IN THE CIRCUIT COURT OF	, MISSOURI
	, 141100001

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

In re	e the Marriage of:		`		
	Name) (Middle Name) tioner, (Enter your full legal name	(Last Name) e above)	(Jr./Sr./III)	Case Number (Will be assigned wh	nen case is filed)
-and	I-				
(First	Name) (Middle Name)	(Last Name)	(Jr./Sr./III)	Division Number	
Res	pondent. (Enter your spouse's fu	'	,	(Will be assigned wh	nen case is filed)
	Pet	ition for Dissol	ution of Ma	rriage	
Thro	oughout this entire case, you,		_		,
will a	always be the Petitioner.	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
	r spouse,	(Middle Name) (La	ast Name)	, wil	ll always be the
_	ermation about Petitioner	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
1.	How many petitions have yo This is the first petition I This is the second petition This is the third petition I	have filed in this case on I have filed in this	e. (Original petit case.	•	
2.	What is your mailing address		h	an life can many a description	the time this case
	This is the address the court will us pending, you must send a letter as the address at which you live. court a mailing address. Because public.	r to the court notifying it o Even if you do not wish to	of your new address of give the address a	. This address is not ne at which you live, you m	ecessarily the same nust still give the
	(9)				
	(Street)				
	(City)	(State)	(Zip)	-	
	(Telephone Number with Area Coo	le) (E-mail Address - Op	tional)		—
3.	What are the last four number The last four digits of your social states.	•		SMo.	
	XXX-XX	,	, ,		

4.	Are you over the age of eighteen? (Check one of the two boxes) ☐ Yes ☐ No
5.	I live in \square the United States \square another country, which is
6.	I live in Missouri another state, which is Missouri law requires that one party to a dissolution of marriage proceeding must have been a resident of the State of Missouri for at least 90 days. If the time is less than four months, state the number of days you have lived in the state.
	Years Months Days (Length of time you have lived in this state)
7.	In what county do you currently live and for what length of time have you lived there? City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should enter "Saint Louis city" in the blank.
	(County) Years Months Days (Length of time you have lived in this county)
8.	What is your current employment status? (Check one of the three boxes) Employed Unemployed Self-employed
9.	If you are employed or self-employed, where do you currently work? If you are self-employed, enter a brief description of the type of work you perform such as "Landscaping" or "Day care" on the line for the name of your employer. If you are self-employed, you should also enter the address information for your self-employment.
	(Employer's name or type of self-employment) (Street)
	(City) (State) (Zip)
10	What is your total monthly gross income from all sources?
	Gross income is the amount of money a person earns before anything such as taxes is deducted. For a more detailed definition of "gross income" see Supreme Court Form No. 14.
	(Total monthly gross income)
11.	Can you support yourself through the combined income from your employment and income from property that you will receive in the dissolution? (Check one of the two boxes)
	This does not include supporting any minor children.
	☐ Yes ☐ No

	ormation about Respondent fer your spouse's name on the lines)	t (First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
12.	What is your spouse's mailing and This is the address that the court will spouse's current address, you should	I use to send informa			not know your
	(Street)				
	(City)	(State)	(Zip)		
	(Telephone Number with Area Code)	(E-mail Address - C	Optional)		
13.	What are the last four numbers The last four digits of your spouse's significant. If you do not know your spous	social security numb	er are required by §452	.312, RSMo. Do not lea	eve this field
	XXX-XX				
14.	Is your spouse over the age of ☐ Yes ☐ No	eighteen? (Ched	ck one of the two bo	xes)	
15.	My spouse lives in ☐ the Unit	ted States 🗌 and	other country, which	is	
16.	My spouse lives in ☐ Missouri If the time is less than four months, s		· -	ed in the state.	
	Years Months Days (Length of time they have lived in this	: state)			
17.	, , , ,	•		· ·	
	If you do not know in which county ye "Unknown." City of Saint Louis is cor		I cannot find out this info	ormation, then you shou	ıld enter
	(County)	Years Months (Length of time to	Days hey have lived in this co	unty)	
18.	If your spouse does not now live during your marriage? (Check to be a control of the control o			use live together in	Missouri
	If you and your spouse have never li voluntarily enter their appearance in means that the court cannot awar where your spouse lives. You sho	ived together in the S this proceeding, the d any money judgm	State of Missouri during court will lack personal nent to you. It may be it	jurisdiction over your spoetter to file this case	oouse. This
	☐ Yes ☐ No				
	Not Applicable (My spouse	currently lives in	Missouri)		
19.	What is your spouse's current	employment stat	us? (Check one of t	he four boxes)	
	EmployedUnemployed				
	☐ Self-employed ☐ Unknown				

20.	If your spouse is employed or self-employed, where do they currently work?
	If your spouse is self-employed, enter a brief description of the type of work they perform, such as "Landscaping" or "Day care," on the line for the name of the employer. If your spouse is self-employed you should also enter the address information for their self-employment.
	(Employer's name or type of self-employment)
	(Street)
	(City) (State) (Zip)
21.	What is your spouse's total monthly gross income from all sources?
	Gross income is the amount of money a person earns before anything such as taxes is deducted. If you do not know the exact amount of monthly gross income for your spouse, you should enter your best estimate here.
	(Total monthly gross income)
22.	Can your spouse support themselves through the combined income from their employment and income from property that they will receive in the dissolution? (Check one of the three boxes)
	This does not include supporting any minor children born of the marriage.
	☐ Yes ☐ No
	☐ Unknown
23.	Is your spouse on active duty in the military? (Check one of the two boxes)
20.	If your spouse is on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may prevent you from getting a dissolution of marriage without your spouse's consent. You should contact a lawyer about this situation prior to filing this <i>Petition for Dissolution of Marriage</i> .
	□ Yes
	□ No
Info	ormation about the Marriage
24.	What date were you married?/
25.	Where did you get your marriage license? (Check one of the two boxes)
	Enter the state, county and country where your marriage is registered. This is not necessarily the same as the county where you were married. City of Saint Louis is considered a county. If your marriage is registered in the city of Saint Louis, enter "Saint Louis city."
	☐ In the United States, in the State of, County of
	☐ In another country, which is
26.	What date did you and your spouse separate? / / / (mm/dd/yyyy)

27.		here any reasonable likelihood that your marriage can be preserved? <i>(Ch</i> xes) Yes No	eck one of the two
28.	ls y	your marriage irretrievably broken? (Check one of the two boxes) Yes No	
29.		e you or your spouse pregnant? <i>(Check all that apply)</i> Yes, I am pregnant. Yes, my spouse is pregnant. No, neither me nor my spouse are pregnant.	
		ust enter a number on each line below, even if it is 0. Include children no matter how old the children.	ney are. Do not include
30.		w many living children do you and your spouse have together that were rn after the date of this marriage?	
		clude in this number all living children born to you and your spouse during this marriage a result of sexual intercourse or artificial insemination.	(Number of Children)
31.	Но	w many living children did you and your spouse adopt?	
	If y	you have already accounted for this child in paragraph 30, do not count them in this ragraph. Include in this number all living children who were: (a) born to you or your ouse and later adopted by the other spouse; or (b) adopted by both parties.	(Number of Children)
32.		w many living children do you and your spouse have together that were in before the date of this marriage?	
	as	clude in this number all living children born to you and your spouse before this marriage a result of sexual intercourse or artificial insemination. You should attach a copy of e birth certificate(s) for these children to your <i>Petition</i> .	(Number of Children)
33.	Α.	How many living children were born to you (if you are female) with someone other than your spouse during this marriage? (This number includes children born after the parties separated.)	
		Additional information may be required before the court proceeds with your case.	(Number of Children)
	В.	How many living children were born to your spouse (if they are female) with someone other than you during this marriage? (This number includes children born after the parties separated.)	
		Additional information may be required before the court proceeds with your case.	(Number of Children)
34.	En	ter the total number of children from lines 30, 31, 32 and 33 A and B.	(Total Number of Children)

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

Information about Children

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

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

Number of children you wrote on line 34	Questions you should answer
1	35 (a-j) and 39-47
2	35 (a-j), 36 (a-j) and 39-47
3	35 (a-j), 36 (a-j), 37 (a-j) and 39-47
4	35 (a-j), 36 (a-j), 37 (a-j), 38 (a-j) and 39-47
More than 4	35 (a-j), 36 (a-j), 37 (a-j), 38 (a-j), attach additional pages answering all the questions asked in 38 (a-j) for each additional child and 39-47

35. Child One

To b	e answered if the answer to question	34 is one or mo	'e			
35a.	What is the full name of this c	hild?				
	(First Name)	Middle Name)	(Last Nam	ne)		(Jr./Sr./III)
35b.	What are the last four number	rs of this child	s Social S	ecurity Numbe	er? xxx-xx-	
35c.	What is the current address o	f this child?		•		
	(Street)					
	(City)	(State)		(Zip)	_	
35d.	What is this child's age?					
35e.	 Check all of the following box ☐ This child is married. ☐ This child is on active duty ☐ This child is self-supporting ☐ This child is attending high ☐ This child is attending colle 	in the military. j. school.				
35f.	With whom has this child prim	narily lived duri	ing the pre	evious 60 days	?	
	(First Name)	Middle Name)	(Last Nam	ne)		(Jr./Sr./III)
35g.	Who should have legal custod who will make the decisions concern ☐ Me (Petitioner) ☐ My Spouse (Respondent) ☐ Both Spouses Jointly ☐ Other Person (State name)	ning health, educa			§452.375.1(2),	
35h.	Who should have physical cus	,	nild? (Che	. ,	,	• • • • • • • • • • • • • • • • • • • •
	refers to where this child will reside a ☐ Me (Petitioner) ☐ My Spouse (Respondent) ☐ Both Spouses Jointly ☐ Other Person (State name)	and what time thi				
35i.	Who are the parents of this ch	,	ll that app	,	,	• • • • • • • • • • • • • • • • • • • •
	child by sexual intercourse, adoption ☐ Me (Petitioner) ☐ My Spouse (Respondent) ☐ Other Person (State name)	n or artificial inser				(Jr./Sr./III)
35j.	Who are listed as parents on	,	h certifica	. ,		(2.2.2.2.2.7)
,	☐ Me (Petitioner)			•	,	
	☐ My Spouse (Respondent)	١				
	☐ Other Person (State name)	(First Name)		(Middle Name)	(Last Name)	(Jr./Sr./III

36. Child Two

To b	e answered if the answer to question	34 is two or more	9			
36a.	What is the full name of this c	hild?				
	(First Name)	Middle Name)	(Last Name)			(Jr./Sr./III)
36b.	What are the last four number	rs of this child's	s Social Sec	curity Numbe	er? XXX-XX-	
36c.	What is the current address o	of this child?				
	(Street)					
	(City)	(State)		(Zip)	_	
36d.	What is this child's age?					
36e.	Check all of the following box ☐ This child is married. ☐ This child is on active duty ☐ This child is self-supporting ☐ This child is attending high ☐ This child is attending colle	in the military. g. school.	al school.			
36f.		o		ious 60 days	?	
	,	Middle Name)	(Last Name)			(Jr./Sr./III)
36g.	Who should have legal custod who will make the decisions concern ☐ Me (Petitioner) ☐ My Spouse (Respondent) ☐ Both Spouses Jointly ☐ Other Person (State name)	ning health, educa	tion and welfa		§452.375.1(2)	
36h.	Who should have physical cus	,	•	,	,	, ,
	refers to where this child will reside a ☐ Me (Petitioner) ☐ My Spouse (Respondent) ☐ Both Spouses Jointly ☐ Other Person (State name)	and what time this	child spends			
36i.	Who are the parents of this ch	,	,	,	. ,	,
	child by sexual intercourse, adoption ☐ Me (Petitioner) ☐ My Spouse (Respondent) ☐ Other Person (State name)	n or artificial insem	nination, pleas			(Jr./Sr./III)
36j.	Who are listed as parents on	,	•	,	. ,	(01.501.5111)
-,	 ☐ Me (Petitioner) ☐ My Spouse (Respondent) ☐ Other Person (State name) 			Middle Name)	(Last Name)	(Jr./Sr./III)

37. Child Three

To b	e answered if the answer to quest	tion 34 is three or m e	ore			
37a.	What is the full name of thi	is child?				
	(First Name)	(Middle Name)	(Last Name))		(Jr./Sr./III)
37b.	What are the last four num	nbers of this child'	s Social Se	curity Numbe	er? XXX-XX-	
37c.	What is the current addres	s of this child?				
	(Street)					
	(City)	(State)		(Zip)	_	
37d.	What is this child's age? _					
37e.	Check all of the following b	ooxes that apply:				
	☐ This child is married.					
	☐ This child is on active do☐ This child is self-support	•				
	☐ This child is attending h	_				
	☐ This child is attending or	~	nal school.			
37f.		J		ious 60 days	?	
	•	·		·		
	(First Name)	(Middle Name)	(Last Name)			(Jr./Sr./III)
37g.	Who should have legal cus who will make the decisions contained. ☐ Me (Petitioner) ☐ My Spouse (Responder) ☐ Both Spouses Jointly ☐ Other Person (State name)	cerning health, educant) nt) me)	ation and welfa	are for this child.	. §452.375.1(2)	, RSMo
071		(First Name)	•	Middle Name)	,	(Jr./Sr./III)
3/n.	Who should have physical refers to where this child will rest ☐ Me (Petitioner) ☐ My Spouse (Responder) ☐ Both Spouses Jointly ☐ Other Person (State name)	ide and what time this	s child spends			
37i.	Who are the parents of this	,	•	,	,	, ,
011.	child by sexual intercourse, adop ☐ Me (Petitioner) ☐ My Spouse (Responder ☐ Other Person (State nar	otion or artificial inser nt)	nination, pleas			Jr./Sr./III,
37j.	Who are listed as parents	(•	,	,	(0.20.2111)
J.	☐ Me (Petitioner)☐ My Spouse (Responder☐ Other Person (State nate)	nt)	. 55.1 .	,	-1-17-27	
	_ 3 1 3.35.1 (State Har	(First Name)		Middle Name)	(Last Name)	(Jr./Sr./III)

38. Child Four

To b	e answered if the answer to question	34 is four or mor	e				
38a.	What is the full name of this o	hild?					
	(First Name)	Middle Name)	(Last Name)			(Jr./Sr./III)	
38b.	What are the last four numbe	rs of this child's	Social Securit	ty Numbe	er? XXX-XX-		_
38c.	What is the current address of	of this child?					
	(Street)						_
	(City)	(State)		ip)	_		
38d.	What is this child's age?						
38e.	Check all of the following box ☐ This child is married. ☐ This child is on active duty ☐ This child is self-supporting ☐ This child is attending high ☐ This child is attending colle	in the military. g. school.	al school.				
38f.	With whom has this child prim	narily lived duri	ng the previous	60 days	?		
	(First Name)	Middle Name)	(Last Name)			(Jr./Sr./III)	i.
38g.	Who should have legal custod who will make the decisions concern ☐ Me (Petitioner) ☐ My Spouse (Respondent) ☐ Both Spouses Jointly ☐ Other Person (State name)	ning health, educa	tion and welfare fo	or this child.			
38h	Who should have physical cu	,	•	•	,	•	1./111)
3011.	refers to where this child will reside Me (Petitioner) My Spouse (Respondent) Both Spouses Jointly Other Person (State name)	and what time this	child spends with				er./III)
38i.	Who are the parents of this cl	,	•	,	. ,	•	,
JOI.	child by sexual intercourse, adoption ☐ Me (Petitioner) ☐ My Spouse (Respondent) ☐ Other Person (State name)	n or artificial insem	ination, please na			(Jr./S	:r./III)
38j.	Who are listed as parents on	,	•	,	,	(30)	
j.	 ☐ Me (Petitioner) ☐ My Spouse (Respondent) ☐ Other Person (State name) 			dle Name)	(Last Name)	(Jr./S	<u> </u>
		,	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(====)	(3)	

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

Additional Information about Children

	(Middle Name)	(Last Name)	(Jr./Sr./III)
(Street)			
(City)	(State)	(Zip)	
(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
(Street)			
(City)	(State)	(Zip)	
(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
(Street)			
		vour spouse who has physition rights with respect to a	
Do you know of any children or claims to of the two boxes) Yes No Do you have informin a court of this or a Yes No	one other than you or yo have custody or visitate ation about any other cany other state? (Check	vour spouse who has physition rights with respect to a ustody proceeding concernations of the two boxes)	ny of the children? (Cho
Do you know of any children or claims to of the two boxes) Yes No Do you have informin a court of this or a Yes No Have you participate	one other than you or yo have custody or visitate ation about any other cany other state? (Check	our spouse who has physition rights with respect to a	ny of the children? (Cho
Do you know of any children or claims to of the two boxes) Yes No Do you have informin a court of this or a Yes No Have you participate other state? (Check	one other than you or yo have custody or visitate ation about any other cany other state? (Checker) and other state? (Checker) are one of the two boxes)	vour spouse who has physition rights with respect to a ustody proceeding concernations of the two boxes)	ny of the children? (Ch

45.	Have any orders pertaining to any of the children been entered by the Family Support Division? (Check one of the two boxes)							
	•	,	r to this <i>Petition for Dissolu</i>	ition of Marriage				
46.	 Are you or your spouse currently receiving Temporary Assistance to Needy Families (TANF) benefits? (Check one of the two boxes) Yes No 							
Oth	ner Allegations							
47.	Are there any other allegations?							
	If there are any other statements you wish to include in your <i>Petition</i> , you should enter them here.							
Red	quest for Relief							
l wa	ant the court to do the follow	ving: <i>(Check all th</i>	at apply)					
	Grant a dissolution of my	marriage						
	•	` '	age as stated herein (if app	•				
	Enter appropriate orders we Divide the marital property	•	support of the child(ren) (f applicable)				
	Award maintenance to me							
	Award maintenance to my							
Change my name to my former name of								
		_						
	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)				
	Other (Please state the other request(s))							

Directions for Service on Respondent Spouse

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

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

	=					
	Respondent Spouse has signed a verified <i>Respondent's Answer to Petition for Dissolution of Marriage</i> , which is being filed with the <i>Petition for Dissolution of Marriage</i> . Therefore, do not issue a summons. If you check this box, you must file the <i>Respondent's Answer to Petition for Dissolution of Marriage</i> at the same time you file this petition. The <i>Respondent's Answer to Petition for Dissolution of Marriage</i> must be signed by your spouse in front of a notary public.					
	Respondent Spouse should be served with a summons at their home:					
	Your spouse must be served within 30 days of the issuance of the summons. If you are going to have your spouse served, you must file another copy of all your documents in this case to be served on your spouse.					
	(Street)					
	(City)	(State)	(Zip)			
	Respondent Spouse should be served with a summons at their place of employment:					
	Your spouse must be served within 30 days of the issuance of the summons. If you are going to have your spouse served, you must file another copy of all your documents in this case to be served on your spouse.					
	(Employer's Name)			(Hours of Employment)		
	(Street)					
	(City)	(State)				
	Respondent Spouse cannot be served in Missouri. Therefore, service by registered mail is requested. A copy of the <i>Affidavit for Service by Mail</i> is attached to this form. See Missouri Supreme Court Rule 54.12(b).					
for		enefits, you must ser		e receive Temporary Assistance upport Division with a copy of		
	Me or my spouse currently receive TANF benefits through the Family Support Division. The Family Support Division shall be served at the following address:					
	Director, Family Support 615 Howerton Court Jefferson City, Missouri 6					

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

Sign Below in the Presence of a Notary Public

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

Petitioner, of lawful age, being duly sworn on his or her oath, states that he or she is the Petitioner named above and that the facts stated in the *Petition for Dissolution of Marriage* are true according to his or her best knowledge, information and belief.

>		
(Sign above in the presence of a Notary Publi	(Pri	nt your name above)
The following information must be comp	leted by a notary r	public.
STATE OF) COUNTY OF)		
COUNTY OF)		
On this day of		20, before me personally appeared known to be the person described in and who
executed the foregoing instrument and a and deed.	acknowledged that	t he/she executed the same as his/her free act
IN WITNESS WHEREOF, I have hereur State aforesaid, the day and year first al		nd affixed my official seal in the County and
		, Notary Public
		County, State of Missour
My commission expires:		_
Attorney Information		
This information may be completed by your atto assistance of an attorney.	rney. Do not enter any	information here if you are filing this case without the
I have assisted Petitioner in the prepon behalf of Petitioner.	paration of these p	leadings, but I am not entering my appearance
(Attorney - Sign above)		(Missouri Bar Number)
(Attorney - Print your name above)		_
(Street)		_
(City)	(State)	(Zip)
())	
(Telephone Number with Area Code) (Fax Nur	nber with Area Code)	(E-mail Address - Optional)