



Family Law Information Form

(For use with the HotDocs automated document assembly program)

Dissolution Only

- The HotDocs program requires you to create a username and password.
- Please write your username and password below for future reference:

Username:

Password:

Initial Screening I

Are you married?

Yes No

Are you seeking a dissolution from your spouse? (In Montana the legal word for divorce is “dissolution.” A dissolution legally ends a marriage.)

Yes No

Do you and your spouse have one or more children together?

Yes No

If ‘Yes’, you need a form for “dissolution with children.”

Initial Screening II

Are you or your spouse pregnant?

Yes No

If “Yes” are you or your spouse pregnant with a child of this marriage?

Yes No

If yes you will get a warning message that these forms may not be right for you as you can not set up a parenting plan for an unborn child.

Are you seeking maintenance from your spouse? (*In Montana the legal word for alimony or spousal support is “maintenance.”*)

Yes No

If ‘yes’ you will get a warning message that this web site and form are not right for you. Talk to a lawyer before you continue with your dissolution.

Do you and your spouse own more than two pieces of real property between you? (*“Real property” is the legal term for land and things permanently attached to the land, like a house. A mobile home is not real property, but the land it is on is real property.*)

Yes No

If ‘yes’ you will get a warning message that this web site and form are not right for you. Talk to a lawyer before you continue with your dissolution.

Have you lived in the county where you are planning on going to court for more than 90 days?

Yes No

Initial Screening III

Do you know how to find your spouse?

Yes No

If you answer “Yes” to any of the following questions these form may not be right for you. You should talk to a lawyer before continuing with this web site. If you don’t talk to a lawyer, you may lose important rights.

Do either you or your spouse own property outside of Montana? (*A Montana court may not be able to divide or award property that is outside of Montana.*)

Yes No

Do either you or your spouse have pensions, retirement benefits?

Yes No

Do either you or your spouse own a business or share in a business?

Yes No

Do either you or your spouse have complicated tax issues?

Yes No

Have either you or your spouse filed for bankruptcy without the other listed as a joint debtor?

Yes No

Initial Screening IV

If you answer "No" to any of the next 2 questions these form may not be right for you. If you expect your spouse to disagree with you, you should talk to a lawyer before you continue with this web site.

Do you and your spouse agree about how your property should be divided?

Yes No

Do you and your spouse agree about how your debts should be divided?

Yes No

If you answer "Yes" to the next question these forms may not be right for you. Before you continue you should talk to a lawyer. To find out if you qualify for Montana Legal Services Association services please call the Helpline at 1-800-666-6899.

If you need immediate help call 911 or a victim advocate near you. To find a victim advocate, all the Montana Coalition Against Domestic and Sexual Violence at 1-406-443-7794.

Has your spouse been violent or abusive toward you in the past?

Yes No

Please fill in all the blanks. Do not abbreviate any words. Use the back of the paper or additional paper if you need to. Do not leave any questions blank! Mark it as "Not Applicable" or "N/A" if a question does not apply to you.

Petitioner Information (Information about You)

First Name: _____ Middle Name: _____ Last Name: _____

Mailing Address: _____

City, State, Zip Code: _____

County of residence: _____ Day Phone: _____

Sex: Male Female Date of Birth: _____ Occupation: _____

How long have you lived in your County? _____ How long have you lived in Montana? _____

Respondent Information (Information about Your Spouse)

First Name: _____ Middle Name: _____ Last Name: _____

Mailing Address: _____

City, State, Zip Code: _____

County of residence: _____ Day Phone: _____

Sex: Male Female Date of Birth: _____ Occupation: _____

How long has your spouse lived in Montana? _____

Filing and Serving Information

You must give copies of your court documents and a Summons to your spouse or the other parent. This is called serving the other party. Then your spouse or the other parent has a chance to respond.

Important: *The court will not give you a dissolution and/or parenting plan unless you file proof that the other party was served.*

You can choose one of two ways to serve your spouse or the other parent.

(1) You can mail the documents to the other party. This way of serving is called "Notice and Acknowledgment." Your spouse or the other parent must sign a document call an Acknowledgment that tells the court that he or she received the documents. If he or she does not sign the Acknowledgment, you will have to serve him or her by a different method.

(2) You can have the sheriff serve the other party. You should have the sheriff serve the documents if your spouse or the other parent is not likely to cooperate by signing an Acknowledgment.

The following information may help the sheriff locate your spouse in order to serve him or her with court documents:

What county do you expect to file in? _____

Have you lived in this county for more than 90 days? *(Either you or your spouse have to have lived in a county for at least 90 days before you can file for dissolution or a parenting plan in that county.)*

- Yes No

How will your spouse be served? Please mark both selections. It will make things easier should you need the sheriff to serve him or her eventually.

- I will send or personally deliver documents to him or her.
 I will ask the sheriff to serve the documents on him or her.

What county should the sheriff serve your spouse in? _____

What does your spouse look like? (height, weight, hair and eye color, scars, tattoos, etc. be as specific as possible.) _____

Does he or she carry a weapon?

- Yes No I don't know

What is your spouse's street address (if different than the one given above)? _____

When can he or she be found at home? _____

Employer's Name: _____

Employer's Address: _____

When can he or she be found at work? _____

Are there other places where your spouse can often be found? Where? _____

When can he or she be found there? _____

Marriage Information

What type of marriage do you have?

- Marriage license Common law marriage Declaration of marriage

Marriage Date (example: 03/12/1995): _____

If your marriage was registered, where was it registered? (State, County) _____

Why do you want a dissolution?

- I do not get along with my spouse (also known as “marital discord.”)
 I have lived apart from my spouse for more than 180 days.

Are you currently living apart?

- Yes No

Date you began living apart? (example:03/12/1995): _____

Your answers to the following questions will be used to create a document called "Declaration of Disclosure of Assets, Debts, Income, and Expenses." This document is required by law. You must list any items that you and/or your spouse own and any items that you own with someone else. You must also list any debts that you and/or your spouse owe and any debts that you and someone else owe. It is important that you list everything. If you do not list all of your property, the court may give the property you don't list to your spouse. Even if you and your spouse have already divided your property and debts, you still must list everything. If you have property or debts that you got before you were married or after you were separated, you still must list them.

Property

Do you or your spouse own any real property? (*“Real property” is the legal term for land and things permanently attached to the land, like a house. A mobile home is not real property, but the land it is on is real property.*)

- Yes No

Do you or your spouse own a car or other vehicle?

- Yes No

Do you or your spouse have any personal property, including things like appliances, furniture, jewelry, art, guns and so on?

- Yes No

Have you already divided your personal property?

- Yes No

Do you or your spouse have any bank accounts?

- Yes No

Do you or your spouse have any pension or retirement accounts, life insurance, stocks, bonds, secured notes or mutual funds?

- Yes No

Do you or spouse own a business or part of a business?

Yes No

How much cash do you have? _____

Do you have any other property or assets? Yes No

Debts

Do you or your spouse have any debts?

Yes No

If 'Yes,' how should the court divide your and your spouse's debts?

I need to tell the court how much of each debt that I should pay and how much my spouse should pay.

My spouse should be responsible for the debts in my spouse's name and I should be responsible for the debts in my name.

List of Real Property: If you and/or your spouse own any land and/or property attached to the land (like a home), please list it here. Be sure to include the legal description of your property. If you do not know the legal description, you can ask your county's Clerk and Recorder.

First Property

Street Address:		
City:	State:	Zip Code:
Legal Description: _____		
Who currently owns this real property? <i>(Check all that apply.)</i> <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> Other _____		
Who should get this real property to? <i>(Check all that apply.)</i> <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> I want to describe how the property should be divided. (Please use complete sentences)		
How much is this real property worth now?		
Is there a secured debt on the real property: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Lender:		
If 'Yes,' amount owed on the real property as of today:		
How much of this debt should you have to pay:		
How much of this debt should your spouse have to Pay:		

Second Property

Street Address:		
City:	State:	Zip Code:
Legal Description:		
Who currently owns this real property? <i>(Check all that apply.)</i> <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> Other _____		
Who should get this real property to? <i>(Check all that apply.)</i> <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> I want to describe how the property should be divided. (Please use complete sentences)		
How much is this real property worth now?		
Is there a secured debt on the real property: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Lender:		
If 'Yes,' amount owed on the real property as of today:		
How much of this debt should you have to pay:		
How much of this debt should your spouse have to Pay:		

List of Vehicles: If you and/or your spouse own any vehicles, including cars, trucks, and motorcycles, please list them here. Please include the VIN# and the estimated value for the vehicle.

First Vehicle

Year:	Make:	Model:
VIN #		
Who currently owns this vehicle? <i>(Check all that apply.)</i> <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> Other _____		
Who should the court give this vehicle to? <i>(Check all that apply.)</i> <input type="checkbox"/> Me <input type="checkbox"/> My spouse		
How much is this vehicle worth:		
Do you or your spouse owe money on the vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know		
If 'Yes,' creditor or lender's name:		
How much money is owed on the vehicle as of today:		
How much of this debt should you have to pay:		
How much of this debt should your spouse have to pay:		

Second Vehicle

Year:	Make:	Model:
VIN #		
Who currently owns this vehicle? <i>(Check all that apply.)</i> <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> Other _____		
Who should the court give this vehicle to? <i>(Check all that apply.)</i> <input type="checkbox"/> Me <input type="checkbox"/> My spouse		
How much is this vehicle worth:		
Do you or your spouse owe money on the vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know		
If 'Yes,' creditor or lender's name:		
How much money is owed on the vehicle as of today:		
How much of this debt should you have to pay:		
How much of this debt should your spouse have to pay:		

Third Vehicle

Do you want all personal property not listed above to stay with the person who has it?

- Yes No

List of Debts: *Please list any debts owed by you and/or your spouse. Do NOT enter home loans or vehicle or car loans that you have already entered. **Important! The court will tell you who has to pay what debts, but your creditors DO NOT have to listen to the court. Creditors can collect from you on your joint debts of the marriage.***

First Debt

What type of debt is this? <input type="checkbox"/> Utility Bill <input type="checkbox"/> Credit Card <input type="checkbox"/> Student Loan <input type="checkbox"/> Medical Expense <input type="checkbox"/> Other: _____
Creditor's name:
What are the last four digits of the account number?
Whose debt is this? <i>(Check all that apply.)</i> <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's
How much money is currently owed on this debt?
How much of this debt should you have to pay?
How much should your spouse have to pay?

Second Debt

What type of debt is this? <input type="checkbox"/> Utility Bill <input type="checkbox"/> Credit Card <input type="checkbox"/> Student Loan <input type="checkbox"/> Medical Expense <input type="checkbox"/> Other: _____
Creditor's name:
What are the last four digits of the account number?
Whose debt is this? <i>(Check all that apply.)</i> <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's
How much money is currently owed on this debt?
How much of this debt should you have to pay?
How much should your spouse have to pay?

Third Debt

What type of debt is this? <input type="checkbox"/> Utility Bill <input type="checkbox"/> Credit Card <input type="checkbox"/> Student Loan <input type="checkbox"/> Medical Expense <input type="checkbox"/> Other: _____
Creditor's name:
What are the last four digits of the account number?
Whose debt is this? (<i>Check all that apply.</i>) <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's
How much money is currently owed on this debt?
How much of this debt should you have to pay?
How much should your spouse have to pay?

Fourth Debt

What type of debt is this? <input type="checkbox"/> Utility Bill <input type="checkbox"/> Credit Card <input type="checkbox"/> Student Loan <input type="checkbox"/> Medical Expense <input type="checkbox"/> Other: _____
Creditor's name:
What are the last four digits of the account number?
Whose debt is this? (<i>Check all that apply.</i>) <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's
How much money is currently owed on this debt?
How much of this debt should you have to pay?
How much should your spouse have to pay?

Fifth Debt

What type of debt is this? <input type="checkbox"/> Utility Bill <input type="checkbox"/> Credit Card <input type="checkbox"/> Student Loan <input type="checkbox"/> Medical Expense <input type="checkbox"/> Other: _____
Creditor's name:
What are the last four digits of the account number?
Whose debt is this? (<i>Check all that apply.</i>) <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's
How much money is currently owed on this debt?
How much of this debt should you have to pay?
How much should your spouse have to pay?

Sixth Debt

What type of debt is this? <input type="checkbox"/> Utility Bill <input type="checkbox"/> Credit Card <input type="checkbox"/> Student Loan <input type="checkbox"/> Medical Expense <input type="checkbox"/> Other: _____
Creditor's name:
What are the last four digits of the account number?
Whose debt is this? <i>(Check all that apply.)</i> <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's
How much money is currently owed on this debt?
How much of this debt should you have to pay?
How much should your spouse have to pay?

List of Bank Accounts: *If you and/or your spouse have any bank accounts, please list them here.
Please be sure to include the balance and the **last four digits** of your account number.*

First Account

What kind of bank account is this? <input type="checkbox"/> Checking <input type="checkbox"/> Savings
Bank's name?
What are the last four digits of the account number?
Whose name is on the account? <i>(Check all that apply.)</i> <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's <input type="checkbox"/> Other: _____
How much money is in this bank account today?

Second Account

What kind of bank account is this? <input type="checkbox"/> Checking <input type="checkbox"/> Savings
Bank's name?
What are the last four digits of the account number?
Whose name is on the account? <i>(Check all that apply.)</i> <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's <input type="checkbox"/> Other: _____
How much money is in this bank account today?

Third Account

What kind of bank account is this? <input type="checkbox"/> Checking <input type="checkbox"/> Savings
Bank's name?
What are the last four digits of the account number?
Whose name is on the account? <i>(Check all that apply.)</i> <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's <input type="checkbox"/> Other: _____
How much money is in this bank account today?

Fourth Account

What kind of bank account is this? <input type="checkbox"/> Checking <input type="checkbox"/> Savings
Bank's name?
What are the last four digits of the account number?
Whose name is on the account? <i>(Check all that apply.)</i> <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's <input type="checkbox"/> Other: _____
How much money is in this bank account today?

List of Stocks, Bonds, Pensions/Retirement Accounts; Life Insurance (Cash Value); Secured Notes, Mutual Funds *(owned by you and/or your spouse):***First Account**

What kind of account is this? <input type="checkbox"/> Pension/Retirement <input type="checkbox"/> Life Insurance <input type="checkbox"/> Stock <input type="checkbox"/> Bond <input type="checkbox"/> Secure Note <input type="checkbox"/> Mutual Fund <input type="checkbox"/> Other: _____
What is the name of the company that you have the account or policy with? (For example: "Fidelity Investments" or "Metropolitan Life")
What are the last four digits of the account or policy number?
Whose name is on the account? <i>(Check all that apply.)</i> <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's <input type="checkbox"/> Other _____
How much money is this account or policy worth today?

Second Account

What kind of account is this? <input type="checkbox"/> Pension/Retirement <input type="checkbox"/> Life Insurance <input type="checkbox"/> Stock <input type="checkbox"/> Bond <input type="checkbox"/> Secure Note <input type="checkbox"/> Mutual Fund <input type="checkbox"/> Other: _____
What is the name of the company that you have the account or policy with? (For example: "Fidelity Investments" or "Metropolitan Life")
What are the last four digits of the account or policy number?
Whose name is on the account? <i>(Check all that apply.)</i> <input type="checkbox"/> Mine <input type="checkbox"/> My spouse's <input type="checkbox"/> Other _____
How much money is this account or policy worth today?

List of Businesses and Business Property *(Include equipment, livestock, etc. owned by you and/or your spouse):***First Business Property or Business Interest**

What kind of business or interest is this?
Who owns this business property or interest? <i>(Check all that apply.)</i> <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> Other _____
How much is this property worth?

Second Business Property or Business Interest

Describe the business property or interest:
Who owns this business property or interest? <i>(Check all that apply.)</i> <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> Other _____
How much is this property worth?

List of Other Property (Enter information about any other property that you have not already listed):

First Property or Asset

What kind of property is this?
Who owns this property or asset? (Check all that apply.) <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> Other _____
How much is this property or asset worth?

Second Property or Asset

Describe the property or asset:
Who owns this property or asset? (Check all that apply.) <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> Other _____
How much is this property or asset worth?

Third Property or Asset

Describe the property or asset:
Who owns this property or asset? (Check all that apply.) <input type="checkbox"/> Me <input type="checkbox"/> My spouse <input type="checkbox"/> Other _____
How much is this property or asset worth?

Monthly Income: Please list your monthly income.

Source of Income	Amount per Month
Gross Wages, Salary, Commissions (“Gross wages” means the amount of money you get paid BEFORE taxes or deductions are taken from your paycheck.)	
Self Employment Earnings	
Rent, Interest, Dividends that you receive	
Pension, Retirement	
Child Support	
Dependent’s Benefits	
Unemployment or Worker’s Compensation	
Food Stamps	
Public Assistance (TANF)	
Social Security Benefits, including SSI	
Other Income (describe)	

Monthly Expenses: Please list your monthly expenses.

Description of Expense	Amount per Month
Retirement, 401(k) or Pension	
Taxes	
Health Insurance (Self and child(ren))	
Medical Expenses	
Student Loans	

Clothing	
Food and Household Supplies (<i>Include cleaning and sanitary supplies</i>)	
Child Care	
Child Support Payments	
Housing (<i>Rent or mortgage payment</i>)	
Property Insurance	
Property Taxes	
Utilities	
Telephone	
Car Insurance	
Transportation	
Other Expenses:	
Other Expenses:	
Other Expenses:	
Other Expenses:	

Wife's Former Name

Do you want your name changed back to your maiden name or another former name?

Yes No

What would you like your last name changed to? _____
