PACKET # 2 INSTRUCTIONS

BASIC DIVORCE WITH PROPERTY DIVISION AND/OR ALIMONY REQUEST(S)



Starting A Divorce Action

1. WHAT IS A DIVORCE ACTION?

Divorce is a way to legally end your marriage. A Divorce Action is how you tell the Family Court that you want a divorce, why you want a divorce and if and how you want the Family Court to decide matters regarding your divorce.

2. DO I HAVE TO GO THROUGH THE COURT SYSTEM TO GET A DIVORCE?

Yes. You are not legally divorced until the Family Court issues you a **Divorce Decree** (a **Court Order**).

3. WHO CAN FILE FOR DIVORCE?

If you are legally married **AND** either you or your spouse has resided in Delaware for at least 6 months or has been stationed in Delaware as a member of the military for at least 6 months, you may file for divorce in the Family Court of the State of Delaware.

4. DO MY SPOUSE AND I HAVE TO BE SEPARATED BEFORE I FILE FOR DIVORCE?

Yes, unless you are filing for divorce on the grounds of misconduct (such as physical abuse, psychological abuse, infidelity, abandonment). You must be separated before you file for divorce. In order to be "separated" you and your spouse must not share the same bedroom and you must not have sexual relations, with the exception of reasonable attempts of getting back together. You still can be separated if you live in the same house so long as you do not share the same bedroom or do not have sexual relations with your spouse.

5. How long must I be separated from my spouse before I can have my divorce hearing?

So long as you and your spouse are separated, you may file for Divorce. However, before the Family Court will schedule your Divorce Hearing, Delaware law requires that you and your spouse be separated for at least **6 months**, unless you are requesting a divorce on the grounds of misconduct. If you are requesting a divorce on the grounds of misconduct, then you do not have to be separated for any specified period of time. Within **30 days** of your Divorce Hearing, you and your spouse may **NOT** have sexual relations or occupy the same bedroom.

6. DO I NEED A LAWYER TO GET A DIVORCE?

No. You may have a lawyer represent you but it is not required. However, Family Court strongly suggests that you hire a lawyer because you could lose your home, custody of your children or important rights if the Court rules against you.

7. HOW DO I FILE FOR DIVORCE?

You must file a **Petition for Divorce/Annulment** and other related papers. The **Petition for Divorce/Annulment** is a paper that you file to tell the Family Court that you want a divorce and why and to give the Court information about you, your spouse, your marriage, your separation date and your children (either born or adopted). To find out what you need to do to file for divorce, please review the divorce packet that applies to your situation.

8. WHERE DO I FILE FOR DIVORCE?

You must file for divorce in the County of Delaware in which either you or your spouse lives.

9. DOES MY SPOUSE HAVE TO BE NOTIFIED THAT I AM FILING FOR DIVORCE?

Yes. The U.S. and State Constitutions require that whenever a Petition is filed with the Court, the other person must be notified. For example, if your spouse files for divorce against you, then you must be notified so that you have an opportunity to tell your side of the story, if you so choose. This is called <u>due</u> <u>process</u>. The specific act of notifying your spouse is called **service of process**.

DIVORCE PACKET #2 BASIC DIVORCE WITH PROPERTY DIVISION AND/OR ALIMONY REQUEST(S)



Use Divorce Packet #2 Basic Divorce With Property Division and/or Alimony Request(s) ONLY when:

- > You want a divorce or annulment; AND
- You and your spouse do NOT have children (born or adopted) who are younger than 18 years old; AND
- You DO want the Court to help you divide marital property and/or marital debts; AND/OR
- > You DO want the Court to order your spouse to pay you alimony; AND
- Either you or your spouse has resided (lived) in Delaware for at least 6 months or has been stationed in Delaware as a member of the military for at least 6 months.

Although this packet appears to discuss only what you need to do if you want a divorce, you also should use this packet if you want an annulment.

HOW TO USE THE PACKET

The beginning of this packet contains general information about the divorce process. The remainder of this packet is divided into sections that describe a different step you (Petitioner) must take to file a Divorce or Annulment Action (hereinafter referred to only in the context of divorce). If at a certain step, you must file a Court form, that section will contain instructions on how to complete the Court form and a sample of the completed form. **ONLY FILE THE FORMS IN THE FORMS PACKET**. The forms in this packet are designed only to assist you in completing the forms in the **FORMS PACKET**.

YOU DO NOT HAVE TO COMPLETE ALL THE SECTIONS AT ONCE. For example, you do not have to file the forms in Section 2 at the same time as the forms in Section 1. Read the information carefully to make sure you know what you are supposed to do and when.

Please look for the **shaded** written instructions and the following symbols throughout this packet. They will help guide you.

READ THIS SECTION CAREFULLY



- オ THIS DOCUMENT MUST BE FILED
- FILL IN THE BLANKS OR PROVIDE INFORMATION HERE

YOU DO NOT HAVE TO TAKE THESE STEPS IMMEDIATELY.

- Furthermore, instructions and samples of "certificates" and "licenses" are not included in this packet.
- When you see "(sample only)" next to the name of a form, only a sample of that form is included in the packet.
- If you must file both the original form AND a copy of the original form, you will see next to the name of the form "(*file original and one copy*)."
- Once again, review the instructions and sample forms carefully before completing each form you must file.

TIPS AND REMINDERS

- Make sure to read any FAQ's on Divorce Actions. These will give you information you need to properly file the Divorce Action and to better understand the process.
- Remember, just because you properly complete the forms does not necessarily mean that the Court will give you (grant) what you want. It is up to you at the Court Hearing to prove why the Court should give you (grant) what you want.
- Representing yourself may take a lot of time, may be difficult, and may be confusing. The Court will expect you to follow the same rules that attorneys must follow. If at any point in the divorce process you are not sure about representing yourself, you should talk to an attorney.
- Please remember that COURT STAFF CANNOT GIVE YOU LEGAL ADVICE. Should you have a question as to what options you have or what you should do, you should talk to an attorney. Just because you talk to an attorney does not necessarily mean that you must hire that attorney to represent you. Ask the attorney if the attorney is willing to meet with you and answer your questions without having to hire such attorney for full representation. Also ask before meeting with the attorney what fees may be involved for such limited service.
- Bring your photo identification with you (such as your driver's license or state issued photo identification card) whenever you get a Court form notarized.

✓ THERE IS A LOT OF PAPER IN A COURT CASE AND HAVING THE COURT MAKE YOU COPIES CAN BE VERY EXPENSIVE.

PLEASE READ AND REMEMBER THESE IMPORTANT TIPS

REMEMBER

- > Keep a copy of every document and Court paper.
- Keep all notes, documents, Court papers, etc. together and organized in a folder with the most recent papers on top.
- > Bring the folder with your papers with you every time you go to Court.
- When you file a document with the Court, bring an extra copy with you and ask to have the extra copy "clocked in." Keep the clocked in copy <u>in your folder</u> so you have proof of the time and date you filed each document.
- When you complete a document or form for filing with the Court, always include the full case name and docket number (if there is one).
- When you must mail something, we suggest you mail (on the same day) the document(s) 2 different ways: (1) U.S. mail; AND (2) "certified mail, return receipt requested" so that you have proof that the other party received the envelope. If you cannot afford to pay for "certified mail" we suggest you get a "certificate of mailing" at the post office to prove that you mailed the envelope to the other party.



REMEMBER, ONLY FILE THE FORMS <u>IN THE FORMS PACKET</u>. The instruction and sample forms in this section are designed only to assist you in completing the forms in the Forms Packet.

THE DIVORCE/ANNULMENT PROCESS



http://courts.state.de.us/family

Section 1

STARTING THE DIVORCE

Instructions on how to complete the Section 1 forms and samples of the Section 1 forms are at the end of this Section.

• You MUST file ALL the forms below when you file the Petition for Divorce/Annulment:

- Petition for Divorce/Annulment form (file original and one copy).
- **Information Statement form** (sample only).
- Division of Public Health/Vital Statistics form (sample only). You can get this form at the Family Court.
- A <u>Certified Copy</u> of your Marriage License (file original and one copy).

If you were married in Delaware, you can get a <u>certified copy</u> of your Marriage License at the Clerk of the Peace of the county in which you got married. However, if you were married in Kent County, you must go to the Division of Public Health and Vital Statistics in Dover.

Request for Notice form.

If you do not know your spouse's address (home, work, or otherwise,) you must ask to meet with someone in the Family Court Intake Unit. Ask the person who works in Intake for an Affidavit that a Party's Address is Unknown form.

If you do not know where your spouse lives or your spouse does not live in Delaware, you must ask the Court on this form to publish **AT YOUR EXPENSE** notice that you are filing this action.

BELOW ARE OPTIONAL FORMS

ONLY file the following forms if you and your spouse have agreed on the terms of your divorce and you want the Court to be able to have the power to make you and your spouse follow your agreement ("enforce the Separation Agreement"):

Original Separation Agreement (*file original and one copy*).

The Separation Agreement is NOT a Court form and is NOT included in the Divorce Packet. You must write down how you and your spouse are dividing your marital property and/or marital debts and any other agreements (such as custody, visitation, child support, alimony etc.) that you and your spouse have regarding your divorce. On the top of the paper, write the case name, file number and petition number (if there is one). Title the paper "Separation Agreement." Make sure you AND your spouse sign the Separation Agreement and that each signature is notarized. When you file this document, you ALSO MUST file a Stipulation to Incorporate the Separation Agreement.

Stipulation to Incorporate the Separation Agreement form (*file original and one copy*).

Make sure you AND your spouse sign the Stipulation to Incorporate the Separation Agreement form and that each signature is notarized. When you file this form, you ALSO MUST file your Separation Agreement.

You may file a Separation Agreement and the Stipulation to Incorporate the Separation Agreement AT ANY TIME until the day of your Property Division/Alimony Hearing. However, if you check the "Incorporate our Separation Agreement" box on the Petition for Divorce/Annulment, you MUST file the Separation Agreement and the Stipulation to Incorporate the Separation Agreement WITH your Petition for Divorce/Annulment.



Additional Instructions for Section 1

(If your spouse IS in the military, you either must have your spouse sign a Waiver of Rights under the Soldiers and Sailors Civil Relief Act of 1940 or you must file a Motion to Appoint an Attorney. You should start this process as early as possible because it takes time. The Court will not schedule your Divorce Hearing until you complete this process.

Your spouse has <u>20 days</u> from the date of service (date of delivery of the Court papers) to respond to your Petition for Divorce/Annulment. Your spouse may file an Answer to your Petition for Divorce/Annulment on which your spouse may admit or deny any of the statements you made in your Petition for Divorce/Annulment. On the Answer, your spouse may counterclaim for divorce or annulment and/or may request that the Court determine matters of custody, visitation, child support, division of marital property/marital debts, alimony, attorney fees and/or court costs.

If your spouse on the **Answer** does add a **counterclaim** you will have <u>20 days</u> from the date of service to file with the Court a response to the counterclaim and mail a copy of the **Answer** to your spouse.

Instead of filing an Answer your spouse may file an Affidavit of Appearance and Waiver of Rights form on which your spouse will your spouse will give up the right to file an Answer.

THE COURT CANNOT CONSIDER WHETHER OR NOT TO GRANT YOUR PETITION FOR DIVORCE AT THE HEARING IF WITHIN <u>30 DAYS</u> OF THE DIVORCE HEARING, YOU AND YOUR SPOUSE HAVE OCCUPIED THE SAME BEDROOM OR HAVE HAD SEXUAL RELATIONS. If you and your spouse have had sexual relations or occupied the same bedroom within <u>30 days</u> of your Divorce Hearing, please notify the Court as soon as possible so that the Court either can reschedule your Hearing or, if you prefer, can dismiss your Petition for Divorce/Annulment.

SECTION 2 BEGINS AFTER INSTRUCTIONS AND SAMPLES OF THE SECTION 1 FORMS.



TAKE A DEEP BREATH, YOU <u>DO NOT</u> HAVE TO BEGIN SECTION 2 UNTIL THE MORNING OF YOUR DIVORCE HEARING.

Form 442 (Rev. 10/00)
FIILM

The Family Court of the State of Delaware In and For New Castle Kent Sussex County (Check the County in which you are filing this Petition)

	ne Marri ner (Yo		:	v. Respondent (Yo	ur chouse)	Court Use Only:
Name		JU)		Name		File Number
Street Addre	ess /			Street Address		(Leave Blank)
Apt. or P.O.	Box Numbe	r		Apt of P.O. Box Number		
City	_/		State Zip Code	City	State Zip Code	e Petition Number
	/		Date of Birth		Date of Birth	
Social Secur	-			Social Security Number		(Leave Blank)
Attorney Nar	me and Pho	ne Numbe	ſ	Attorney Name and Phone N	umber	
			PETITI	ION FOR DIVORCE	CANNULMENT	
Ø			<u>- E111</u>	GENERAL INF		
		Ð				
	1.		-	Place of	-	
		<u>City</u>	:	County:	State:	
	2.	Date	of separation:			
	3.	You	r occupation/job title:	:		
	4.	You	r spouse's occupatior	n/job title:		
	5.	How	long you have lived	in Delaware:		
	6.	How	long your spouse ha	s lived in Delaware:		
	7.	At w	vhat address is your s	pouse most likely to re	eceive mail? (<i>Check</i> (ONE)
Ø			My spouse's home	address as described a	bove.	
			My spouse receives described above:	s mail at the following treet Address	address that is differ	ent from the address
			Apt. or P.O. Box Number	City	State	Zip Code
			spouse receives ma	t-of-state or after a real il. It is unlikely that erved by mail and/or p Del. C. § 1508.	my spouse can be per	rsonally served. My
			before filing this Pe	ign citizen and/or has tition. The Embassy a sided is :	ddress of the country	
			Street Address			iite Number (if any)
			City	Sta	te Zi	p Code
						·

9.

8. Check and complete ALL that apply for the following:

Wife **IS** currently pregnant.

Wife is **NOT** currently pregnant.

We have children of the marriage (born or adopted) who either are younger than 18 years old or are 18 years old and still in high school. (*If you check this box, list the children below. Attach additional sheets if necessary.*)

NAME OF CHILD (First, Middle, Last)	DATE OF BIRTH (Month, Day, Year)	ADDRESS OF CHILD (Street Address, City, State, Zip Code)
u n	-	if you have children r 18 years old and

Check ONE and complete as directed.

I have not brought an action for divorce or annulment in any court against this spouse **AND** to the best of my knowledge, information and belief, my spouse has not brought an action for divorce or annulment against me in any court.

Either my spouse or I have filed for divorce or annulment against the other before the date of filing this Petition. *If you check this box, complete the below. Attach additional sheets if necessary.*

TYPE OF ACTION (divorce or annulment)	PERSON who filed the action	STATE the action was filed	COUNTY the action was filed	COURT the action was filed	DATE the action was filed	RESULT of the action
		your your	spouse previ	ion ONLY if iously filed a ce or annulme	against	



I got married to my spouse because my spouse or another person exercised duress over me **OR** another person exercised duress over my spouse. (For example, I was forced to get married to my spouse because my life was threatened if I did not marry my spouse.)

We got married because of a jest or a dare.

AND/OR

It has been exactly one year (365 days) or less since:

- I learned that the marriage could not be consummated because of the physical inability to have sexual intercourse and at the time we got married I did not know of the physical inability.
 - We have gotten married and/or my spouse was underage and we did not have the consent of his/her parents or guardian or of the Court to enter into the marriage.

III. RELIEF REQUESTED (What you want the Court to do)



(YOU <u>MUST</u> COMPLETE THIS SECTION WHETHER YOU WANT A DIVORCE OR AN ANNULMENT)

- 1. I ask that the Family Court:
 - A. Issue Summons directed to my spouse requiring my spouse to answer the Petition for Divorce/Annulment.
 - B. Enter an Order (Decree) for Divorce/Annulment, thereby divorcing Petitioner (me) and Respondent (my spouse) from the bonds of matrimony or annulling the marriage.

2. I also ask that the Family Court decide all the matters checked below. (Check what you want the Family Court to decide or to order. Some of the matters require an additional filing fee. At the Court Hearing, you must prove each reason that you check. If you do NOT want the Court to decide any of the below matters, do NOT check any of the boxes.)

Property Division (divide our marital property and/or debts)	Custody (custody of children)
Visitation (visitation of children)	Child Support (have my spouse pay me for the support of our children)
Temporary Alimony (have my spouse pay me alimony until the divorce is final)	 Court Costs (have my spouse pay me for my court costs for this action)

 Permanent Alimony
 (have my spouse pay me alimony after the divorce is final) Counsel fees

(have my spouse pay me for my attorney fees for this action)

____ Change my name to ______ (must be maiden or former name – **only wife may make this request**)

Incorporate our Separation Agreement

(enforce your Separation Agreement)

(If you want the Family Court to enforce your Separation Agreement, you **MUST** attach the <u>original</u> Separation Agreement signed by both parties and notarized **AND** the <u>original</u> Stipulation to Incorporate the Separation Agreement that also is signed by both parties and notarized).



Sign here

Petitioner (person filing the Petition for Divorce/Annulment) or Petitioner's Attorney



VERIFICATION

)

STATE OF DELAWARE

SS.

(To be completed by Notary Public) COUNTY)

BE IT REMEMBERED, that on this date **(To be completed by Notary Public)**, personally appeared before me, a Notary Public for the State and County aforesaid, **(To be completed by Notary Public)** who, being duly sworn by me did depose and say that he/she is the PETITIONER in the above captioned action and that all of the facts set forth in the Petition for Divorce/Annulment are true and correct to the best of his/her knowledge and belief.



DO NOT SIGN YOUR NAME

UNTIL YOU ARE IN FRONT OF A NOTARY PUBLIC

Petitioner (person filing the Petition form Divorce/Annulment)

SWORN TO AND SUBSCRIBED before me on aforesaid date,

(To be signed by Notary Public)

Notary Public or Clerk of Court

Form 442 (Rev. 10/00)
IFIILM	

The Family Court of the State of Delaware In and For New Castle County Kent Sussex County

oner			v. Respondent		Court Use Onl
onath	an T	. Smith	Name Jane L. Sm	ith	File Number
Address			Street Address		
99 Oa P.O. Box Num	k St	reet	Apt. or P.O. Box Number	reet	
partn	nent	2A State Zip Code	P.O. Box No	State Zip Cod	e Petition Number
lewarl		DE 12333	Wilmington	DE 123	
Security Numbe 11-22-		Date of Birth 2/11/66	Social Security Number	Date of Birth 3/10/6	6
ey Name and Ph			Attorney Name and Phone Numb		-
		DETITION			I [
			FOR DIVORCE/A		
1	Dete		NERAL INFORMA		
1.		e of marriage: June : Wilmington	e 1, 1999 Place of ma County: New Cast		
2					
2.	Date	e of separation: Ja	<u>nuary 5, 20</u>		
3.	You	r occupation/job title:	Shipping S	Supervis	or
4.	You	r spouse's occupation/j	ob title: Re	cords Cle	erk
5.	Ноч	long you have lived in	Delaware: 18	VAARS	
5.	110%	iong you have nived in		years	
6.	How	long your spouse has l	ived in Delaware:	15 years	
7.	At w	what address is your spo	use most likely to receiv	ve mail? (Check C	DNE)
	\square	My spouse's home ad	dress as described above	e.	
		•	nail at the following add		ent from the address
		• •	et Address		
		Apt. or P.O. Box Number	City	State	Zip Code
		My spouse lives out-	of-state or after a reason	hable search. I do	not know where my
		spouse receives mail.	It is unlikely that my	spouse can be per	sonally served. My
		-	red by mail and/or public	ication of notice A	AT MY EXPENSE,
		as provided by 13 Del	<u>. C.</u> § 1508.		

My spouse is a foreign citizen and/or has resided in a foreign country within 2 years before filing this Petition. The Embassy address of the country in which my spouse is a citizen or has resided is :______

Street Address		Suite Number (if any)
City	State	Zip Code

8. Check and complete **ALL** that apply for the following:

Wife **IS** currently pregnant.

1 X I	
\sim	

Wife is **NOT** currently pregnant.

We have children of the marriage (born or adopted) who either are younger than 18 years old or are 18 years old and still in high school. (*If you check this box, list the children below. Attach additional sheets if necessary.*)

NAME OF CHILD(REN) (First, Middle, Last)	DATE OF BIRTH	ADDRESS OF CHILD(REN) (Street Address, City, State, Zip Code)
	(Month, Day, Year)	

9. (Check **ONE** and complete as directed)

I have not brought an action for divorce or annulment in any court against this spouse **AND** to the best of my knowledge, information and belief, my spouse has not brought an action for divorce or annulment against me in any court.

Either my spouse or I have filed for divorce or annulment against the other before the date of filing this Petition. *If you check this box, complete the below. Attach additional sheets if necessary.*

TYPE OF ACTION (divorce or annulment)	PERSON who filed the action	COUNTY the action was filed	COURT the action was filed	DATE the action was filed	RESULT of the action

II. DIVORCE (Check here if you want a divorce)

(And complete this section.)

1. ALL of the following must be true before the Family Court will consider your Petition for Divorce. Check BOTH statements below to acknowledge that they are true:

MY MARRIAGE IS IRRETRIEVABLY BROKEN. (Our relationship as husband and wife is destroyed.)

RECONCILIATION (GETTING BACK TOGETHER) WITH MY SPOUSE IS NOT PROBABLE.

- 2. I want a divorce and we have separated because of: (*Check ALL that apply*) (At the Court Hearing, you must prove each reason you check.)
 - Incompatibility between the parties (*Because we cannot get along as husband and wife, our marital relationship is destroyed and we separated.*)
 - Misconduct of my spouse (physical abuse, psychological abuse, infidelity, abandonment, etc.)



Voluntary separation (Both my spouse and I have agreed to separate and to end the marriage.)

III. ANNULMENT (Check here if you want an annulment)

(And complete this section.)

You only may ask for an annulment if at least one of the below statements is true. At the Court Hearing, you must prove each reason you check. (Asking for an annulment is like asking the Court to declare that your marriage never happened.) If none of the below applies, you should meet with an attorney before asking the Court for an annulment.

I want an annulment because of the following reasons: (Check ALL that apply)

It has been less than 91 days since I learned that:

- My spouse did not have the legal capacity to agree to the marriage (the ability to understand at the time of the wedding that we were getting married and the legal effect of the wedding) because of mental incapacity, alcohol, drugs or other incapacitating substances.
- I got married to my spouse as a result of a fraudulent act or misrepresentation by my spouse **AND** such fraudulent act or misrepresentation goes to the essence of the marriage. (For example, my spouse promised me that he/she was single and after we got married, I learned my spouse never got divorced from his/her previous spouse. It has been less than 91 days since I learned of this misrepresentation.)

 $[\]boxtimes$

 $[\]square$

I got married to my spouse because my spouse or another person exercised duress over me **OR** another person exercised duress over my spouse. (For example, I was forced to get married to my spouse because my life was threatened if I did not marry my spouse.)

We got married because of a jest or a dare.

AND/OR

It has been exactly one year (365 days) or less since:

- I learned that the marriage could not be consummated because of the physical inability to have sexual intercourse and at the time we got married I did not know of the physical inability.
 - We have gotten married and/or my spouse was underage and we did not have the consent of his/her parents or guardian or of the Court to enter into the marriage.

III. RELIEF REQUESTED (What you want the Court to do)

(YOU <u>MUST</u> COMPLETE THIS SECTION WHETHER YOU WANT A DIVORCE OR AN ANNULMENT)

1. I ask that the Family Court:

- A. Issue Summons directed to my spouse requiring my spouse to answer the Petition for Divorce/Annulment.
- B. Enter an Order (Decree) for Divorce/Annulment, thereby divorcing Petitioner (me) and Respondent (my spouse) from the bonds of matrimony or annulling the marriage.

2. I also ask that the Family Court decide all the matters checked below. (*Check what you want the Family Court to decide or to order. Some of the matters require an additional filing fee. At the Court Hearing, you must prove each reason that you check. If you do NOT want the Court to decide any of the below matters, do NOT check any of the boxes.*)

\square	Property Division (divide our marital property and/or debts)	Custody (custody of children)
	Visitation (visitation of children)	Child Support (have my spouse pay me for the support of our children)
	Temporary Alimony (have my spouse pay me alimony until the divorce is final)	 Court Costs (have my spouse pay me for my court costs for this action)



Counsel fees

(have my spouse pay me for my attorney fees for this action)

 Incorporate our Separation Agreement (enforce your Separation Agreement)
 (If you want the Family Court to enforce your Separation Agreement, you MUST attach the original Separation Agreement signed by both parties and notarized AND the original Stipulation to Incorporate the Separation Agreement that also is signed by both parties and notarized).

Sign here <u>Jonathan T. Smith</u>

Petitioner (person filing this Petition) or Petitioner's Attorney

The verification section below is to be completed by and signed in the presence of a Notary Public or Clerk of Court.

VERIFICATION

STATE OF DELAWARE)) SS. New Castle COUNTY)

BE IT REMEMBERED, that on this date <u>August 1, 2000</u>, personally appeared before me, a Notary Public for the State and County aforesaid, <u>Jonathan T. Smith</u> who, being duly sworn by me did depose and say that he/she is the PETITIONER in the above captioned action and that all of the facts set forth in the Petition for Divorce/Annulment are true and correct to the best of his/her knowledge and belief.

Jonathan T. Smith

Petitioner (person filing the Petition for Divorce/Annulment)

SWORN TO AND SUBSCRIBED before me on aforesaid date,



Notary Public or Clerk of Court

D. Employer & Work Address: <u>Acme Steele, Inc. 800 Green Street, Wilmington, DE 19801</u> Hours/Shift: <u>8:00 a.m. – 5:00 p.m.</u> E. Social Security No.: <u>111-22-3333</u> F. Date of Birth. <u>2/11/66</u> G. Description: Sex: <u>M</u> Race: <u>White</u> Height: <u>5'11''</u> Weight: <u>200 lbs</u> Hair: <u>Drk Brwn</u> Eyes Marks/Scars/Tattoos: <u>None</u> H. Type of Vehicle operated by you : <u>98 Toyota Avalon</u> I. License No: <u>DE45098</u> J. Your relationship to the Defendant/Respondent: <u>Sponse</u> K. Attorney: <u>None</u> Please fill in L to V pertaining to the Defendant/Respondent. (Person who did not file Petition for Divorce/Am L. Defendant/Respondent is a: (Check One) <u>ADULT</u> JUVENILE M. Name: <u>Jane L. Smith</u> N. Address: <u>123 Pine Street, P.O. Box 1234</u> Wilmington, DE 12345 O. Phone: Home: <u>(302) 555-1234</u> Work: <u>(302) 555-2222</u> P. Employer and Work Address: <u>ABC Corporation</u>	Name: Jonathan T. Smith Address: 999 Oak Street. Apartment #2A Newark, DE 22233 Phone: Home: [302) 555-111 Work: [302) 555-9999 Employer & Work Address: Acme Steele, Inc. 800 Green Street, Wilmington, DE 1980] Hours/Shift: 8:00 a.m 5:00 p.m. Social Security No.: 11-22-3333 F. Date of Birth. 2/11/66 Description: Sex: M Race: White Height: 5'11" Weight: 200 lbs Hair: Drk Brwn Eyes: Brown Attorney: None Security Rome None None None None None None None Non		Date: File No. :
B. Address: 999 Oak Street, Apartment #2A Newark, DE 22233 C. Phone: Home: [302) 555-1111 Work: [302) 555-9999 D. Employer & Work Address: Acme Steele, Inc. 800 Green Street, Wilmington, DE 19801 Hours/Shift: 8:00 a.m. – 5:00 p.m. E. Social Security No.: 111-22-3333 F. Date of Birth 2/11/66 G. Description: Sex: M_ Race: White_ Height: 5'11'' Weight: 200 lbs_ Hair: Drk Brwn_ Eyes Marks/Scars/Tattoos: _None H. Type of Vehicle operated by you : 98 Toyota Avalon I. License No:	Address: 999 Oak Street, Apartment #2A Newark, DE 22233 Phone: Home: (302) 555-1111 Work: (302) 555-9999 Employer & Work Address: Acme Steele, Inc. 800 Green Street, Wilmington, DE 19801 Hours/Shift: 8:00 a.m 5:00 p.m. Social Security No:: 111-22-3333 Description: Sex: M Race: White Height: 5'11" Weight: 200 lbs Hair: Drk Brwn Eyes: Brown Marks/Scars/Tattoos: None Type of Vehicle operated by you : 98 Toyota Avalon	Please fill in A to K p	ertaining to you the Applicant (Petitioner). (Person filing petition for Divorce/Annulment)
Newark, DE 22233 C. Phone: Home: (302) 555-1111 Work: (302) 555-9999 D. Employer & Work Address: Acme Steele, Inc. 800 Green Street, Wilmington, DE 19801	Newark, DE 22233 Phone: Home: [302) 555-1111 Work: [302) 555-9999 Employer & Work Address: Acme Steele, Inc. 800 Green Street, Wilmington, DE 19801 Hours/Shift: 8:00 a.m 5:00 p.m. Social Security No.: [11-22-3333] F. Date of Birth2/11/66 Description: Sex: M_ Race: White_ Height: 5'11" Weight: 200 lbs_ Hair: Drk Brwn_ Eyes: Brown Marks/Scars/Tattoos: None Type of Vehicle operated by you : 98 Tovota Avalon	A. Name: Jonathan '	T. Smith
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Wilmington, DE 19801	Social Security No.: _111-23-4567 R. Date of Birth: _3/10/66 Description: Sex: _M Race: _White Height: _5'11" Weight: 200 lbs Hair: _Brown Eyes: Blue	M. Name: <u>Jane L. Sn</u> N. Address: <u>123 Pine</u> <u>Wilmingt</u> O. Phone: Home: <u>(30</u> 2	nith Street, P.O. Box 1234 ton, DE 12345 2) 555-1234 Work: (302) 555-2222 Address: ABC Corporation
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	Drivers License No : DF72405 II Type of vehicle operated by Defendant/Respondent 06 Plymouth Voyager	M. Name: Jane L. Sn N. Address: 123 Pine Wilmingt O. Phone: Home: (302 P. Employer and Work Hours/Shift: 8 Q. Social Security No.: S. Description: Sex: N	nith Street, P.O. Box 1234 ton, DE 12345 2) 555-1234 Work:(302) 555-2222 : Address:ABC Corporation 900 Main Street Wilmington, DE 19801 8:30 a.m 4:30 p.m. :111-23-4567 R. Date of Birth:3/10/66 MRace:WhiteHeight:5'11''Weight: 200 lbsHair:Brown_Eyes: Blue
T Drivers License No.: DE72495 U. Type of vehicle operated by Defendant/Respondent 96 Plymouth	The state of the second of the	M. Name: Jane L. Sn N. Address: 123 Pine Wilmingt O. Phone: Home: (302 P. Employer and Work Hours/Shift: 8 Q. Social Security No.: S. Description: Sex: N Marks/Scars/Tattoos	nith Street, P.O. Box 1234 ton, DE 12345 2) 555-1234 Work:
T. Drivers License No.:U. Type of vehicle operated by Defendant/Respondent	Difference into it DET2475 0. Type of vehicle operated by Defendant/Respondent Induction voyage	M. Name: Jane L. Sn N. Address: 123 Pine Wilmingt O. Phone: Home: (302 P. Employer and Work Hours/Shift: 8 Q. Social Security No.: S. Description: Sex: Narks/Scars/Tattoos	nith Street, P.O. Box 1234 ton, DE 12345 2) 555-1234 Work: (302) 555-2222 : ABC Corporation 900 Main Street Wilmington, DE 19801 3:30 a.m 4:30 p.m. : 111-23-4567 R. Date of Birth: 3/10/66 M Race: White Height: 5'11" Weight: 200 lbs Hair: Brown Eyes: Blue

Children (Custody/Visitation/Support)

Name	Relationsh	nip			Birthdate
			-	-	
				/	/
				/	/
				/	/
				/	/
				/	/
I	DIRECTIONS TO RESP	ONDENT'S RE	ESIDENCE		
VRITE DIRECTIONS TO YOUR SPO	OUSE'S (WHERE YOUR	SPOUSE LIVES) FROM THE	E FAMILY COU	U RT
Please fill in AA to JJ pertaining to	any additional Deepen	donta (Forman	o normondon	ta ugo addition	al aboota)
riease ini ni AA to jj pertaining to	any additional Respond	uents. (For more	e responden	is use addition	ial sheets)
AA. Defendant/Respondent is a: (Che	ck One)	ADULT	JUVEN	ILE	
3B. Name:					
CC. Address:					
DD. Phone: Home:	Work:				
EE. Employer and Work Address:					
Hours/Shift					
F. Social Security No:					
III. Description: Sex: Race					
Marks/Scars/Tattoos:					
I. Drivers License No.: J. Parents Name (if a juvenile):	T. Type of vehicle of	perated by Defer	ndant/Respon	dent	

Form 400 (Rev. 10/00)

A.

The Family Court of the State of Delaware

In and For New Castle Kent Sussex County (Check the Conty in which you are filing the Petition)

In re the Marriage of:		
Petitioner (You)	v. Respondent (Your spouse)	Court Use Only:
	Name	File Number
Street Address	Street Address	(Leave Blank)
Apt. or P.O. Box Number	Apt. or P.O. Box Number	
City State Zip Code	City State Zip Code	Petition Number
Social Sedurity Number Date of Birth	Social Security Number Date of Birth	(Leave Blank)
Attorney Name and Phone Number	Attorney Name and Phone Number	
	FOLIEST FOD NOTICE	

REQUEST FOR NOTICE

Did your spouse notify you that he/she will pick up a copy of the Petition for Divorce/Annulment at the Family Court?

> If NO, complete Section A and the bottom of the page. If YES, complete Section B and the bottom of the page

TO: **Clerk of Court – Divorce**

PLEASE ISSUE SUMMONS. (Check ONE)

Service of a copy of the Summons and Petition shall be effected upon Respondent (my spouse) by delivering copies thereof to Respondent (my spouse) personally.

My spouse does not live in Delaware **OR** after a reasonable search, I do not know where my spouse lives or receives mail. It is unlikely that my spouse can be personally served. Therefore, please send a copy of the Summons and Petition by certified or registered mail AT MY EXPENSE to Respondent (my spouse) at the address specified in the Petition and publish notice as provided in 13 Del. C. §1508 in the following newspaper in the County where I am filing this action: Name of Newspaper:

Address of Newspaper:			
Contact Name:	Phone No.:	Fax No.:	

B. PLEASE WITHHOLD ISSUANCE OF SUMMONS. (Check below)

Respondent (my spouse) has notified me that he/she or his/her attorney will appear in your office at the Family Court to receive a copy of the Petition and will sign an Appearance document. Should Respondent (my spouse) or Respondent's attorney fail to so appear, you will receive further direction.



Sign here

Petitioner (person filing the Petition) or Petitioner's Attorney

The Family Court of the State of Delaware

In and For \square New Castle \square Kent \square Sussex County

In re the Marriage of:							
Petitioner		•	v. Responde	ent			Court Use Only:
Name			Name				File Number
Jonathan T. S Street Address	mith		Jane Street Address	e L. Smith	1		
999 Oak Stree	et		123 Apt. or P.O. Box	Pine Stre	et		
Apartment 2A			P.O.	Box No. 1	234		
City	State	Zip Code	City		State	Zip Code	Petition Number
Newark	DE	12333	Wiln	nington	DE	12345	
Social Security Number	Date	of Birth	Social Security	Number	Date	of Birth	
111-22-3333 Attorney Name and Phone Number	2/	11/66		23-4567	3/	10/66	
			Anomey Name	and Phone Number			

REQUEST FOR NOTICE

Did your spouse notify you that he/she will pick up a copy of the Petition for Divorce/Annulment at the Family Court?

If NO, complete Section A and the bottom of the page. If YES, complete Section B and the bottom of the page

TO: Clerk of Court – Divorce

A. PLEASE ISSUE SUMMONS. (Check ONE)

Service of a copy of the Summons and Petition shall be effected upon Respondent (my spouse) by delivering copies thereof to Respondent (my spouse) personally.

My spouse does not live in Delaware **OR** after a reasonable search, I do not know where my spouse lives or receives mail. It is unlikely that my spouse can be personally served. Therefore, please send a copy of the Summons and Petition by certified or registered mail **AT MY EXPENSE** to Respondent (my spouse) at the address specified in the Petition and publish notice as provided in 13 <u>Del. C.</u> §1508 in the following newspaper in the County where I am filing this action: Name of Newspaper:

Address of Newspaper:		
Contact Name:	Phone No.:	Fax No.:

B. PLEASE WITHHOLD ISSUANCE OF SUMMONS. (Check below)

Respondent (my spouse) has notified me that he/she or his/her attorney will appear in your office at the Family Court to receive a copy of the Petition and will sign an Appearance document. Should Respondent (my spouse) or Respondent's attorney fail to so appear, you will receive further direction.

Date: August 1, 2000

Jonathan T.Smith

Petitioner (person filing the Petition) or Petitioner's Attorney

Form 443 (Rev. 10/00)



The Family Court of the State of Delaware

In and For New Castle Kent Sussex County

Jonathan T. Smith)	
Petitioner,)	
)	File
V.)	
)	Peti
Jane L. Smith)	
Respondent.)	

File No.: **CN00-99999**

Petition No.: 00-99999

STIPULATION TO INCORPORATE THE SEPARATION AGREEMENT

IT IS HEREBY STIPULATED and agreed by and between the Parties that the attached Separation Agreement, signed by both Parties on this date **July 18, 2000**, be incorporated into the Final Decree of Divorce.

Jonathan	T.	Smith	

Petitioner

Date: 7/19/2000

Jane L. Smith

Respondent

Date: 7/22/2000

Sworn to and subscribed before me this date, 7/19/2000



Notary Public

Sworn to and subscribed before me this date, 7/22/00

Sean Clark

Notary Public

IT IS SO ORDERED this date, _____.

Judge

Section 2

DATE OF YOUR DIVORCE HEARING

Complete the form below on the day of your Divorce Hearing and bring it to the Hearing. If your spouse IS in the military, do NOT complete this form.

 $\overline{7}$

Affidavit of Non-Military Service. (*This form must be notarized*.) (Instructions and sample are on next pages).

If your divorce is granted, your divorce will be final on the <u>day the</u> <u>Judge signs</u> the Divorce Decree (Order) which may not necessarily be the same day as your Divorce Hearing or the day a Special Master signs the Order. A Special Master's signature is a recommendation to the Judge to sign the Divorce Decree.

SECTION 3 BEGINS AFTER INSTRUCTIONS AND SAMPLE OF THE SECTION 2 FORM.



TAKE A DEEP BREATH, YOU SHOULD BEGIN SECTION 3 <u>IMMEDIATELY</u> AFTER YOUR DIVORCE HEARING.

Rev. 10/90 The Family	Court of the State of I	Delaware
FILM In and For	r 🗌 New Castle 🗌 Kent 🗌 Sussex Coun	ntv
(Check the county in	which you filed the Petition for Divorce	e/Annulment)
In re the Marriage of:		
Petitioner (You)	v. Respondent (Your Spouse)	
Name	Name	File Number
Street Address	Street Address	(Get number from
		Hearing Notice)
Apt. or P.O. Box Number	Apt. or P.O. Box Number	
City State Zip Code	City State Zip C	
Social Security Number Date of Birth	Social Security Number Date of Birth	(Get number from
		Hearing Notice)
Attorney Name and Phone Number	Attorney Name and Phone Number	
IN OP	to be completed by and signed in the pr	
Notary Public/Clei	rk of Court on the day of your Divorce l	Hearing.
AFFIDA	VIT OF NON-MILITARY SERVICE	
STATE OF DELAWARE)) SS.	You must bring this form to the Divorce Hearing.
(To be completed by Notary Publi	COUNTY) 2.	This form must be signed and notarized on the day of the Divorce Hearing.

BE IT REMEMBERED, that on this date (To be completed by Notary Public), personally

appeared before me, a Notary Public for the State of Delaware in the County declared above,

(To be completed by Notary Public) _____, ("Affiant"), who, being duly sworn by me according to law, did depose and say:

- 1. That Affiant is the Petitioner in the Petition for Divorce;
- 2. That Respondent is not in the military service of the United States of America; and
- That Affiant has made this Affidavit pursuant to the provisions of § 200 of the Act of Congress entitled "Soldiers and Sailors Civil Relief Act of 1940" (50 U.S.C.A. App. 520) approved October 17, 1940.



(Do not sign until the day of your Court Hearing in front of a Notary Public) Petitioner (Person who filed the Divorce Petition)

SWORN TO AND SUBSCRIBED before me this date, (To be completed by Notary Public).

(To be signed by Notary Public) Notary Public or Clerk of Court



The Family Court of the State of Delaware

In and For New Castle 🗌 Kent 🗌 Sussex County



The section below is to be completed by and signed in the presence of a Notary Public/Clerk of Court on the day of your Divorce Hearing.

AFFIDAVIT OF NON-MILITARY SERVICE

STATE OF DELAWARE)	
)	SS.
New Castle	COUNTY)	

BE IT REMEMBERED, that on this date **February 1, 2001**, personally appeared before me, a Notary Public for the State of Delaware in the County declared above,

Jonathan T. Smith , ("Affiant"), who, being duly sworn by me according to law, did depose and say:

- 1. That Affiant is the Petitioner in the Petition for Divorce;
- 2. That Respondent is not in the military service of the United States of America; and
- 3. That Affiant has made this Affidavit pursuant to the provisions of § 200 of the Act of Congress entitled "Soldiers and Sailors Civil Relief Act of 1940" (50 U.S.C.A. App. 520) approved October 17, 1940.



SWORN TO AND SUBSCRIBED before me this date, **February 1, 2001**

Nancy Notary

Notary Public or Clerk of Court

Section 3

IMMEDIATELY AFTER THE DIVORCE HEARING

(assuming your divorce is granted)

• You have <u>30 days</u> AFTER the date of your Divorce Decree to complete the following forms. Pay special attention to the instructions so you understand the process; the process is different than for other forms.



Rule 16(c) Financial Report form. (*When you complete this form, forward the original to your spouse.*)

Affidavit of Mailing form (file with the Family Court after you forward the Rule 16(c) Financial Report form to your spouse).

See next pages for more instructions on completing the Rule 16(c) Financial Report Form.

<u>More Instructions on</u> <u>Completing the Rule 16(c) Financial Report Form</u>

1. WHAT IS A RULE 16(C) FINANCIAL REPORT FORM?

The **Rule 16(c) Financial Report** is a financial form on which both spouses have to provide the Court and each other information about each of your finances.

2. DOES A RULE 16(C) FINANCIAL REPORT FORM NEED TO BE FILED IN EVERY DIVORCE CASE?

No. The Rule 16(c) Financial Report only has to be completed if either you or your spouse asked the Court to divide your marital property or marital debts or to order payment of alimony. Both of you must complete <u>THE SAME</u> form.

3. WHO MUST COMPLETE THE RULE 16(C) FINANCIAL REPORT FORM <u>FIRST</u>?

The person who requested for the Court to make a decision on **ANY** of the following matters must complete the form first:

- division of marital property;
- division of marital debts; AND/OR
- > payment of alimony.

The person who completes the form **FIRST** is (for the purposes of completing this form) the "**Petitioner**" even if this person is not the person who filed the **Petition** for **Divorce/Annulment**. The **Petitioner** must complete all sections pertaining to the "**Petitioner**."

The person who did **NOT** make such requests (the other person) would be the "**Respondent**" and must complete all sections pertaining to the "**Respondent**."

If both of you requested the Court to make a decision on division of marital property, division of marital debts <u>or</u> payment of alimony, the person who filed the **Petition for Divorce/Annulment** (for the purposes of completing this form) is the "**Petitioner**." The **Petitioner** must complete all sections pertaining to the "**Petitioner**." The other person would be the "**Respondent**" and must complete all sections pertaining to the "**Respondent**."

4. WHAT IS THE PROCEDURE FOR COMPLETING THE RULE 16(C) FINANCIAL REPORT FORM?

There are 2 steps to completing and filing the **Rule 16(c)** Financial Report form.



RULE 16(C) FINANCIAL REPORT FORM

PETITIONER COMPLETES THE RULE 16(c) FINANCIAL REPORT FORM

The spouse who is the "Petitioner" for the purposes of this form <u>has 30 days</u> after the date of the entry of the Divorce Decree (the date the Judge signs the Divorce Decree):

- > To complete the **Rule 16(c) Financial Report form**; **AND**
- > To have the completed Rule 16(c) Financial Report form notarized; AND
- To forward the <u>original</u> notarized Rule 16(c) Financial Report form to the other spouse or the other spouse's attorney (if there is one); AND
- File Affidavit of Mailing form with the Family Court where the Petition for Divorce/Annulment was filed.

(On this form you will state under oath that you mailed the original completed notarized **16(c)** Financial Report form to your spouse or your spouse's attorney if there is one); AND

To keep a copy of the completed notarized Rule 16(c) Financial Report form for your records. (This is very important in case your spouse does not file the form.)



RULE 16(C) FINANCIAL REPORT FORM

THE OTHER SPOUSE (RESPONDENT) MUST PREPARE AND FILE THE RULE 16(c) FINANCIAL REPORT FORM

The spouse who receives the forwarded Rule 16(c) Financial Report form has 30 days AFTER the date of mailing (look at postage date) the Rule 16(c) Financial Report form to do the following:

- To complete the rest of the original Rule 16(c) Financial Report form;
 AND
- To have the completed Rule 16(c) Financial Report form notarized; AND
- To forward a <u>copy</u> of the completed Rule 16(c) Financial Report form to the spouse who first filled out the Rule 16(c) Financial Report form or that spouse's attorney (if there is one); AND
- File the original notarized Rule 16(c) Financial Report form; AND
- File Affidavit of Mailing form with the Family Court where the Petition for Divorce/Annulment was filed.

(On this form you will state under oath that you mailed a copy of the completed notarized **16(c)** Financial Report form to your spouse or your spouse's attorney if there is one); AND

To keep a copy of the completed notarized Rule 16(c) Financial Report form for your records.

http://courts.state.de.us/family

5. DOES THE WHOLE REPORT NEED TO BE COMPLETED?

Yes! Both spouses must fill out the **Rule 16(c)** Financial Report form completely. Even if there is something that you do not want the other party to know you must put it on the form anyway or contact the Court by a **Motion** *immediately* to tell the Court why you think that information should not be on the form. The Court will decide if you must put the information on the form. **DO NOT WAIT UNTIL YOUR 30 DAYS HAVE PASSED BEFORE YOU NOTIFY THE COURT.**

6. WHAT HAPPENS IF I DO NOT FILL OUT THE REPORT OR I HIDE PROPERTY THAT I OWN WITHOUT THE COURT'S PERMISSION BECAUSE I DO NOT WANT THE OTHER PARTY TO KNOW?

The Court can impose the following **SANCTIONS** (penalties) if you do not complete the **Rule 16(c)** Financial Report form: order you to pay your spouse's attorney fees, accept your spouse's information on the form as true and ignore any information you may have, or enter a **Default Judgment** or **Dismissal** against you. In other words, you may lose.

7. WHAT WILL HAPPEN IF THE RULE 16(c) FINANCIAL REPORT FORM IS NOT FILED?

If neither spouse files the **Rule 16(c) Financial Report form** in a timely manner, then the request for the Family Court to determine the remaining matters will be dismissed.

If one spouse does not file the **Rule 16(c)** Financial Report form, that spouse takes the chance that the Family Court will grant an **Order of Default** or **Dismissal**
against that spouse. In other words, that spouse may lose. The Court also may impose the same penalties stated above for not completing the form or hiding information.

If the second spouse to complete the form does not file the form, the Court will notify the first spouse who completed the form and ask that spouse to file a copy of the completed form.

8. WHAT HAPPENS IF I REALLY CANNOT FINISH THE RULE 16(C) FINANCIAL REPORT FORM IN TIME?

If you really have tried to finish the **Rule 16(c)** Financial Report form but you cannot, you may request the Court to give you more time by filing a **Motion**. It is up to the Court to decide whether you will get more time and you must have a good reason for the request. Not completing the **Rule 16(c)** Financial Report form because you did not feel like doing it or you did not find the time to complete it, is not a good reason and the Court probably will not give you more time.

SECTION 4 BEGINS AFTER INSTRUCTIONS AND SAMPLES OF THE SECTION 3 FORMS.



TAKE A DEEP BREATH, SECTION 4 DESCRIBES WHAT TO EXPECT NEXT.



RULE 16(c) FINANCIAL REPORT

PROPERTY DIVISION, ALIMONY, COUNSEL FEES

DATE OF MARRIAGE: Date of Marriage	CASE NAME: Name of Petitioner "v." Name
DATE OF SEPARATION: Date of Separation	of Respondent
DATE OF DIVORCE: Date Judge signed	FILE NUMBER: File Number of the Case
Divorce Decree	PETITION NUMBER: File Number of the Case
PETITIONER'S NAME: (P)	RESPONDENT'S NAME: (R)
ADDRESS: (P)	ADDRESS: (R)
SOCIAL SECURITY NUMBER: (P)	SOCIAL SECURITY NUMBER: (R)
DATE OF BIRTH: (P)	DATE OF BIRTH: (R)
HOME PHONE: (P)	HOME PHONE: (R)
WORK PHONE: (P)	WORK PHONE: (R)
EMPLOYER NAME: (P)	EMPLOYER NAME: (R)
EMPLOYER ADDRESS: (P)	EMPLOYER ADDRESS: (R)
YEARS EMPLOYED: (P)	YEARS EMPLOYED: (R)
POSITION OR OCCUPATION: (P)	POSITION OR OCCUPATION: (R)
CURRENT ANNUAL INCOME: (P)	CURRENT ANNUAL INCOME: (R)
PETITIONER'S ATTORNEY: (P) (if no attorney, write "N/A")	RESPONDENT'S ATTORNEY: (R) (if no attorney, write "N/A")
ATTORNEY'S ADDRESS:	ATTORNEY'S ADDRESS:
PHONE #:	PHONE #: FAX #:
E-MAIL ADDRESS (optional)	E-MAIL ADDRESS (optional)

A. Names and dates of birth of minor children of the parties. Indicate with whom the child(ren) primarily reside: Mother (M); Father (F); Shared (S).

Name	of	chi	ild,	child's	date	of	birth,	with
whom	ch	ild	liv	es				
Name of next child, child's date of birth, with whom child								
Name	of n	ext c	hild,	child's date	e of birt	h, w	ith whom	child

Name	of next	child,	child's	date o	of birth,	with	whom	child	

lives

B. Names and dates of birth of any **adult** children residing with either party. Indicate whether the child is enrolled in school.

Name of child, child's date of birth, with whom child lives

Name of next child, child's date of birth, with whom child lives



C. Describe your employment history for the past five years. Include the name of each employer, the dates of employment, the last annual income with each employer, and the reason employment ended. Start with your most recent employer.

PETITIONER (P):	DATES OF EMI		ENDING					
EMPLOYER	START DATE	END DATE	ANNUAL INCOM	EREASON FOR LEAVI	NG			
RESPONDENT (R): EMPLOYER	DATES OF EMI START DATE	PLOYMENT END DATE	ENDING ANNUAL INCOM	E REASON FO	DR LEAVING			
D. Do you have health/dental insurance benefiting you, your spouse and/or children of this marriage? (P) YES NO (R) YES NO If so, please state the name of your insurance company, the group and member numbers and cost:								
(P)		(R)					
Insurance Company:		Ins	surance Com	pany:				
Group Number:		Gro	Group Number:					
Member Number:		Mer	Member Number:					
Monthly Cost:		Моз	Monthly Cost:					
E. Are you a participant employment? (P) YES Were you a participar	🗌 NO		(R)	U YES	П ИО			
previous employment?								
(P)	D NO		(R)	YES	D NO			
If so, please state t and phone number(s) i			ticipant:	administrator(s), address(es)			
F. Do you have any other dues, mandatory pensi				ncluding taxes), such as union □ NO			

COST	DEDUCTIO	N	MONTHLY				
				_			
		I					
G.			e in or own any li:	fe insurance			□ no
	(P)	YES	L NO te the following:			YES	
			the for toriowing.		Cash		
Basis	for Non-Mar Name of Pla	n	Policy Number	Type*	Beneficiary	7 Fac	ce Value
	Surrender	Value	Monthly Cost		Claim		
		•					
* Tv	pe:	W= Whole L	life T= Term	E= Emr	olover		
* Ту	pe:	W= Whole I	ife T= Term	E= Emp	oloyer		
_	Do you c	laim any	inability to pay su	upport due t	to ill healt		
_	Do you c extraord	laim any linary exp	inability to pay su enses which result:	upport due t s in depende	to ill healt		
_	Do you c extraord	laim any linary exp mpairment	inability to pay su	upport due t s in depende	co ill healt: ency upon th		
н.	Do you c extraord and/or i (P) If yes,	laim any linary exp mpairment YES please pr	inability to pay su enses which results of earning capacit NO ovide below and the	upport due t s in depende ty?	to ill healt ency upon th (R)	e other p YES	party for suppo
H. stat	Do you c extraord and/or i (P) If yes,	laim any linary exp mpairment YES please pr	inability to pay su enses which results of earning capacit NO	upport due t s in depende ty? e name and a	to ill healt ency upon th (R)	e other p YES	party for suppo
H. stat	Do you c extraord and/or i (P) If yes,	laim any linary exp mpairment YES please pr	inability to pay su enses which results of earning capacit NO ovide below and the	upport due t s in depende ty?	to ill healt ency upon th (R)	e other p YES	party for suppo
H. stat	Do you c extraord and/or i (P) If yes,	laim any linary exp mpairment YES please pr	inability to pay su enses which results of earning capacit NO ovide below and the	upport due t s in depende ty? e name and a	to ill healt ency upon th (R)	e other p YES	party for suppo
H. stat	Do you c extraord and/or i (P) If yes,	laim any linary exp mpairment YES please pr	inability to pay su enses which results of earning capacit NO ovide below and the	upport due t s in depende ty? e name and a	to ill healt ency upon th (R)	e other p YES	party for suppo
H. stat	Do you c extraord and/or i (P) If yes,	laim any linary exp mpairment YES please pr	inability to pay su enses which results of earning capacit NO ovide below and the	upport due t s in depende ty? e name and a	to ill healt ency upon th (R)	e other p YES	party for suppo
н.	Do you c extraord and/or i (P) If yes,	laim any linary exp mpairment YES please pr	inability to pay su enses which results of earning capacit NO ovide below and the	upport due t s in depende ty? e name and a	to ill healt ency upon th (R)	e other p YES	party for suppo



If so, please indicate from where you receive the benefit(s) and the monthly amount:

 BENEFIT
 MONTHLY COST
 BENEFIT
 MONTHLY COST

INCOME INFORMATION

J. List annual gross income from all sources for last three years, including estimated gross income for current year:

PETITIONER	RESPONDENT	
3 years	\$ 3 years	\$
ago	ago	
2 years	\$ 2 years	\$
ago	ago	
1 year	\$ 1 year	\$
ago	ago	
Current	\$ Current	\$

ASSETS OF THE PARTIES

"Assets" include all assets (property) of any kind, including real estate, and tangible and intangible personal property (such as bank accounts, stocks, bonds, etc.). Unless you explain otherwise, it will be presumed that you are the sole legal owner of any asset(s) identified in your answers. If you are not the sole legal owner, please explain the nature and extent of your ownership, including the name of all co-owners. If the space provided is insufficient, please attach additional pages, indicating whether the attachment is supplied by Petitioner or Respondent.

All property will be considered marital and subject to division unless a party indicates to the contrary. Such an indication must be made by listing one of the following reasons for claiming the property is non-marital under the "Basis for Non-Marital Claim" category:

Premarital (Property owned by a party before marriage). 5. (The 1. Increase increase in value of property acquired before marriage). Agreement (Property excluded by agreement of the parties). 2. б. Gift (Property acquired by gift from a third person). 3. **Post-Separation** (Property acquired after separation). **Inheritance** (Property acquired by 7. inheritance). Exchange (Property acquired in exchange for 4. premarital property).



PLEASE COMPLETE THE FOLLOWING INFORMATION:

REAL PROPERTY

K. Interests in real estate:

	In Whose			Source of funds				
Basis for Non- Address for purchase	Na Marital Claim	me	Market	Value		Mortgage	Balance	
		(P) (R)						
		(R) (P)						
		(R)						
		(P)						
		(R)						

MOTOR VEHICLES

L.	Automobiles,	trailers, mo	torcycles,	and othe	er vehicle	s:	
		In	Whose	Value by		Value by	
Basis	for						
Make,	Model & Year		Name	Date	Acquired	Petitioner*	Respondent*
	Balance on Loan	Who drives?	Non-Marita	l Claim	_		_

* NOTE: The Court generally uses the current retail NADA book value for automobiles

BANK ACCOUNTS

м.	Checking	accounts,	savings	accounts,	certificates	of	deposit:
----	----------	-----------	---------	-----------	--------------	----	----------

Name and Address of Institution Value Name Basis for Non-Marital Claim	Accou	nt Number	In Whose Present



RETIREMENT PLAN(S)

N. Profit sharing plans and/or retirement plans (other than your pension) such as an IRA:

					Does	the N	Jon-contributor
	In	Whose			Clai	mas	Share of Post-
Name of Plan		Name Value of Plan & Date	of V	alue			Separation
Contributions? Basis for Non-	Marital						
	1			Y		Ν	
				T		IN	
				37		NT	
				Y		Ν	
				Y		Ν	
					_		
				Y		Ν	
					_		
				Y		Ν	
	1						

INVESTMENTS

0. Stocks, mutual funds, securities, bonds and options:

Corporation Basis for Non-Marital Cla	ares	In Class	Whose Na	me Date Acquired	Market Value

ANNUITIES

P. Annuities:

 Name and Address
 Amount of
 Date of
 Duration of
 Beneficiary upon

 In Whose
 Basis for Nonof Company
 Payment
 First Payment
 Payments
 Death

 Name
 Marital Claim
 Include
 Include
 Include
 Include
 Include
 Include

 Interview
 Marital Claim
 Include
 Include
 Include
 Include
 Include
 Include

 Interview
 Marital Claim
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 Interview
 Marital Claim
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 Interview
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 Interview
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 Include
 Include



R.

The person who asked the Court to divide marital property/debts or to order alimony is the Petitioner. The person who did NOT ask the Court the above is the Respondent. If both of you asked the above, the person who filed the Petition for Divorce/Annulment is the Petitioner and the person who did NOT file the Petition is the Respondent.

BUSINESSES

Q. If you have any interest in any business, please state:

PETITIONER

RESPONDENT

NAME OF BUSINESS:	NAME OF BUSINESS:
ADDRESS:	ADDRESS:
PERCENTAGE OF INTEREST OF BUSINESS:	PERCENTAGE OF INTEREST OF BUSINESS:
YEARS OF OPERATION:	YEARS OF OPERATION:
NAME OF ACCOUNTANT:	NAME OF ACCOUNTANT:
ACCOUNTANT'S ADDRESS:	ACCOUNTANT'S ADDRESS:
BASIS FOR CLAIM THAT PROPERTY IS NON-MARITAL:	BASIS FOR CLAIM THAT PROPERTY IS NON-MARITAL:
ARE THERE ANY BUY/SELL AGREEMENTS? Y	ARE THERE ANY BUY/SELL AGREEMENTS? Y
N 🗌	N

HOUSEHOLD FURNISHINGS AND BELONGINGS

If the parties do not agree how to divide their household furnishings and belongings, the Court generally divides them by the "two-list" method. One party prepares two lists dividing all of the marital furnishings and belongings. The other party chooses which of the two lists of household furnishings and belongings he or she will keep. The party who prepared the two lists will keep the household furnishings and belongings listed on the remaining list.

 PETITIONER
 RESPONDENT

The household furnishings and belor	ngings:	have been divided	Yes No	Yes No
		be divided by the b-list" method	Yes No	Yes No
	01	THER ASSETS		
Other Asset:		In Whose Name		Value



DEBTS OF THE PARTIES

S. Please complete the chart below regarding <u>ALL</u> of the debts incurred during this marriage

Write the name of the creditor (the institution, company, person, etc.) to whom money is owed	Write the name of the person responsi ble to the creditor	Write the general purpose of the debt incurred (why was the money borrowed?)	Write the date the debt was incurre d	Write the amount of money owed on the date of separation	Write the amount of money owed on the date of divorce	Would you like credit for the money you paid after the date of separation ? If so, how much?
1)				(P)	(P)	(P)
				(R)	(R)	(R)
2)				(P)	(P)	(P)
				(R)	(R)	(R)
3)				(P)	(P)	(P)
				(R)	(R)	(R)
4)				(P)	(P)	(P)
				(R)	(R)	(R)
5)				(P)	(P)	(P)
				(R)	(R)	(R)
б)				(P)	(P)	(P)
				(R)	(R)	(R)
7)				(P)	(P)	(P)
				(R)	(R)	(R)
8)				(P)	(P)	(P)
9)				(R)	(R)	(R)
9)				(P)	(P)	(P)
10)				(R)	(R)	(R)
10)				(P) (R)	(P) (R)	(P) (R)
11)				(R) (P)	(R)	(R)
<u> </u>				(P)	(r) (R)	(r)
12)				(K) (P)	(R)	(R)
				(r)	(r)	(r)
13)				(R)	(R)	(R)
				(R)	(R)	(\mathbf{I})
14)				(R)	(R)	(R)
				(R)	(\mathbf{r})	(\mathbf{r})
15)				(P)	(P)	(P)
- /				(R)	(\mathbf{R})	(R)



PETITIONER'S EXPENSE INFORMATION

T. List monthly expenses (1/12 of actual payments made during the preceding twelve (12) months) and estimated monthly expenses for the next year, including any expenses that have recently changed or are expected to change in the near future.

ITEM	
EXPENSES	

CURRENT EXPENSES ESTIMATED

EXPENSES	
Rent	
Mortgage (taxes, insurance and escrow)	
Water	
Sewer	
Electric	
Gas	
Oil	
Garbage	
Cable television	
Telephone	
Household items	
Household maintenance and repairs (list)	
Item:	
Item:	
Groceries	
Clothing	
Health Insurance (COBRA)	
Out-of-pocket medical and dental expenses for	
self	
Medical and dental expenses for the children	
Work-related child care	
School tuition for children of the parties	
School tuition for other children	
Laundry and dry cleaning	
Toys and presents	
Cosmetics and toiletries	
Hobbies	
Barber and hairdresser	
Newspaper, magazine subscriptions	
Charitable and/or religious donations	
Vacation	
Entertainment and miscellaneous	
Transportation (other than auto)	
Automobile	
Monthly payment	
Repairs and maintenance	
Insurance	
Gasoline	
Life Insurance	
Other	
TOTAL	



RESPONDENT'S EXPENSE INFORMATION

U. List monthly expenses (1/12 of actual payments made during the preceding twelve (12) months) and estimated monthly expenses for the next year, including any expenses that have recently changed or are expected to change in the near future.

ITEM EXPENSES

CURRENT EXPENSES ESTIMATED

EXPENSES	
Rent	
Mortgage (taxes, insurance and escrow)	
Water	
Sewer	
Electric	
Gas	
Oil	
Garbage	
Cable television	
Telephone	
Household items	
Household maintenance and repairs (list)	
Item:	
Item:	
Groceries	
Clothing	
Health Insurance (COBRA)	
Out-of-pocket medical and dental expenses for	
self	
Medical and dental expenses for the children	
Work-related child care	
School tuition for children of the parties	
School tuition for other children	
Laundry and dry cleaning	
Toys and presents	
Cosmetics and toiletries	
Hobbies	
Barber and hairdresser	
Newspaper, magazine subscriptions	
Charitable and/or religious donations	
Vacation	
Entertainment and miscellaneous	
Transportation (other than auto)	
Automobile	
Monthly payment	
Repairs and maintenance	
Insurance	
Gasoline	
Life Insurance	
Other	
TOTAL	



IF ANY PARTY DELIBERATELY FAILS TO DISCLOSE INFORMATION REQUIRED IN THIS REPORT OR DELIBERATELY MISREPRESENTS INFORMATION IN RESPONSE TO QUESTIONS IN THIS REPORT, THE COURT MAY IMPOSE SANCTIONS, INCLUDING, BUT NOT LIMITED TO, AWARDING THE ENTIRE ASSET TO THE OTHER PARTY REGARDLESS OF ANY OTHER EQUITABLE CIRCUMSTANCES, AWARDING ATTORNEY'S FEES OR OTHER EXPENSES INCURRED FOR THE ADDITIONAL TIME REQUIRED TO DISCOVER THE ASSET, OR ANY OTHER PENALTY THAT THE COURT DEEMS APPROPRIATE.

PROPOSED DIVISION

Please list below the proposed division of property and debts and reasons for proposal, to the extent known:

PETITIONER
If there is not enough room in this
box to write
how you think the Court should
divide your
marital property and debts, write
in this box
" see attached" and write it on a
separate piece of
paper. Write on the top of the
paper " Proposed
Property Division" and sign your
name on the
bottom of the page and have your
signature
notarized.

STATE OF	Name of State
COUNTY OF	: SS. Name of County :
BE IT REMEN of	BERED that on this Day _ day
Year , appe	ared before me, a Notary Public
for the Sta	te and County aforesaid,
Name	of Petitioner,

who being by (Name of Petitioner) me duly sworn according to law, did depose and say that the foregoing answers are true and correct to the best of his/her knowledge and belief.



PETITIONER

Notary Public will sign here

NOTARY PUBLIC OR CLERK OF COURT

RESPONDENT
If there is not enough room in this
box to write
how you think the Court should
divide your
marital property and debts, write
in this box
" see attached" and write it on a
separate piece of
paper. Write on the top of the
paper " Proposed
Property Division" and sign your
name on the
bottom of the page and have your
signature
notarized.

Petitione<u>r's attorney (if any) will</u> sign here

COUNSEL FOR PETITIONER, IF ANY

Notary Public will write here

DATE



_, appeared before me, a Notary Public for the State and County aforesaid,

Name of Respondent

who being by (Name of Respondent)

me duly sworn according to law, did depose and say that the foregoing answers are true and correct to the best of his/her knowledge and belief.



DO NOT SIGN YOUR NAME UNTIL

YOU ARE IN FRONT OF A NOTARY PUBLIC RESPONDENT

Notary Public will sign here

NOTARY PUBLIC OR CLERK OF COURT

Respondent's attorney (if any) will sign here COUNSEL FOR RESPONDENT, IF ANY

Notary Public will write here

DATE

Form 465 Rev. 04/16/00 FILM

RULE 16(c) FINANCIAL REPORT

PROPERTY DIVISION, ALIMONY, COUNSEL FEES

DATE OF MARRIAGE: June 1, 1999	CASE NAME: Jonathan T. Smith v. Jane L.
DATE OF SEPARATION: January 5, 2000	Smith
DATE OF DIVORCE: February 1, 2001	FILE NUMBER: CN00-99999
	PETITION NUMBER: 00-99999
PETITIONER'S NAME: Jonathan T. Smith	RESPONDENT'S NAME:
	ADDRESS:
ADDRESS: 999 Oak Street	
Apartment #2A	
Newark, DE 22233	SOCIAL SECURITY NUMBER:
SOCIAL SECURITY NUMBER: 111-22-333-23-4567	DATE OF BIRTH:
	HOME PHONE:
DATE OF BIRTH: 2/11/66	WORK PHONE:
	EMPLOYER NAME:
HOME PHONE: 302-555-1111	EMPLOYER ADDRESS:
WORK PHONE: 302-555-9999	
EMPLOYER NAME: Acme Steele, Inc.	
EMPLOYER ADDRESS: 800 Green Street	YEARS EMPLOYED:
Wilmington, DE 19801	POSITION OR OCCUPATION:
	CURRENT ANNUAL INCOME:
YEARS EMPLOYED: 15 years	RESPONDENT'S ATTORNEY:
POSITION OR OCCUPATION: Shipping Supervisor	ATTORNEY'S ADDRESS:
CURRENT ANNUAL INCOME: 50,000	
PETITIONER'S ATTORNEY: N/A	
ATTORNEY' S ADDRESS N/A	PHONE #:: FAX #:
ATTORNET SADDRESSN/A	E-MAIL ADDRESS (optional):
PHONE #: N/A FAX #: N/A	
E-MAIL ADDRESS (optional): N/A	

A. Names and dates of birth of minor children of the parties. Indicate with whom the child(ren) primarily reside: Mother (M); Father (F); Shared (S).

N/A	

N/A

B. Names and dates of birth of any adult children residing with either party. Indicate whether the child is enrolled in school.

C. Describe your employment history for the past five years. Include the name of each employer, the dates of employment, the last annual income with each employer, and the reason employment ended. Start with your most recent employer.

PETITIONER (P): EMPLOYER	DATES OF EN START DATE	MPLOYMENT END DATE	ENDING	ASON FOR LEAVING	
Acme Steel, Inc.	10/1/198	Present	50,000	N\A	
	5				
Bethlehem Steel, Inc.	7/1/1984	8/30/19 85	32,000	Location	
		00			
RESPONDENT (R): EMPLOYER	DATES OF EN START DATE	MPLOYMENT END DATE	ENDING ANNUAL INCOME	REASON FOR LE	AVING
D. Do you have health/d this marriage?	ental insura	nce benefit	ing you, your	spouse and/or	children of
(P) 🛛 YES	D NO		(R)	YES	D NO
If so, please state	the name of y	your insura	nce company,	the group and m	member numbers
and cost:					
(P)		(R)			
Insurance Company: Blue C	ross/Blue Sh:	ield			
Group Number: 10227					
Member Number: 5001					
Monthly Cost: 18.00					
E. Are you a participan	t in any pens	sion and/or	retirement p	lan at your cu	rrent place of
employment?					
(P) 🛛 YES	D NO		(R)	YES	D NO
Were you a participa	nt in any otl	her pension	and/or retir	rement plan(s)	chrough
previous employment?					
(P) 🗌 YES	NO NO		(R)	YES	D NO
If so, please state and phone number(s)				<pre>inistrator(s),</pre>	address(es)
(P)				(R)	
401K, Wilmington Trust Ba	nk (302) 555				
3333					
F. Do you have any othe dues, mandatory pens (P) TYES				uding taxes), : YES	such as union
If so, please identi	-	tion and mo			<u> </u>

	DEDUCT	TION	MONT	THLY COST		DEDUCTION	1	MONTHLY COST
G.	Do you pa	articipate	in or ov	wn any li	fe insuranc	e on your li	lfe?	
	(P) 🕅	YES		NO		(R)	YES	D NO
	Tf so. pl	lease state	the fo	llowing:				_
	11 20, F1		0110 20			Cash		
	for Non-Marit						_	
ľ	Name of Plan Surrender V			v Number Ly Cost	Type*	Beneficiar Claim	y Fac	e Value
State	Farm	20222	W	Mother	\$50,000	\$22,000	6.20	
Gerbe	r	33333	Т	Sister	\$25,000	\$10,000	5.00	
				•		_		
	e:	W= Whole Lif	e	T= Term	E = Em	ployer		
* Туре Н.	extraordi	nary expen	ses which	ch result:	s in depend	to ill healt ency upon th		lity or arty for support
н.	extraordi and/or im (P) If yes, p	nary expen mpairment o YES please prov	ses which f earnin M ide belo	ch results ng capacit NO ow and the	s in depend ty?	ency upon th	ne other p YES	
H. state	extraordi and/or im (P) If yes, p	nary expen pairment o YES	ses which f earnin M ide belo	ch results ng capacit NO ow and the	s in depend ty? e name and	ency upon th	ne other p YES	arty for support
H. state	extraordi and/or im (P) If yes, p	nary expen mpairment o YES please prov	ses which f earnin M ide belo	ch results ng capacit NO ow and the	s in depend ty?	ency upon th	ne other p YES	arty for support
H. state	extraordi and/or im (P) If yes, p	nary expen mpairment o YES please prov	ses which f earnin M ide belo	ch results ng capacit NO ow and the	s in depend ty? e name and	ency upon th	ne other p YES	arty for support
H. state	extraordi and/or im (P) If yes, p	nary expen mpairment o YES please prov	ses which f earnin M ide belo	ch results ng capacit NO ow and the	s in depend ty? e name and	ency upon th	ne other p YES	arty for support
H. state	extraordi and/or im (P) If yes, p	nary expen mpairment o YES please prov	ses which f earnin M ide belo	ch results ng capacit NO ow and the	s in depend ty? e name and	ency upon th	ne other p YES	arty for support
H. state	extraordi and/or im (P) If yes, p	nary expen mpairment o YES please prov	ses which f earnin M ide belo	ch results ng capacit NO ow and the	s in depend ty? e name and	ency upon th	ne other p YES	arty for support
н.	extraordi and/or im (P) If yes, p	nary expen mpairment o YES please prov	ses which f earnin M ide belo	ch results ng capacit NO ow and the	s in depend ty? e name and	ency upon th	ne other p YES	arty for support
H. state	extraordi and/or im (P) If yes, p	nary expen mpairment o YES please prov	ses which f earnin M ide belo	ch results ng capacit NO ow and the	s in depend ty? e name and	ency upon th	ne other p YES	arty for support
H. state	extraordi and/or im (P) If yes, p the natur Are you r Social Se	nary expen mpairment o YES please prov re of the d	ses which f earnin ide belo isabilit ny incom ability	ch results ng capacit NO ow and the ty: me from be (SSDI), N	s in depend ty? e name and (R) (R) enefits suc VA benefits	ency upon th (R) address of a	YES All treations Security	arty for support
H. state (P)	extraordi and/or im (P) If yes, p the natur Are natur Social Se private d (P)	nary expen mpairment o YES olease prov te of the d ceceiving a ecurity Dis disability YES	ses which f earnin ide belo isabilit ny incom ability or milit	ch results ng capacit NO ow and the ty: me from be (SSDI), W tary pens: NO	s in depend ty? e name and (R) enefits suc VA benefits ion?	ency upon th (R) address of a h as Social , federal pe (R)	YES All treation Security Ension (CS YES	arty for support
H. state (P)	extraordi and/or im (P) If yes, p the natur Are natur Social Se private d (P)	nary expen mpairment o YES olease prov te of the d ceceiving a ecurity Dis disability YES	ses which f earnin ide belo isabilit ny incom ability or milit	ch results ng capacit NO ow and the ty: me from be (SSDI), T tary pens: NO m where yo	s in depend ty? e name and (R) enefits suc VA benefits ion?	ency upon th (R) address of a h as Social , federal pe (R)	YES All treation Security Ension (CS YES	<pre>arty for support</pre>
H. state (P)	extraordi and/or im (P) If yes, p the natur Are you r Social Se private d (P) If so, pl	nary expen mpairment o YES olease prov te of the d ceceiving a ecurity Dis disability YES	ses which f earnin ide belo isabilit ny incom ability or milit ate from	ch results ng capacit NO ow and the ty: me from be (SSDI), T tary pens: NO m where yo	s in depend ty? e name and (R) enefits suc VA benefits ion?	ency upon th (R) address of a h as Social , federal pe (R) the benefit	YES All treation Security Ension (CS YES	arty for support NO ng physicians and
H. state (P)	extraordi and/or im (P) If yes, p the natur Are you r Social Se private d (P) If so, pl	nary expen mpairment o YES olease prov te of the d ceceiving a ecurity Dis disability YES	ses which f earnin ide belo isabilit ny incom ability or milit ate from	ch results ng capacit NO ow and the ty: me from be (SSDI), T tary pens: NO m where yo	s in depend ty? e name and (R) enefits suc VA benefits ion?	ency upon th (R) address of a h as Social , federal pe (R) the benefit	YES All treation Security Ension (CS YES	arty for support NO ng physicians and
H. state (P)	extraordi and/or im (P) If yes, p the natur Are you r Social Se private d (P) If so, pl	nary expen mpairment o YES olease prov te of the d ceceiving a ecurity Dis disability YES	ses which f earnin ide belo isabilit ny incom ability or milit ate from	ch results ng capacit NO ow and the ty: me from be (SSDI), T tary pens: NO m where yo	s in depend ty? e name and (R) enefits suc VA benefits ion?	ency upon th (R) address of a h as Social , federal pe (R) the benefit	YES All treation Security Ension (CS YES	arty for support NO ng physicians and

INCOME INFORMATION

J. List annual gross income from all sources for last three years, including estimated gross income for current year:

PETITIONER		RESPONDENT
3 years	\$44,5000	3 years
ago		ago
2 years	\$45,000	2 years
ago		ago
1 year	\$47,000	1 year
ago		ago
Current	\$50,000	Current

ASSETS OF THE PARTIES

"Assets" include all assets (property) of any kind, including real estate, and tangible and intangible personal property (such as bank accounts, stocks, bonds, etc.). Unless you explain otherwise, it will be presumed that you are the sole legal owner of any asset(s) identified in your answers. If you are not the sole legal owner, please explain the nature and extent of your ownership, including the name of all co-owners. If the space provided is insufficient, please attach additional pages, indicating whether the attachment is supplied by Petitioner or Respondent.

All property will be considered marital and subject to division unless a party indicates to the contrary. Such an indication must be made by listing one of the following reasons for claiming the property is non-marital under the "Basis for Non-Marital Claim" category:

1. Premarital (Property owned by a party before marriage).	5.	Increa	.se (The
increase in value of property acquired				
before marriage).				
2. Agreement (Property excluded by agreement of the parties).				
	б.	Gift	(Prope	rty
acquired by gift from a third person).				
3. Post-Separation (Property acquired after separation).				
7. Inheritance	(Pr	coperty	acquired	by
inheritance).				

4. **Exchange** (Property acquired in exchange for premarital property).

PLEASE COMPLETE THE FOLLOWING INFORMATION:

REAL PROPERTY

K. Interests in real estate:

		In Who	se	Source of funds				
Basis for Non-								
Address		Name	3	Market	Value		Mortgage	Balance
for purchase	Μ	Marital Claim						
123 Pine Street		Jane L and		(P)	98,000			
Wilmington,	DE	Jonathan	т.	\$120,000				
12345		Smith		(R)				
				(P)				
				(R)				
				(P)				
				(R)				
L		1		1	1	1	1	

MOTOR VEHICLES

In Whose Value by Value by Basis for

98	Toyota Avalon		Both	4/2/99	14,000	18,000	20,000	Husband	
96	Plymouth	Grand	Jane	3/1/96	20,000	25,000	0	Wife	Pre-
Voy	yager								Marital

* NOTE: The Court generally uses the current retail NADA book value for automobiles

BANK ACCOUNTS

M. Checking accounts, savings accounts, certificates of deposit:

Name and Address of Institution Value Name Basis for Non-Marital Claim		Acc	ount Number	In Whose Present
Wilmington Trust	23400 Saving	\$12,000	Both	
Wilmington, DE 19801				
Delaware Credit Union	11100	\$4,000	Wife	
	Savings			
Wilmington Trust	30901	\$500.00	Both	
Wilmington, DE 19801	Checking			

RETIREMENT PLAN(S)

N. Profit sharing plans and/or retirement plans (other than your pension) such as an IRA:

				Does	the N	Non-contributor
	In W	hose		Clai	lm a S	Share of Post-
Name of Plan	N	ame Value of Plan & Date 🛛 🤉	of Valu	e		Separation
Contributions? Basis for No	n-Marital C	laim				-
401K	Husband	\$50,000	Y	\square	N	
			Y		Ν	
			Y		Ν	
			Y		Ν	
			Y		Ν	

INVESTMENTS

0. Stocks, mutual funds, securities, bonds and options:

			In W			
Corporation		ares	Class	Na	ame Date Acquired	Market Value
Basis for Non-Marital Cla						
IBM	20		Husband	4/2/1990	\$2000	Inheritance
Disney	100		Both	8/1/98	\$3000	
Merck	25		Both	8/1/98	\$1800	

ANNUITIES

P. Annuities:

Name and AddressAmount ofDate ofDuration ofBeneficiary uponIn WhoseBasis for Non-
of CompanyPaymentFirst PaymentPaymentsDeath

Name Marital Claim	 	 	
N/A			

BUSINESSES

RESPONDENT

Q. If you have any interest in any business, please state:

PETITIONER

NAME OF BUSINESS: N/A	NAME OF BUSINESS:
ADDRESS:	ADDRESS:
PERCENTAGE OF INTEREST OF BUSINESS:	PERCENTAGE OF INTEREST OF BUSINESS:
YEARS OF OPERATION:	YEARS OF OPERATION:
NAME OF ACCOUNTANT:	NAME OF ACCOUNTANT:
ACCOUNTANT'S ADDRESS:	ACCOUNTANT'S ADDRESS:
BASIS FOR CLAIM THAT PROPERTY IS NON-MARITAL:	BASIS FOR CLAIM THAT PROPERTY IS NON-MARITAL:
ARE THERE ANY BUY/SELL AGREEMENTS? Y	ARE THERE ANY BUY/SELL AGREEMENTS? Y
N 🗌	N

HOUSEHOLD FURNISHINGS AND BELONGINGS

If the parties do not agree how to divide their household furnishings and belongings, the Court generally divides them by the "two-list" method. One party prepares two lists dividing all of the marital furnishings and belongings. The other party chooses which of the two lists of household furnishings and belongings he or she will keep. The party who prepared the two lists will keep the household furnishings and belongings listed on the remaining list.

	PEII.	TIONER RESPO	<u>JNDEN I</u>
The household furnishings and belongings:	have been divided	🗌 Yes 🔀 No	Yes
will	be divided by the		

"two-list" method Yes 🗌 No

Yes

No

OTHER ASSETS

R. Other Asset:	In Whose Name	e Value
Savings Bonds	Wife	\$15,000

DEBTS OF THE PARTIES

S. Please complete the chart below regarding <u>ALL</u> of the debts incurred during this marriage

Write the name of the creditor (the institution, company, person, etc.) to whom money is owed	Write the name of the person responsi ble to the creditor	Write the general purpose of the debt incurred (why was the money borrowed?)	Write the date the debt was incurre d	Write the amount of money owed on the date of separation	Write the amount of money owed on the date of divorce	Would you like credit for the money you paid after the date of separation ? If so, how much?
1)Wilmington	Both	Mortgage	9/1/199 9	(P)100,000	(P)98,000	(P) no
Trust Bank				(R)	(R)	(R)
2) MBNA	Jonathan	Household items	9/24/19 99	(P) 4,000	(P) 3,195	(P) 50.00
				(R)	(R)	(R)
3) First USA	Jane	Groceries	6/10/19 99	(P) 1259.38	(P) 59.63	(P) 150.00
				(R)	(R)	(R)
4) Discover	Both	furniture	10/5/19 99	(P) 8,000	(P) 7,100	(P) no
				(R)	(R)	(R)
5) Sears	Jonathan	Tools/law n	7/18/19 99	(P) 5,128	(P) 5,000	(P) no
				(R)	(R)	(R)
6) PNC	Both	Car	4/2/199 9	(P) 20,500	(P) 20,000	(P) no
				(R)	(R)	(R)
7)				(P)	(P)	(P)
				(R)	(R)	(R)
8)				(P)	(P)	(P)
				(R)	(R)	(R)
9)				(P)	(P)	(P)
				(R)	(R)	(R)
10)				(P)	(P)	(P)
11)				(R)	(R)	(R)
11)				(P)	(P)	(P)
12)				(R) (P)	(R) (P)	(R) (P)
<u> </u>				(P) (R)	(P) (R)	(P) (R)
13)				(R) (P)	(P)	(R) (P)
± <i>3</i> /				(P) (R)	(P) (R)	(P) (R)
14)				(R) (P)	(P)	(P)
<u> </u>						
15)						
				(R)	(R)	(R)
15)				(R) (P) (R)	(R) (P) (R)	(R) (P) (R)

PETITIONER'S EXPENSE INFORMATION

т.

List monthly expenses (1/12 of actual payments made during the preceding twelve (12) months) and estimated monthly expenses for the next year, including any expenses that have recently changed or are expected to change in the near future.

ITEM EXPENSES

CURRENT EXPENSES ESTIMATED

Rent		650.00
Mortgage (taxes, insurance and escrow)	975.00	
Water	55.00	
Sewer	112.00	
Electric	135.00	85.00
Gas		
Oil		
Garbage	275.00	9.95
Cable television	20.00	20.00
Telephone	100.00	100.00
Household items	100.00	
Household maintenance and repairs (list)		
Item: pest control		
Item: lawn care		
Groceries	300.00	
Clothing	100.00	100.00
Health Insurance (COBRA)	30.00	20.00
Out-of-pocket medical and dental expenses for		
self		
Medical and dental expenses for the children		
Work-related child care	50.00	
School tuition for children of the parties		
School tuition for other children		
Laundry and dry cleaning	25.00	25.00
Toys and presents	50.00	50.00
Cosmetics and toiletries	20.00	20.00
Hobbies		75.00
Barber and hairdresser	15.00	15.00
Newspaper, magazine subscriptions	15.00	15.00
Charitable and/or religious donations	75.00	75.00
Vacation		
Entertainment and miscellaneous	50.00	50.00
Transportation (other than auto)	50.00	50.00
Automobile		
Monthly payment		
Repairs and maintenance	50.00	50.00
Insurance	70.00	70.00
Gasoline	100.00	100.00
Life Insurance		
Other		
TOTAL	2772.00	1674.95

RESPONDENT'S EXPENSE INFORMATION

U. I

List monthly expenses (1/12 of actual payments made during the preceding twelve (12) months) and estimated monthly expenses for the next year, including any expenses that have recently changed or are expected to change in the near future.

ITEM EXPENSES

CURRENT EXPENSES ESTIMATED

EXPENSES	
Rent	
Mortgage (taxes, insurance and escrow)	
Water	
Sewer	
Electric	
Gas	
Oil	
Garbage	
Cable television	
Telephone	
Household items	
Household maintenance and repairs (list)	
Item:	
Item:	
Groceries	
Clothing	
Health Insurance (COBRA)	
Out-of-pocket medical and dental expenses for	
self	
Medical and dental expenses for the children	
Work-related child care	
School tuition for children of the parties	
School tuition for other children	
Laundry and dry cleaning	
Toys and presents	
Cosmetics and toiletries	
Hobbies	
Barber and hairdresser	
Newspaper, magazine subscriptions	
Charitable and/or religious donations	
Vacation	
Entertainment and miscellaneous	
Transportation (other than auto)	
Automobile	
Monthly payment	
Repairs and maintenance	
Insurance	
Gasoline	
Life Insurance	
Other	
TOTAL	

IF ANY PARTY DELIBERATELY FAILS TO DISCLOSE INFORMATION REQUIRED IN THIS REPORT OR DELIBERATELY MISREPRESENTS INFORMATION IN RESPONSE TO QUESTIONS IN THIS REPORT, THE COURT MAY IMPOSE SANCTIONS, INCLUDING, BUT NOT LIMITED TO, AWARDING THE ENTIRE ASSET TO THE OTHER PARTY REGARDLESS OF ANY OTHER EQUITABLE CIRCUMSTANCES, AWARDING ATTORNEY'S FEES OR OTHER EXPENSES INCURRED FOR THE ADDITIONAL TIME REQUIRED TO DISCOVER THE ASSET, OR ANY OTHER PENALTY THAT THE COURT DEEMS APPROPRIATE.

PROPOSED DIVISION

Please list below the proposed division of property and debts and reasons for proposal, to the extent known:

PETITIONER	RESPONDENT
See attached	
STATE OF Delaware :	
: SS. COUNTY OF New Castle :	STATE OF : : SS. COUNTY OF :
BE IT REMEMBERED that on this day	BE IT REMEMBERED that on this day
of <u>February</u> , 20 <u>01</u> , appeared before me, a Notary Public for the	of
State and County aforesaid,	, 20,
Jonathan T. Smith	appeared before me, a Notary Public for the
who being by (Name of Petitioner)	State and County aforesaid,
me duly sworn according to law, did depose	, who being by
and say that the foregoing answers are true	(Name of Respondent) me duly sworn according to law, did depose
and correct to the best of his/her	and say that the foregoing answers are true
knowledge and belief.	and correct to the best of his/her
Jonathan T. Smith	knowledge and belief.
PETITIONER	
Nancy Notary	RESPONDENT
NOTARY PUBLIC OR CLERK OF COURT	NOTARY PUBLIC OR CLERK OF COURT
<u>N/A</u>	
COUNSEL FOR PETITIONER, IF ANY	COUNSEL FOR RESPONDENT, IF ANY
February 28, 2001	DATE

11

etitioner	r (Person who filed the Petition) v. Respondent (Person the Petition was file	d against)
ne	Name	File Number
reet Addres	Street Address	
ot. or P.O. E	Box Number Apt. or P.O. Box Number	Petition Number
ty	State Zip Code City State Zip Code	
ocial Securit	ity Number Date of Birth Social Security Number Date of Birth	Type of Petition
torney Nam	ne and Phone Number Attorney Name and Phone Number	_ ▶
		s information from ourt documents.
	A proceeding involving the above-captioned case having been previously fi	led in this
	Court, I, the:	/Movant
2	(Check ONE) Respondent/Movant Attorney for Respondent	t/Movant,
	affirm that a true and correct copy of the: (Check ONE and complete as ap	propriate)
	Answer to Petition 16c Financial Report (check t	this box)
	Motion or Response to Motion	
	(Type of Motion)	
	Other: (Other type of document mailed to opposing party/attor)	nev)
	 was placed in the U.S. Mail on this date, <u>(Date document was mailed)</u> 	•
Ì	class postage pre-paid to the: <i>(Check ONE and complete as appropriate)</i>	•^
	opposing party at the address listed above	2.
	attorney for opposing party at the address	listed below.
TUP EN	(DO NOT SIGN YOU NAME UNTIL YOU	
	ARE IN FRONT OF THE NOTARY PUBLIC) Party/Movant/Attorney	
	1 arty/100 valu Autorney	
	SWORN TO AND SUBSCRIBED before me this date, (To be completed by Notary Public).	
CTAD	before me this date, (To be completed by Notary Public).	

(To be signed by Notary Public) Notary Public/Clerk of Court



IF II LIMI

The Family Court of the State of Delaware In and For New Castle Kent Sussex County

Petitioner			v. Respondent	
Name Jonathan T	Smith		Name Jane L. Smith	File Number CN00-99999
Street Address			Street Address	
999 Oak Str Apt. or P.O. Box Number	reet		123 Pine Street	Petition Number
Apartment			P.O. Box No. 1234	00-99999
^{City} Newark	State Zip Code DE 1233	3	CityStateZip CodeWilmingtonDE12345	
Social Security Number	Date of Birth		Social Security Number Date of Birth	Type of Petition
111-22-333:	3 2/11/66		111-23-4567 3/10/66	Divorce & Property Division
Attorney Name and Phone I	Number		Attorney Name and Phone Number	and/or Alimony
		A	FFIDAVIT OF MAILING	
A prod	ceeding involving the a	lbov	ve-captioned case having been previously filed	in this
Court,	, I, the: 🛛 🕅 Pe	titic	oner/Movant Attorney for Petitioner/Mo	vant
(Chec	k ONE)	espo	ondent/Movant Attorney for Respondent/M	ovant,
affirm	that a true and correct	cop	by of this: (<i>Check ONE and complete as approp</i>	oriate)
	nswer to Petition	\geq	16c Financial Report	
□ M	lotion or 🗌 Response	to I	Motion	
	ther:		(Type of Motion)	
		e of	f document mailed to opposing party/attorney)	
was p	laced in the U.S. Mail	on tl	his date, March 1, 2001 , and	sent first
class p	postage pre-paid to the:	(C	heck ONE and complete as appropriate)	
		\boxtimes	opposing party at the address listed above.	
			attorney for opposing party at the address list	ed below.
Jor	nathan T. S	Sm	nith	
	Party/Movant/Attorne			
SWOI	RN TO AND SUBSCR	IRF	D	
	e me this date, Man			
		_		
Na	ncy Notar	У		
	Notary Public/Clerk	of C	ourt	

SECTION 4 <u>WHAT TO EXPECT NEXT</u>

The Court will schedule a Hearing before a Judge to determine the remaining issues. Depending on how complicated your case is, the Judge may schedule a Pre-trial Conference and/or may request that you complete additional forms to help you and your spouse prepare for the Pre-trial Conference. The Court will notify you if you must complete additional steps or forms.

• Furthermore, <u>at least 7 days</u> **BEFORE** your Court Hearing(s) on the remaining *issues*, you must complete a document called a **Rule 52(d) document**. On this document, you must write exactly how you think the Court should decide your case and why.

Check at the Family Court or on the Family Court web page to see if the **DIVORCE: PROPERTY/ALIMONY Packet** is available. (The Family Court web page address is on the bottom of this page.) The **DIVORCE: PROPERTY/ALIMONY Packet** will have the forms you need for the Property Division and/or Alimony Hearing(s) and will include instructions on how to complete these forms and samples of the completed forms.

Before your Hearing(s) and any Pre-trial Conferences, you should refer to the FAQ's dealing with the topics of your Hearing(s) and on How to Prepare for a Hearing.



THIS IS THE END OF DIVORCE PACKET # 2.

http://Courts.state.de.us/family