified, this _____ day of _____, 20___.

NOTARY PUBLIC, STATE AT LARGE
My Commission expires _____.
Commission No. _____.

FORM 5

☐ AOC-238.1 Doc. Code DSPV ☐ AOC-239.1 Doc. Code DSFV Rev. 1-15 Page 1 of 5 Commonwealth of Kentucky Court of Justice *www.courts.ky.gov* FCRPP 2 and FCRPP 3	**SIMPLIFIED** **☐ PRELIMINARY ☐ FINAL VERIFIED DISCLOSURE STATEMENT*** ***FOR PARTIES WITH COMBINED INCOME LESS THAN $100,000 AND COMBINED ASSETS LESS THAN $100,000**	Case No. _____ Court _____ County _____ Division _____

IN RE THE MARRIAGE OF:

_____ PETITIONER

and

_____ RESPONDENT

☐ Petitioner ☐ Respondent submits under oath the following Verified Disclosure Statement pursuant to FCRPP 2 **OR** FCRPP 3, which requires full and prompt disclosure of the following information:

NOTE: A response of "see attached" is not appropriate for any portion of this statement. Attach documents requested herein only.

I. IDENTIFYING INFORMATION OF BOTH PARTIES

Petitioner	Respondent
Name: _____	Name: _____
Street Address: _____	Street Address: _____
City, State, Zip: _____	City, State, Zip: _____
Age: ____ Phone #: _____	Age: ____ Phone #: _____

II. INCOME AND EMPLOYMENT INFORMATION OF BOTH PARTIES *(If self-employed name of company and adjusted gross monthly income)*

Petitioner	Respondent
Employer Name: _____	Employer Name: _____
Gross monthly income: $ _____	Gross monthly income: $ _____
Other income: $ _____	Other income: $ _____

III. MARRIAGE INFORMATION

Date of Marriage: _____ Date of separation: _____

Place of Marriage (city, county & state): _____

IV. CHILDREN'S INFORMATION *(If more than 3 children, continue on a separate sheet)*

A. Minor children born to parties *(number _____)* ☐ More CHILDREN attached?

Name	Current Age

B. Monthly child care/day care expenses: Cost $ _____ Paid by _____

C. Monthly medical, dental and vision insurance for children: Cost $ _____ Paid by _____

D. Either party court-ordered to pay child support for a child born before the children born of this marriage? ☐ Yes ☐ No

Paying party _____ Amount: $ _____

Children: (*List names and ages*) _____

_____

V. SUMMARY OF ASSETS & DEBTS

Do you own any real estate?	Yes ☐	No ☐	*If yes, put information below.*
Do you own any vehicles?	Yes ☐	No ☐	*If yes, put information below.*
Do you have any bank accounts or savings?	Yes ☐	No ☐	*If yes, put information below.*
Do you have assets in a safety deposit box?	Yes ☐	No ☐	*If yes, put information below.*
Do you have any stocks, bonds, etc.?	Yes ☐	No ☐	*If yes, put information below.*
Do you have any retirement account, IRA, 401k?	Yes ☐	No ☐	*If yes, put information below.*
Do you have any cash value in life insurance?	Yes ☐	No ☐	*If yes, put information below.*
Do you own any interest in a business?	Yes ☐	No ☐	*If yes, put information below.*
Are there any other assets?	Yes ☐	No ☐	*If yes, put information below.*
Are there assets held for another person, including children	Yes ☐	No ☐	*If yes, put information below.*

Have you and your spouse already divided your household goods and personal property? Yes ☐ No ☐

Item 1:
Item Description: _____
Who Holds Possession? _____ Valuation Date: _____
Fair Market Value: _____ Amount Owed: _____ Net Value or Equity: _____
Is this a leased vehicle/asset? ☐ Yes ☐ No *If yes, please complete the following:* Monthly Payment: _____
Lease Term Ends: _____

Item 2:
Item Description: _____
Who Holds Possession? _____ Valuation Date: _____
Fair Market Value: _____ Amount Owed: _____ Net Value or Equity: _____
Is this a leased vehicle/asset? ☐ Yes ☐ No *If yes, please complete the following:* Monthly Payment: _____
Lease Term Ends: _____

Item 3:
Item Description: _____
Who Holds Possession? _____ Valuation Date: _____
Fair Market Value: _____ Amount Owed: _____ Net Value or Equity: _____
Is this a leased vehicle/asset? ☐ Yes ☐ No *If yes, please complete the following:* Monthly Payment: _____
Lease Term Ends: _____

Item 4:

Item Description: _____
Who Holds Possession? _____ Valuation Date: _____
Fair Market Value: _____ Amount Owed: _____ Net Value or Equity: _____
Is this a leased vehicle/asset? ☐ Yes ☐ No *If yes, please complete the following:* Monthly Payment: _____
Lease Term Ends: _____

Item 5:

Item Description: _____
Who Holds Possession? _____ Valuation Date: _____
Fair Market Value: _____ Amount Owed: _____ Net Value or Equity: _____
Is this a leased vehicle/asset? ☐ Yes ☐ No *If yes, please complete the following:* Monthly Payment: _____
Lease Term Ends: _____

More OTHER ASSETS attached? ☐ Yes ☐ No **Total Values: _____**

Do you owe any debts? ☐ Yes ☐ No *If yes, put information below.*

Creditor 1:

Creditor: _____
Party Named on Debt: _____ Premarital Account? _____
Valuation Date: _____ Monthly Payment: _____ Total Balance: _____

Creditor 2:

Creditor: _____
Party Named on Debt: _____ Premarital Account? _____
Valuation Date: _____ Monthly Payment: _____ Total Balance: _____

Creditor 3:

Creditor: _____
Party Named on Debt: _____ Premarital Account? _____
Valuation Date: _____ Monthly Payment: _____ Total Balance: _____

Creditor 4:

Creditor: _____
Party Named on Debt: _____ Premarital Account? _____
Valuation Date: _____ Monthly Payment: _____ Total Balance: _____

Creditor 5:

Creditor: _____
Party Named on Debt: _____ Premarital Account? _____
Valuation Date: _____ Monthly Payment: _____ Total Balance: _____

More DEBTS attached? ☐ Yes ☐ No **Total Debt Balances: _____**

Disclosure of _____
Case No. _____

Are you claiming a right to maintenance? ☐ Yes ☐ No If yes, complete this expense list:

A. COMMON EXPENSES FOR FAMILY (Party and any children of the marriage)	
FOOD/GROCERIES FOR FAMILY (Non-entertainment)	
HOUSING	
Cable	
Garbage collection	
Electric, gas, propane & oil utilities	
Home maintenance & repairs	
Homeowner's insurance	
Household supplies	
Maid service	
Property taxes	
Rent or 1st mortgage	
2nd mortgage/home equity loan	
Telephone	
Mobile phone	
Vet/pet supplies	
Yard expense/maintenance	
Water/sewage	
TRANSPORTATION	
Gas and oil	
Liability insurance	
License/taxes/tag	
Payment/loan	
Repairs/maintenance	
Other – bus, taxi, tolls & parking	
OTHER FAMILY EXPENSES (list):	
Sub-total from attached other family expenses, if needed ☐ Attached	
SUBTOTAL (Column A)	$ 0.00

B. YOUR PERSONAL EXPENSES (not including any children's expenses)	
Church and charitable donations	
Clothing	
Cosmetics, hygiene & toiletries	
Disability insurance	
Dry cleaning & laundry	
Entertainment, including restaurants & movies	
Hair care (barber, salon, etc.)	
Internet access	
Life insurance (whole life or term)	
Manicures & pedicures	
Newspapers, magazines & books	
Professional dues or uniforms	
Sports, exercise, hobbies, crafts, etc.	
Travel (monthly average)	
MEDICAL	
Dental (including orthodontics)	
Eyeglasses, contacts & hearing aids, exams and testing	
Insurance (hospitalization)	
Medical doctor(s)	
Prescription medication	
OTHER PERSONAL EXPENSES (list):	
Sub-total from attached other personal expenses, if needed ☐ Attached	
SUBTOTAL FROM COLUMN B	$ 0.00
SUBTOTAL FROM COLUMN A	$ 0.00
SUBTOTAL FROM CHILDREN'S EXPENSE LIST ATTACHMENT	
GRAND TOTAL OF COLUMN A, B, AND ATTACHMENTS	$ 0.00

Disclosure of _____
Case No. _____

VERIFICATION

I, _____, declare under penalty of perjury that the information contained herein, including the information provided on any schedules and attachments, is true and accurate to the best of my knowledge, information and belief. Further, I acknowledge that I have read the foregoing instructions and have followed those instructions to the best of my ability.

_____
☐ Petitioner ☐ Respondent {*check one*}

STATE OF _____)
) SS
COUNTY OF _____)

Subscribed and sworn before me by _____, this _____ day of _____, _____.

My commission expires: _____

_____
NOTARY PUBLIC/TITLE

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of this **Verified Disclosure Statement** (with schedules and attachments) was served by ☐ mail, postage prepaid, or ☐ hand-delivery, or ☐ electronic means, in accordance with Kentucky Rule of Civil Procedure (CR) 5.02, on (name) _____ at (address) _____, this the _____ day of _____, _____.

_____
Signature

☐ Attorney for Petitioner ☐ Attorney for Respondent

☐ Petitioner ☐ Respondent

Address:

_____
_____
_____

Phone: ( ) _____
Fax: ( ) _____
Email: _____

***NOTE**

When this form is utilized as an AOC-238.1, Simplified Preliminary Verified Disclosure Statement, unless otherwise ordered by the Court or required by Local Rule, this form is NOT to be filed with the Court. FCRPP 2(3). However, the entire form and all attachments are to be exchanged between the parties within 45 days of service of the petition on the respondent, and objections thereto shall be exchanged within 20 days thereafter.

When this form is utilized as an AOC-239.1, Simplified Final Verified Disclosure Statement, pursuant to FCRPP 3(3), this form is to be filed with the Court no later than 5 days prior to the trial if property matters are in dispute at that trial. However, the parties may file an Affidavit of No Change In Circumstances, AOC- 239.2, if the AOC-238.1, Simplified Preliminary Verified Disclosure Statement was filed with the Court. A copy of the Final Verified Disclosure Statement or the Affidavit, together with any supporting documentation, shall be provided to the opposing party 15 days prior to trial unless otherwise ordered by the Court.

Print Reset Form

FORM 6

COMMONWEALTH OF KENTUCKY
_____ CIRCUIT/FAMILY COURT
CIVIL ACTION NO. _____

IN RE: THE MARRIAGE OF

_____ PETITIONER
(Print name of Petitioner)

AND **ENTRY OF APPEARANCE AND WAIVER**

_____ RESPONDENT
(Print name of Respondent)

*** *** ***

COMES the Respondent, *pro se*, and states:

1. I have read the Petition, understand it, and do not contest it.

2. I waive service of Summons, enter my appearance, and submit to the jurisdiction of the Court.

3. I understand that, if my spouse has an attorney, that attorney does not represent me.

4. I understand that I may hire my own attorney but choose not to do so.

5. I waive any right of appeal.

Respectfully submitted,

_____
RESPONDENT, *PRO SE* SIGNATURE

_____
RESPONDENT PRINTED NAME

_____

_____
RESPONDENT ADDRESS

The Respondent, _____, states that they have read the statements contained in the foregoing Entry of Appearance and Waiver and that the same are true and accurate to the best of their knowledge and belief.

_____
RESPONDENT

Subscribed and sworn to before me by _____, to me personally known and/or properly identified, this _____ day of _____, 20___.

_____
NOTARY PUBLIC, STATE AT LARGE
My Commission expires _____.
Commission No. _____.

FORM 7

COMMONWEALTH OF KENTUCKY
_____ CIRCUIT/FAMILY COURT
CIVIL ACTION NO. _____

IN RE: THE MARRIAGE OF

_____ PETITIONER
(Print name of Petitioner)

AND **MARITAL SETTLEMENT AGREEMENT**
(With Children Under 18)

_____ RESPONDENT
(Print name of Respondent)

*** *** ***

The parties agree to the following and desire that this agreement be made part of any Decree which is entered in this case:

1. The parties are spouses. Irreconcilable differences have arisen between them, resulting in the filing of a Petition for Dissolution of their marriage.

2. The parties are separated and living apart and have no expectation of resuming a marital relationship.

3. The parties have ____ child(ren) together under the age of 18. They are:

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

4. The parties wish to settle the issues of custody, child support, timesharing, maintenance, division of property, and assignment of debts.

5. **CUSTODY**

☐ The parties shall have joint custody of their minor child(ren). Major decisions affecting the welfare of the child(ren) will be made jointly by the parties.

OR

☐ The Petitioner OR ☐ the Respondent shall have sole custody of the parties' minor child(ren).

☐ Other _____

_____

_____

_____

6. **TIMESHARING**

☐ The child(ren) shall share time equally between the parties as agreed or as follows: _____

_____

_____

OR

The child(ren) shall live primarily with ☐ the Petitioner OR ☐ the Respondent and the other parent shall be entitled to timesharing ☐ at such times and places as the parties shall agree OR ☐ at the following times: _____

_____

_____

☐ Other _____

_____

_____

7. **OTHER PARENTING ISSUES**

A. Both parents shall be entitled to attend school, church, sports, or other activities in which the child(ren) is/are engaged, subject to the restrictions of any protective order(s).

B. Each party shall keep the other reasonably apprised as to where the child(ren) are and shall provide a phone number where the child(ren) can be reached.

C. Each party shall notify the other of any illness or emergency that may arise affecting the child(ren).

D. Neither party shall use illegal drugs or use alcohol to excess in the presence of the child(ren).

8. **CHILD SUPPORT**

☐ The Petitioner OR ☐ the Respondent shall pay $_____ per month as child support, payable by wage assignment order. This amount is based upon the Kentucky Child Support Guidelines. A copy of the Child Support Worksheet is attached.

OR

☐ The Petitioner OR ☐ the Respondent shall pay $_____ per month as child support. This amount deviates from the guideline amount because _____

_____

_____. Neither party is currently receiving K-TAP benefits for the children in this case.

OR

☐ The amount of child support has already been established pursuant to Civil Action #_____ in _____ Court. ☐ The Petitioner OR ☐ the Respondent will pay according to that order.

OR

☐ The parties agree that neither shall pay child support. Neither party is currently receiving K-TAP benefits for the children in this case.

9. **HEALTH INSURANCE**

☐ The child(ren) is/are covered by a government insurance plan, such as K-CHIP, Passport, or Medicaid. Either party will obtain health insurance for the child(ren) as soon as it is available at a reasonable cost.

OR

☐ The Petitioner OR ☐ the Respondent shall maintain health insurance on the child(ren), provided it is available at a reasonable cost. The party providing coverage will give the other party a copy of the insurance card showing coverage for each child. In addition, the Petitioner shall pay _____% and the Respondent shall pay _____% of any medical, surgical, dental, orthodontia, optometric, nursing, hospital, mental health, medication, laboratory, diagnostic, therapeutic or other expenses not covered by the insurance.

10. **TAXES**

A. Beginning with the year in which this case is filed, each party shall file separately. Each party shall retain their own refund AND each party shall separately be liable for any taxes they may owe.

B. ☐ The Petitioner OR ☐ the Respondent shall be entitled to claim the child(ren) as dependent(s) for tax purposes.

OR

☐ The parties shall share entitlement to claim the child(ren) as follows: ___

_____.

11. **NON-MARITAL PROPERTY**

☐ All non-marital property has already been restored to the party it belongs to.

OR

The Petitioner shall keep their non-marital property listed below:

_____

_____

The Respondent shall keep their non-marital property listed below:

_____

_____

12. **MARITAL PROPERTY**

A. **Real Estate**

☐ The parties own no marital real estate.

OR

☐ The parties have agreed to sell the real estate located at _____

_____, for the amount of $_____, and

the parties will divide the net proceeds of the sale with Petitioner receiving _____% and Respondent receiving _____%.

OR

☐ The Petitioner OR ☐ the Respondent is awarded the real estate located at _____. The party who is keeping the property will pay all obligations on the real estate, including the taxes owed and the mortgage. The party who is keeping the property shall refinance the debts associated with the property within _____ days. The party who is keeping the property ☐ shall pay the other party nothing OR ☐ shall pay the other party $_____ within _____ days of signing this Agreement as that party's share of the equity in the property. The party who is NOT keeping the real estate shall sign a Quit Claim Deed on the property at the time that they receive payment for their share of the property. If no payment is due, the Quit Claim Deed shall be signed within 30 days of the date of this Agreement.

B. **Vehicles**

The Petitioner is awarded ☐ no vehicle OR ☐ the following vehicle(s): ___

_____

The Respondent is awarded ☐ no vehicle OR ☐ the following vehicle(s): _

_____

Each party shall pay all obligations including loans, insurance, and/or taxes on the vehicle(s) they are awarded. Each party shall refinance any

outstanding debts on the vehicle(s) they are awarded within _____ days of the signing of this Agreement.

C. **Bank Accounts**

☐ The parties have divided any and all bank accounts and each shall keep the accounts in their name.

OR

☐ The Petitioner is awarded the following accounts: _____

_____

☐ The Respondent is awarded the following accounts: _____

_____

D. **Personal Property/Household Goods**

☐ The parties have divided all personal property/household goods and each shall keep the property in their possession.

OR

☐ The Petitioner is awarded the following personal property/household goods: _____

_____

☐ The Respondent is awarded the following personal property/household goods: _____

_____

E. **Retirement**

☐ Neither party has any retirement funds.

OR

☐ Each party shall keep their own retirement funds.

F. **Other Marital Property**

☐ There is no other marital property.

OR

☐ The Petitioner is awarded: _____

_____

☐ The Respondent is awarded: _____

_____

13. **DEBTS**

☐ There are no marital debts.

OR

☐ The marital debts have been fairly divided between the parties and each shall pay the debts currently in their name.

OR

☐ The following debts are assigned to the Petitioner, and the Petitioner shall hold the Respondent harmless for payment on them: _____

_____

_____

☐ The following debts are assigned to the Respondent, and the Respondent shall hold the Petitioner harmless for payment on them: _____

_____

_____

14. **EQUITABLE DIVISION OF PROPERTY AND DEBTS**

☐ The parties agree that the division of property and debts is equitable.

OR

☐ In order to make the division of property and debts equitable, ☐ Petitioner OR ☐ Respondent shall pay the other party $_____ within _____ days of this Agreement.

15. **MAINTENANCE**

☐ Neither party shall be responsible for paying maintenance to the other.

OR

☐ The Petitioner OR ☐ the Respondent shall pay the other party maintenance in the amount of $_____ per month beginning _____, to be paid on the first of each month, and continuing until _____, the death of either party, the remarriage of the party receiving maintenance, or the cohabitation of the receiving party with a non-related adult, whichever occurs first.

By signing this Agreement, each party acknowledges that this is a fair agreement, that they understand all provisions of the Agreement, that they understand that this is a legally binding document, that the statements contained in the Agreement are all true and accurate, and that they are entering into this Agreement freely and voluntarily.

Seen and Agreed to by:

_____ _____

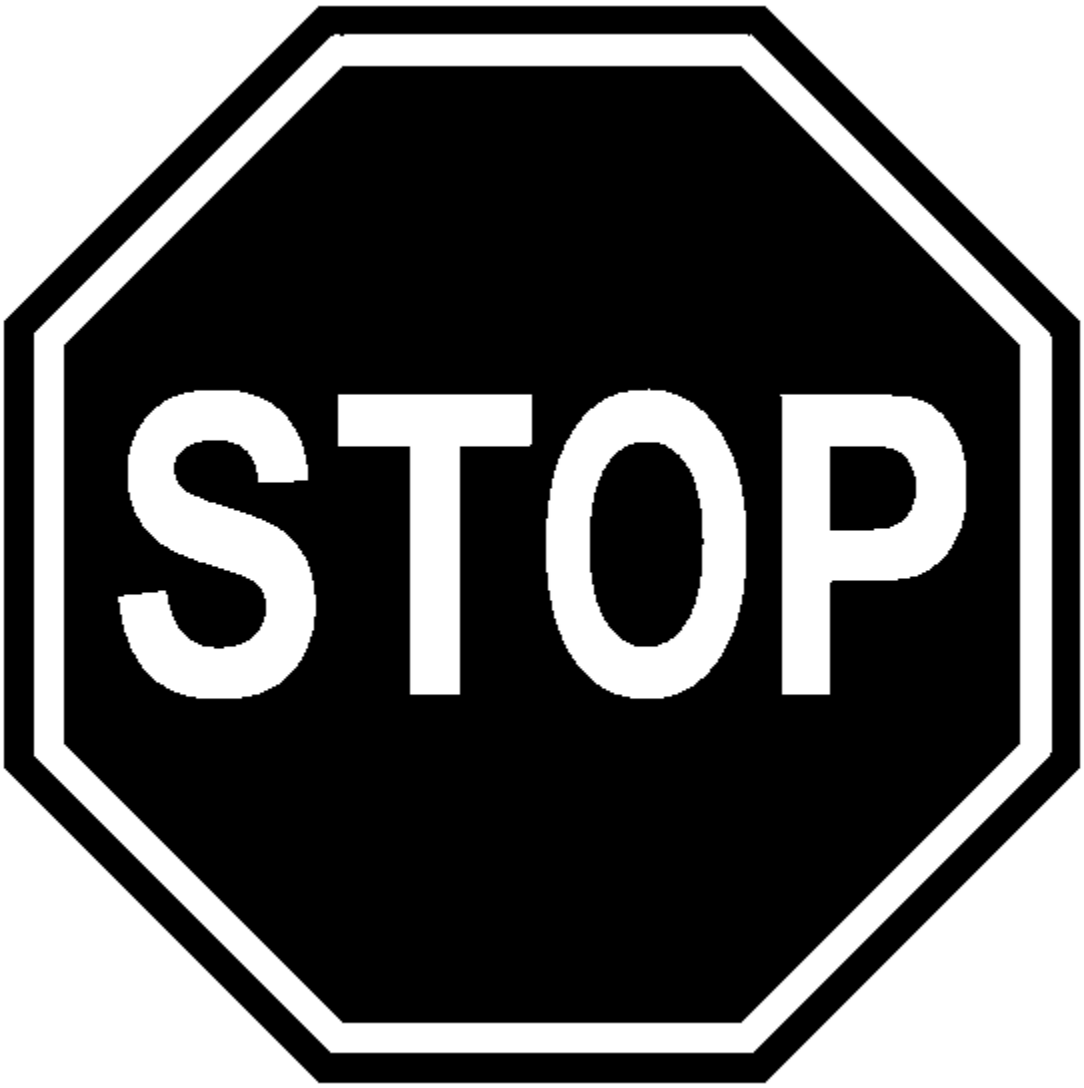
PETITIONER RESPONDENT

Subscribed and sworn to before me by the **Petitioner**, to me personally known and/or properly identified this the __ day of _____ 20___.

NOTARY PUBLIC, STATE AT LARGE
My Commission expires _____.
Commission No. _____.

Subscribed and sworn to before me by the **Respondent**, to me personally known and/or properly identified this the ___ day of _____ 20____.

NOTARY PUBLIC, STATE AT LARGE
My Commission expires _____.
Commission No. _____.



You have done all that you can do at this time. You will need to wait before completing and filing the remaining forms.

FORM 8

AOC- 239.2 Doc. Code: ANCC Rev. 1-15 Page 1 of 2 Commonwealth of Kentucky Court of Justice *www.courts.ky.gov* FCRPP 3	**Affidavit of No Change in Circumstances Requiring the Filing of a Final Verified Disclosure Statement**	Case No. _____ Court _____ County _____ Division _____

IN RE THE MARRIAGE OF:

_____ PETITIONER

and

_____ RESPONDENT

☐ Petitioner ☐ Respondent submits under oath the following Affidavit pursuant to FCRPP 3, which requires full and prompt disclosure of the following information:

1. That the Preliminary Verified Disclosure Statement was filed pursuant to Court Order or Local Rule on _____, _____.

2. That there are no changes in circumstance of the ☐ Petitioner ☐ Respondent since the date the Preliminary Verified Disclosure Statement was filed; and, therefore no Final Verified Disclosure Statement is required to be filed pursuant to FCRPP 3(3).

3. I understand that making a false statement in this Affidavit may subject me to the penalties for perjury as contained in KRS Chapter 523. The maximum sentence for perjury is five (5) years imprisonment. In addition, it may be grounds to set aside any judgment entered in this case.

4. I declare under the penalty of perjury that I have read or have had read to me the information contained on this form and that the statements provided here are true, complete and accurate to the best of my personal knowledge.

_____ _____
Date Affiant's Signature

_____
Affiant's Name (Print or Type)

STATE OF _____)
) SS
COUNTY OF _____)

SUBSCRIBED AND SWORN TO before me this _____ day of _____, _____.

My Commission Expires: _____ _____
NOTARY PUBLIC/TITLE

Case No. _____

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a copy of this **Affidavit of No Change in Circumstances** was served by ☐ mail, postage prepaid, or ☐ hand-delivery, or ☐ electronic means, in accordance with Kentucky Rule of Civil Procedure (CR) 5.02, on (name) _____ at (address) _____, this the _____ day of _____, _____.

_____
Signature

☐ Attorney for Petitioner ☐ Attorney for Respondent

☐ Petitioner ☐ Respondent

Address:

_____

_____

_____

Phone: ( ) _____

Fax: ( ) _____

Email: _____

Print Reset Form

FORM 9

COMMONWEALTH OF KENTUCKY
_____ CIRCUIT/FAMILY COURT
CIVIL ACTION NO. _____

IN RE: THE MARRIAGE OF

_____ PETITIONER
(Print name of Petitioner)

AND **DEPOSITION OF PETITIONER**

_____ RESPONDENT
(Print name of Respondent)

*** *** ***

This deposition of the Petitioner, _____, was answered by the party on the _____ day of _____, 20___. Said deposition was taken pursuant to RFFC 14(G) and is to be used as evidence in the above-captioned uncontested dissolution of marriage.

Comes the Petitioner, _____, *pro se*, after first being duly sworn and under penalty of perjury, states as follows:

1. I am the Petitioner in this matter.

2. I had been a resident of Kentucky for more than 180 days immediately before I filed the Petition in this matter.

3. My age is ____.

4. My employment status is: ☐ disabled OR ☐ not employed OR ☐ employed as a _ _____ by _____.

5. My spouse's age is _____.

6. My spouse's employment status is: ☐ disabled OR ☐ not employed OR ☐ employed as a _____ by _____.

7. We were married on _____ in _____ County, _____ _____ where our marriage is registered.

8. We separated on _____ and have lived separately without sexual cohabitation since that time.

9. Neither of us in the active military service.

10. We have the following minor child(ren) together:

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

11. Neither of us is pregnant to the best of my knowledge and belief.

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

13. ☐ The Respondent has not filed an Answer and is in default.

OR

☐ We have entered into a Marital Settlement Agreement that has been filed with this Court.

14. I ☐ do OR ☐ do not wish to be restored to my former name of _____ _____.

Respectfully submitted,

_____

PETITIONER, *PRO SE* SIGNATURE

_____
PETITIONER PRINTED NAME

_____

_____
PETITIONER ADDRESS

The Petitioner, _____, states that they have read the statements contained in the foregoing Petition and that the same are true and accurate to the best of their knowledge and belief.

_____
PETITIONER

Subscribed and sworn to before me by _____, to me personally known and/or properly identified, this __ day of _____, 20___.

_____
NOTARY PUBLIC, STATE AT LARGE
My Commission expires _____.
Commission No. _____.

FORM 10

COMMONWEALTH OF KENTUCKY
_____ CIRCUIT/FAMILY COURT
CIVIL ACTION NO. _____

IN RE: THE MARRIAGE OF

_____ PETITIONER
(Print name of Petitioner)

AND **DECREE OF DISSOLUTION OF MARRIAGE**
(With Children Under 18)

_____ RESPONDENT
(Print name of Respondent)

*** *** ***

This matter having come before the Court, and the Court being sufficiently advised, hereby makes the following:

FINDINGS OF FACT

1. Petitioner, _____, has been a resident in the state of Kentucky for at least 180 days next preceding the filing of this Petition.

2. Neither party is in the active military service.

3. Petitioner and Respondent were married on _____ in _____ County, _____, where the marriage is registered.

4. Petitioner and Respondent separated on or about _____ and have lived separate and apart without sexual cohabitation since that time.

5. The marriage is irretrievably broken and there is no prospect of reconciliation.

6. The parties have the following minor child(ren) together:

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

_____ (name), DOB _____/_____/_____

7. Neither party is currently pregnant.

8. The parties have entered into a Marital Settlement Agreement which was filed with this Court. The Court has reviewed the Agreement and finds that it is not unconscionable, and that its provisions with respect to custody and timesharing are in the child(ren)'s best interests. The Court further finds that ☐ child support is to be set in accordance with the Kentucky Child Support Guidelines OR that ☐ the deviation the parties have agreed to is justified because: _____ _____.

9. The Petitioner's former name is _____ and they ☐ have OR ☐ have not requested to be restored to it.

CONCLUSIONS OF LAW

1. The Court has jurisdiction of the subject matter and of the parties herein.

2. The parties are properly before the Court.

3. The marriage of the Petitioner and Respondent being irretrievably broken, should be dissolved.

4. The Marital Settlement Agreement signed by the parties is fair, just, equitable, and not unconscionable. The portions of the Agreement pertaining to the parties' child(ren) is in the child(ren)'s best interests. The Agreement should be adopted by the Court.

5. The Petitioner, _____, ☐ should be OR ☐ should not be restored to the use of their former name of _____.

DECREE OF DISSOLUTION

1. The marriage between the parties, being irretrievably broken, is hereby dissolved and each of the parties is restored to the status of an unmarried person.

2. The parties' Marital Settlement Agreement filed herein and bearing the date of ___ _____, is fair, just, equitable, and not unconscionable; the portions pertaining to the parties' child(ren) is in the child(ren)'s best interests; and the Agreement is hereby approved and incorporated by reference as if set forth verbatim, and the parties are ordered to obey the terms thereof.

3. The Petitioner ☐ is OR ☐ is not restored to their former name of_____ _____.

4. This is a final and appealable order, and there is no just reason for delay in its entry.

Entered this the _____ day of _____ 20____.

_____
JUDGE, _____ CIRCUIT COURT

(If applicable)
Seen and Recommended this the ____ day of _____, 20___, by:

_____
DOMESTIC RELATIONS COMMISSIONER

CLERK'S CERTIFICATE OF SERVICE

This is to certify that a true and complete copy of the foregoing was served upon the following:

PETITIONER

RESPONDENT

_____
DEPUTY CLERK, _____ CIRCUIT COURT

FORM 11

COMMONWEALTH OF KENTUCKY
_____ CIRCUIT/FAMILY COURT
CIVIL ACTION NO. _____

IN RE: THE MARRIAGE OF

_____ PETITIONER
(Print name of Petitioner)

AND **MOTION FOR FINAL DECREE**

_____ RESPONDENT
(Print name of Respondent)

*** *** ***

COMES the Petitioner, _____, acting pro se, and moves the Court to take this matter under submission and to enter the Decree filed herewith.

AS GROUNDS for this Motion, the Petitioner would state as follows:

1. A Petition for Dissolution of Marriage was filed in this Court on _____.

2. The Respondent signed an Entry of Appearance and Waiver which was filed with this Court on _____.

3. A Marital Settlement Agreement has been filed with this Court.

4. Jurisdictional proof in the form of a Deposition by the Petitioner has been filed with this Court.

5. The parties desire that the Court enter the Decree tendered to the Court, thereby dissolving their marriage in conformance with the terms of the Marital Settlement Agreement.

WHEREFORE, the Petitioner would respectfully demand as follows:

1. That the Court enter a final Order granting the relief sought in the Petition; and

2. Any and all other relief to which they may be entitled.

Respectfully submitted this the _____ day of _____20____.

_____
PETITIONER, acting pro se (signature)

_____
PETITIONER (printed name)

_____

_____
PETITIONER'S ADDRESS

NOTICE AND CERTIFICATION

The foregoing Motion shall come before Hon. _____, Judge of the _____ Circuit/Family Court, in _____, Kentucky, on _____, 20___, at the hour of _____ am/pm.

This is to certify that a true and correct copy of the foregoing Motion, has been served upon the Respondent by mailing same to them by First Class Mail to their last known address, _____ _____ postage pre-paid, this the _____ day of _____ _____, 20___.

_____
PETITIONER, *PRO SE*