IN THE CIRCUIT COURT OF

_ , MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

In re the Marriage of:)		
) (Last Name)		Case Number	0
Petitioner, (Enter your full legal nam	e above)		(Will be assigned wl	nen case is filed)
-and-			Division	MO.
(First Name) (Middle Name)	(Last Name)	(Jr./Sr./III)	Number	
Respondent. (Enter your spouse's f		, j	(Will be assigned wh	nen case is filed)
Pe	tition for Diss	olution of Mar	riage	
Throughout this optime apparent			AL .	
Throughout this entire case, you	, (First Name)	(Middle Name)	(Last Name)	, <u>(Jr./Sr./III)</u> ,
will always be the Petitioner.				
Your spouse,		S	wi	ll always be the
(First Name) (Middle Name)	(Last Name)	, wi	li always be the
Respondent.				
		$\langle \cdot \rangle$		
Information about Petitioner				
(Enter your name on the lines)	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
 How many petitions have yo This is the first petition I This is the second petition This is the third petition 	have filed in this c on I have filed in th I have filed in this o	ase. (Original petiti iis case.		
What is your mailing addres				
This is the address the court will is pending, you must send a lette as the address at which you live. court a mailing address. Because public.	r to the court notifying Even if you do not wis	it of your new address. h to give the address a	This address is not ne t which you live, you n	ecessarily the same nust still give the
5			_	
(City) ()	(State)	(Zip)		
(Telephone Number with Area Co	de) (E-mail Address -	Optional)		
3. What are the last four numb The last four digits of your social	•		SMo.	
XXX-XX-				

4.	Are you over the age of eighteen?	(Check one of the two boxes)

- □ Yes □ No
- 5. I live in
 the United States
 another country, which is _____
- I live in Missouri another state, which is ______.
 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 lived in the state.

Years Months Days (Length of time you have lived in this state)

7. In what county do you currently live and for what length of time have you lived there?

City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should enter "Saint Louis city" in the blank.

	(County)	Years Months Days (Length of time you have lived in this county)
3.	What is your current em Employed Unemployed Self-employed	Novment status? (Check one of the three boxes)
€.	If you are self-employed, ent	elf-employed, where do you currently work? er a brief description of the type of work you perform such as "Landscaping" or "Day care" or employer. If you are self-employed, you should also enter the address information for your
	(Employer's name or type of s	əlf-employment)
	(Street)	
	(City)	(State) (Zip)
0.	What is your total month	y gross income from all sources?
	Gross income is the amount	of money a person earns before anything such as taxes is deducted. For a more detailed ee Supreme Court Form No. 14.
	(Total monthly gross income)	
1.		through the combined income from your employment and income from eive in the dissolution? <i>(Check one of the two boxes)</i> ing any minor children.
	☐ Yes☐ No	

	ormation about Respondent	t (First Name)	(Middle Name)	(Last Name)	
		. ,	(()	(0
12.	What is your spouse's mailing This is the address that the court will spouse's current address, you should	use to send informa			o not know your
	(Street)				-04.
	(City) ()	(State)	(Zip)		<u>0</u> .
	(Telephone Number with Area Code)	(E-mail Address - C	ptional)	<u> </u>	
13.	What are the last four numbers	of your spouse's	s social security nun	nber?	
	The last four digits of your spouse's a blank. If you do not know your spous				ave this field
	XXX-XX-			RE	
14.	Is your spouse over the age of \Box	eighteen? (Chec	k one of the two bo	xes)	
	☐ Yes □ No				
			S		
15.	My spouse lives in the Unit	ed States 🗌 and	ther country, which	is	·
16.	My spouse lives in 🗌 Missouri	another state	e, which is		
	If the time is less than four months, s	state the number of d	ays your spouse has live	ed in the state.	
	Years Months Days (Length of time they have lived in this	state)			
17.	In what county does your spou If you do not know in which county ye "Unknown." City of Saint Louis is cor	our spouse lives and	-		
	(County)	Years Months (Length of time th	Days ney have lived in this cou	unty)	
18.	If your spouse does not now liv during your marriage? (Check			ise live together ir	n Missouri
	If you and your spouse have never li voluntarily enter their appearance in means that the court cannot aware where your spouse lives. You sho	this proceeding, the d any money judgm	court will lack personal ji ent to you. It may be b	urisdiction over your s etter to file this case	pouse. This
	Yes No				
$\langle \rangle$	Not Applicable (My spouse	currently lives in	Missouri)		
19.	What is your spouse's current	employment statu	us? (Check one of th	he four boxes)	
	UnemployedSelf-employed				

Petition for Dissolution of Marriage Form CAFC001 01/01/2018 20. If your spouse is employed or self-employed, where do they currently work?

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

(Employer's name or type of self-	employment)		
(Street)			
(City)	(State)	(Zip)	G.
What is your spouse's total	monthly gross incom	ne from all sources?	
Gross income is the amount of r exact amount of monthly gross i			
			S
(Total monthly gross income)			0 ^L
Can your spouse support the income from property that t	hey will receive in the	e dissolution? (Check or	
This does not include supporting	g any minor children born	of the marriage.	
		SU	
No Unknown			
may prevent you from getting a about this situation prior to filing Yes No			You should contact a lawyer
ormation about the Marr	iage		
What date were you marrie	d?/ (<i>mm/dd/yy</i>	/ yy)	
Where did you get your ma Enter the state, county and cour where you were married. City of Louis, enter "Saint Louis city."	ntry where your marriage	is registered. This is not nece	ssarily the same as the county
 In the United States, in In another country, which 		•	
What date did you and you	r spouse separate?	/ / (mm/dd/yyyy)	

27.	Is there any reasonable likelihood that your marriage can be preserved? (Check one of the two
	boxes)

- ☐ Yes
- ____No
- 28. Is your marriage irretrievably broken? (Check one of the two boxes)
 - Yes
 - □ No
- 29. Are you or your spouse pregnant? (Check all that apply)
 - ☐ Yes, I am pregnant.
 - ☐ Yes, my spouse is pregnant.
 - □ No, neither me nor my spouse are pregnant.

You **must** enter a number on each line below, even if it is 0. Include children no matter how old they are. Do not include deceased children.

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

Include in this number all living children born to you and your spouse during this marriage as a result of sexual intercourse or artificial insemination.

- 31. How many living children did you and your spouse adopt?
 If you have already accounted for this child in paragraph 30, do not count them in this paragraph. Include in this number all living children who were: (a) born to you or your spouse and later adopted by the other spouse; or (b) adopted by both parties.
- 32. How many living children do you and your spouse have together that were born **before** the date of this marriage?

Include in this number all living children born to you and your spouse before this marriage as a result of sexual intercourse or artificial insemination. You should attach a copy of the birth certificate(s) for these children to your *Petition*.

- 33. A. How many living children were born to you (if you are female) with someone other than your spouse during this marriage? (This number includes children born after the parties separated.)
 Additional information may be required before the court proceeds with your case. (Number of Children)
 - B. How many living children were born to your spouse (if they are female) with someone other than you during this marriage? (This number includes children born after the parties separated.)
 Additional information may be required before the court proceeds with your case.
- 34. Enter the total number of children from lines 30, 31, 32 and 33 A and B.

(Total Number of Children)

MO.GOV

(Number of Children)

(Number of Children)

(Number of Children)

If line 34 is zero, then go directly to Question 47. If line 34 is one or more, you must answer the following questions.

Information about Children

Question 35 (a-j) represents the information for the first child, Question 36 (a-j) represents the information for the second child, and so on. See the chart below for more information.

You must list the children regardless of age even if they are in someone else's custody. You must answer every part of the question.

1 35 (a-j) and 39-47 2 35 (a-j), 36 (a-j), 37 (a-j) and 39-47 3 35 (a-j), 36 (a-j), 37 (a-j), and 39-47 4 35 (a-j), 36 (a-j), 37 (a-j), 38 (a-j), and 39-47 More than 4 35 (a-j), 36 (a-j), 37 (a-j), 38 (a-j), attach additional pages answering all the questions asked in 38 (a-j) each additional child and 39-47	1	Questions you should answer
3 35 (a-j), 36 (a-j), 37 (a-j) and 39-47 4 35 (a-j), 36 (a-j), 37 (a-j), 38 (a-j) and 39-47 More than 4 35 (a-j), 36 (a-j), 37 (a-j), 38 (a-j), attach additional		
4 35 (a-j), 36 (a-j), 37 (a-j), 38 (a-j) and 39-47 More than 4 35 (a-j), 36 (a-j), 37 (a-j), 38 (a-j), attach additional		
More than 4 35 (a-j), 36 (a-j), 37 (a-j), 38 (a-j), attach additional		
pages answering all the questions asked in 38 (a-j) each additional child and 39-47		
each additional child and 39-47		pages answering all the questions asked in 38 (a-j) for
RAME AVAILABLE FOR FREE ASSELFT		each additional child and 39-47
RMIS AVAILABLE FOR FIL		OFF A SELL
RMB AVAILABL	ALE FOR	
RM SAV.	ALABL	
RM	SAN	
RIN		
SC	Sh.	
	dr.	
	\sim	
G		

35. Child One

To b	e answered if the answer to questio	n 34 is one or mo	re		
35a.	What is the full name of this	child?			
	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
35b.	What are the last four numb	ers of this child	's Social Security Numb	er? XXX-XX	
35c.	What is the current address	of this child?			GON
	(Street)				Vo.
	(City)	(State)	(Zip)		
35d.	What is this child's age?				
35e.	Check all of the following bo	xes that apply:		L.	
	☐ This child is married.			£.	
	□ This child is on active dut	y in the military			
	$\hfill\square$ This child is self-supporting	•			
	□ This child is attending hig				
	□ This child is attending col	lege or vocatio	nal school.		
35f.	With whom has this child pri	marily lived dur	ing the previous 60 days	;?	
	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
oog.	 Who should have legal custor who will make the decisions concerned. Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name) 	erning health, educ	ation and welfare for this child	I. §452.375.1(2),	RSMo
25h	Who should have physical a	(First Name)	(Middle Name)	. ,	(Jr./Sr./II)
5511.	 Who should have physical c refers to where this child will reside Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name) 	e and what time th			
35i.	Who are the parents of this				parent of this
6	child by sexual intercourse, adopti	on or artificial insei	mination, please name the oth	ier parent.	
S	 Me (Petitioner) My Spouse (Respondent) 				
	□ Other Person (State nam				
		(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III
35j.	Who are listed as parents or	n this child's bir	th certificate? (Check all	that apply)	
	Me (Petitioner)				
	□ My Spouse (Respondent)				
	□ Other Person (State nam				
		(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III

36. Child Two

To b	e answered if the answer to question	n 34 is two or mor	e		
36a.	What is the full name of this	child?			
	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
36b.	What are the last four number	ers of this child'	s Social Security Numbe	er? XXX-XX-	. \ .
	What is the current address		,		GO
	(Street)				<u> </u>
	(City)	(State)	(Zip)	- 1	
36d.	What is this child's age?				
36e.	 Check all of the following box This child is married. This child is on active duty This child is self-supportin This child is attending high This child is attending coll 	y in the military. Ig. h school.	LP-V		
36f.	With whom has this child prin	marily lived dur	ing the previous 60 days	?	
	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
	Who should have legal custo who will make the decisions conce Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name	rning health, educa			
	0	(First Name)	(Middle Name)	, ,	(Jr./Sr./III
36h.	 Who should have physical curvefers to where this child will reside Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name) 	e and what time thi			
36i.	Who are the parents of this of				a parent of this
<	child by sexual intercourse, adoption	on or artificial inser	nination, please name the oth	er parent.	
, NS	 My Spouse (Respondent) Other Person (State name) 	e) (First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III
36j.	Who are listed as parents on	,	,	. ,	(01.01.01.01.01
	 Me (Petitioner) My Spouse (Respondent) 			- 1- 1- 27	
	□ Other Person (State name		// //	(1.00+ 1)	
		(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III

37. Child Three

	a answered if the answer to question	an 24 in three or m	oro			
	e answered if the answer to question		ore			
37a.	What is the full name of this	child?				
	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
27h	What are the last four numb	ore of this child	's Social So	ourity Numbe		
			S SUCIAI SE		SI (AAA-AA-	
37c.	What is the current address	of this child?				G
	(Street)					NO.
	(City)	(State)		(Zip)	- , , ,	
37d.	What is this child's age?					
37e.	Check all of the following bo	exes that apply:				
	\Box This child is married.					
	\Box This child is on active dut	• •				
	□ This child is self-supportin	•				
	□ This child is attending hig					
07(□ This child is attending col	0			•	
37f.	With whom has this child pri	imarily lived dur	ing the prev	lous 60 days	(
	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
0	 Who should have legal cust who will make the decisions concerns Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name) 	erning health, educ				
		(First Name)		(Middle Name)	(Last Name)	(Jr./Sr./III)
37h.	Who should have physical or refers to where this child will resid Me (Petitioner) My Spouse (Respondent Both Spouses Jointly Other Person (State name	e and what time th	is child spends			
37i.	Who are the parents of this			,	, ,	
	child by sexual intercourse, adopt					,
C	☐ Me (Petitioner)					
2	□ My Spouse (Respondent					
	□ Other Person (State nam	e) (First Name)	=	(Middle Name)	(Last Name)	(Jr./Sr./III)
37j.	Who are listed as parents of	,		, ,		(014 014 11)
- ,	☐ Me (Petitioner)			(· · · · · · · · · · · · · · · · · · ·	
	☐ My Spouse (Respondent)				
	□ Other Person (State nam	e)				
	-	(First Name)	_	(Middle Name)	(Last Name)	(Jr./Sr./III)

38. Child Four

	e answered if the answer to question	n 34 is four or mo	ore			
38a.	What is the full name of this	child?				
	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
38b.	What are the last four number	ers of this child	's Social Se	curity Numbe	r? XXX-XX-	
38c.	What is the current address	of this child?				GON
	(Street)					<u>M0.</u>
	(City)	(State)		(Zip)		*
38d.	What is this child's age?					
38e.	 Check all of the following bo. This child is married. This child is on active duty This child is self-supportin This child is attending high This child is attending coll 	y in the military g. h school.	<i>'</i> .	:LFREP		
38f.	With whom has this child prin	marily lived dur	ring the prev	ious 60 days	?	
	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
-						DO14
-	 who will make the decisions concer Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name) 	40P	ation and welfa	are for this child.	§452.375.1(2),	, RSMo
	 Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name) 	e)		(Middle Name)	(Last Name)	(<u>Jr./Sr./III</u>
38h.	 Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly 	(First Name) (First Name) ustody of this c and what time th	hild? (Chec	(Middle Name) k one of the f	(Last Name) our boxes) Po	(Jr./Sr./III hysical custody 3), RSMo
38h. 38i.	 Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name Who should have physical curefers to where this child will resides Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name Who are the parents of this comparents of this comparents 	(First Name) (First Name) ustody of this c and what time th and what time th (First Name) child? (Check a	hild? (Chec is child spends	(Middle Name) k one of the f with each pare (Middle Name)	(Last Name) Our boxes) Po nt. §452.375.1((Last Name) spouse are not	(Jr./Sr./III hysical custody 3), RSMo (Jr./Sr./III
	 Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name Who should have physical curefers to where this child will reside Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name) 	(First Name) (First Name) ustody of this of and what time the and what time the (First Name) (First Name) child? (Check a on or artificial inse	hild? (Chec is child spends all that apply mination, pleas	(Middle Name) k one of the f with each pare (Middle Name) (Middle Name) If you or your s se name the othe	(Last Name) Our boxes) Po nt. §452.375.1((Last Name) spouse are not er parent.	(Jr./Sr./III hysical custody 3), RSMo (Jr./Sr./III a parent of this
	 Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name Who should have physical curefers to where this child will resides Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name Who are the parents of this of child by sexual intercourse, adoption Me (Petitioner) Me (Petitioner) My Spouse (Respondent) 	(First Name) (First Name) (Stody of this c and what time the (First Name) (First Name) (First Name) (First Name) this child's bir	hild? (Chec is child spends all that apply mination, pleas	(Middle Name) k one of the f with each pare (Middle Name)) If you or your s se name the othe (Middle Name)	(Last Name) Our boxes) Protection (Last Name) (Last Name) Spouse are not for parent.	(Jr./Sr./III hysical custody 3), RSMo (Jr./Sr./III

If you have more than four children, attach additional pages answering all the questions asked in 38 (a-j) for each additional child.

Additional Information about Children

39. List all addresses at which the children have lived during the past five years and the name of the parent or guardian with whom said children lived.

(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
Street)			, NO.
'City)	(State)	(Zip)	
First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
Street)		<u> </u>	
City)	(State)	(Zip)	
First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
Street)			
City)	(State)	(Zip)	
children or claims to of the two boxes) Yes No Do you have inform n a court of this or a Yes No	ation about any other co	ion rights with respect to ustody proceeding concert of the two boxes)	sical custody of any of the any of the children? <i>(Check</i> ming any of the children pe
	ed in other litigation con cone of the two boxes)	cerning the custody of ar	ly of the children in this or a
Have any of the chil] Yes ᄀ No	ldren been a victim of al	buse or neglect? (Check	one of the two boxes)

44. If you answered "Yes" to questions 40, 41, 42 or 43, please explain.

40

41

42

43

45. Have any orders pertaining to any of the children been entered by the Family Support Division? *(Check one of the two boxes)*

Yes, I have attached a copy of the order to this *Petition for Dissolution of Marriage* No

- 46. Are you or your spouse currently receiving Temporary Assistance to Needy Families (TANF) benefits? (Check one of the two boxes)
 - Yes
 - 🗌 No

Other Allegations

47. Are there any other allegations?

If there are any other statements you wish to include in your Petition, you should enter them here.

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

(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
Other (Please state	the other request(s))		
Ď	7		
.9			
210			
<u> </u>			
S			

Directions for Service on Respondent Spouse

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

If you do not know the location of your spouse and you have no way of contacting them, you must attempt to serve your spouse at their last known address or place of employment. Once you make an honest and reasonable effort to personally serve your spouse and are still unable to get service, then you may file a *Request for Service by Publication* asking the court to publish notice of your *Petition* in the local newspaper. The *Request for Service by Publication* is available on the Representing Yourself website at selfrepresent.mo.gov. 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. This option should only be used as a last resort.

Respondent Spouse has signed a verified *Respondent's Answer to Petition for Dissolution of Marriage*, which is being filed with the *Petition for Dissolution of Marriage*. Therefore, do not issue a summons. If you check this box, you must file the *Respondent's Answer to Petition for Dissolution of Marriage* at the same time you file this petition. The *Respondent's Answer to Petition for Dissolution of Marriage* must be signed by your spouse in front of a notary public.

Respondent Spouse should be served with a summons at their home:
 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.

(Street)		19	
(City)	(State)	(Zip)	
Respondent Spouse shou	uld be served with a s	ummons at their pl	lace of employment:
Your spouse must be served v served, you must file another			f you are going to have your spous served on your spouse.
	, ⁶ 7-		
(Employer's Name)			(Hours of Employment)
(Street)	B		
(City)	(State)	(Zip)	
Respondent Spouse can requested. A copy of the Court Rule 54.12(b).			vice by registered mail is to this form. See Missouri Supr
			· -

If you listed children in this *Petition* and either you or your spouse receive Temporary Assistance for Needy Families (TANF) benefits, you must serve the Family Support Division with a copy of your *Petition* and *Parenting Plan*.

Me or my spouse currently receive TANF benefits through the Family Support Division. The Family Support Division shall be served at the following address:

Director, Family Support Division 615 Howerton Court Jefferson City, Missouri 65102

If you request a summons to be served outside of the county where you filed this *Petition*, the court will mail the summons to you. You must then deliver the summons to the sheriff of the county where the summons will be served. You must also pay the appropriate service fee to that sheriff.

Sign Below in the Presence of a Notary Public

.

Your Petition for Dissolution of Marriage is required to be verified in the presence of a notary public by §452.310.1, RSMo.

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, information and belief.

(Sign above in the presence of a Notary Public)	(Print your name above)
The following information must be completed by	a notary public.
STATE OF)) SS	K.M.
COUNTY OF)	CET .
	, 20 , before me personally appeared, to me known to be the person described in and who
executed the foregoing instrument and acknowle and deed.	edged that he/she executed the same as his/her free ac
N WITNESS WHEREOF, I have hereunto set m State aforesaid, the day and year first above writ	ny hand and affixed my official seal in the County and tten.
	, Notary Public
My commission expires:	
Attorney Information	
This information may be completed by your attorney. Do r assistance of an attorney.	not enter any information here if you are filing this case without the
I have assisted Petitioner in the preparation on behalf of Petitioner.	of these pleadings, but I am not entering my appearanc
(Attorney - Sign above)	(Missouri Bar Number)
(Attorney - Print your name above)	
(Street)	
(City) (Stat () ()	te) (Zip)
(Telephone Number with Area Code) (Fax Number with Area Code)	Area Code) (E-mail Address - Optional)