

FORM B

STATE OF INDIANA)
) SS:
COUNTY OF _____)
IN RE THE MARRIAGE OF _____)
and _____)

IN THE _____ COURT
CAUSE NO: _____

PETITION FOR DISSOLUTION OF MARRIAGE

Comes now the petitioner, (__name of petitioner __), and being first duly sworn, respectfully represents to the Court the following:

1. That (he/she) resides at (__street address __), (__city __), Indiana, having resided in _____ County for the past three months and having resided in the State of Indiana for the past six months.
2. That the respondent (__name of respondent __), resides at (__street address __), (__city __), (__state __).
3. That (he/she) is the (husband/wife) of the respondent, having been duly married to (him/her) on (__date of marriage__).
4. That the parties separated on (__date of separation__), having since then lived separately and apart.
5. That (__number of children) (child/children) (was/were) born to the marriage, (give names, ages and addresses), and that none are expected.
6. That the parties (have/have not) acquired property and debts during or as a result of the marriage which need to be divided.
7. That there has been an irretrievable breakdown of the marriage.
8. That (petitioner/respondent) desires to have her former name, (__former name__), restored.

WHEREFORE, the petitioner requests the Court to grant an absolute dissolution of marriage; to award (him/her) custody of (____names of child/children); to grant to the respondent reasonable visitation rights; to order (____name of party paying support____) to pay a reasonable sum for child support; to make an equitable division of the property of the parties; and to restore to (petitioner/respondent) her former name of (____former name____).

Petitioner

Subscribed and sworn to before me, a Notary Public in the County of _____
State of Indiana, on this ____day of _____, 20____.

Notary Public

My Commission Expires:
