IN THE SUPERIOR COURT FOR THE STATE OF ALASKA In the Matter of the Dissolution of the Marriage of CASE NO. Party A and Party B. PETITION FOR DISSOLUTION OF MARRIAGE (NO MINOR CHILDREN) We consent to the court's jurisdiction and request a decree of dissolution of marriage. Our marriage has broken down and we no longer want to be married. We agree this petition is the entire agreement between us. We understand that only the agreements written in this petition and its attachments are enforceable. I. **INFORMATION ABOUT PETITIONERS** If yes, please list the case number, date, and place of filing: A. Children 1. Are there any children under age 19 who were born to a party or adopted during the time you were married? Yes ☐ Yes □ No 2. Is a party now pregnant? If you checked "yes" in response to either of the above questions, you should not use this form. You must use Packet No. 1 unless paternity has been legally disestablished. (If it has been, attach to this petition a copy of the documentation disestablishing paternity.) B. Party A Length of residence in Alaska: ______ 2. Residence address: (street address) (city) (state) (zip) 3. Home phone: Cell phone: 4. Mailing address: _____ (box or street number) (city) (state) (zip) 5. Occupation: _____ Work phone: 6. Most recent employer: Signature of Party A Signature of Party B

C.	Pa	rty B											
	1. Length of residence in Alaska:												
	2. Residence address:												
		(street address)	(city)	(state)	(zip)								
	3.	Home phone:	Cell phone:										
	4.	Mailing address:											
		(box or street number)	(city)	(state)	(zip)								
	5.	Occupation:	Work phone:										
	6.	Most recent employer:											
D.		ate and Place of Marriage. Date of m	(month)	(day) / 2	20								
	Pla	ace of marriage:		(-1-1-)									
		(city)		(state)									
Ε.	He	ealth Care and Health Insurance											
	Do	es either spouse need medical care or t	reatment? Yes I	No									
	If y	yes, state which spouse and describe th	e care or treatment needed:										
	Is either spouse covered by health insurance (through an employer or otherwise)?												
	☐ Yes ☐ No												
	If yes, state which spouse and the amount paid for the insurance by the spouse or spouses:												
_	_												
F.		Domestic Violence											
		s either spouse been involved in any of	<u> </u>	riage:									
		a criminal charge of a crime involving											
		a domestic violence protective order u											
	3.	injunctive relief against domestic viole	nce under former AS 25.35.01	10 or 25.35.020), or								
	4. a domestic violence protective order issued in another jurisdiction and filed with the court												
	in this state under AS 18.66.140?												
	Yes No If yes, describe below:												
	Ha	s there been any domestic violence dur	ing the marriage (whether or	not the police	were								
		volved or anything was filed in court)?	Yes 1										
G.	На	ns either spouse received advice fro	om an attornev about divo	rce or dissolu	tion?								
		Yes No If yes, state which spe	<u>-</u>										
	_	either spouse represented by an attorne		No									
		yes, state which spouse(s):	,										
	- 1	, , ,											
		Signature of Party A	Signature o	of Party R									
			Juliatule (/									

II. FINANCIAL INFORMATION

Each party must attach a copy of his or her most recent federal tax return, W2, and at least two of his or her most recent paystubs to verify income and deductions. If work is seasonal, show yearly income. If income or deductions will change after the dissolution, file documents showing expected income and deductions. The following income and deductions are monthly yearly. A. Gross Income (Do not list ATAP or SSI.) Party B Party A Gross wages Value of employer-provided housing/food/BAH/BAS/COLA/etc. Unemployment compensation Permanent Fund Dividend Other: TOTAL INCOME **B.** Deductions Federal, state, and local income tax Social security (FICA) or self-employ. tax Medicare tax Employment security tax (SUI) \$ Mandatory retirement deductions Mandatory union dues Voluntary retirement contributions if plan earnings are tax-free or deferred, up to 7.5% of gross wages & self-employ. income when combined with mandatory contrib. Other mandatory deductions (specify): Spousal support (alimony) ordered in other cases and currently paid Child support ordered for prior children of a different relationship and currently paid In-kind support for prior children of a different relationship calculated under 90.3(a)(1)(D) Work-related child care for children in this case TOTAL DEDUCTIONS C. Net Income TOTAL INCOME from section A TOTAL DEDUCTIONS from section B Subtract deductions from income to get

Not to exceed support amount calculated under 90.3(a)(2). "Prior children" includes children from a different relationship who were born or adopted before the children in this case.

For more information, see Prior Child Deduction Chart and Civil Rule 90.3.

Signature of Party B

NET INCOME

Signature of Party A

	D.	D. Monthly Expenses			Party A	<u>Pa</u>	<u>Party B</u>					
			sing and utilities	\$		\$	\$					
		Food		\$		\$						
			nsportation	\$		<u>,</u>						
		Med	er	\$ ¢		\$ \$						
		Otric		\$ \$								
			TOTAL EXPENSES	\$		\$						
				·								
			NKRUPTCY. Party A Party B fi			-	nding.					
III.			RTY AND DEBT INFORMATION, A									
			s a list of our assets and debts, and ou lieve the division below is fair and		ent about div	iding our assets	and debts.					
	A.	Ass	eets									
		_	scribe all your property and its value. T uired during the marriage, who posses									
		1.	Do you have a written community prunder Alaska law (AS 34.77)?									
					Acquired	Currently	То Ве					
		2	Deal Duagasty (land and buildings)		During	Possessed						
		2.	Real Property (land and buildings) provide street address or legal	Value	Marriage yes no	By A B JT	To A B JT*					
			description	<u>value</u>	yes no							
			\$_									
			\$_									
			<u> </u>									
			<u> </u>									
			[Note: An award of real property to the Consult an attorney with concerns about									
			*For jointly awarded real property at	: address _			:					
			a.	split any p	rofit with	% to Part	y A and					
			% to Party B. Until t									
			all payments and decisions at reimbursed from sale proceed				ill not be					
			b. One of us will buy the other of									
			party's interest in the propert	_*	•							
			value. We also agree that		•	•						
			or we will have a licensed									
			property's fair market value. We will select the appraiser or broker togeth									
			c. <u>Other:</u>									
			Use separate sheets for other real pr	operty to	be awarded	jointly.						
			Signature of Party A		Sign	ature of Party B						

3.	Motor Vehicles (include make,																
	model, license or reg. number, &/or vehicle ID number, for each					۸۵۵	:	ام		<u> </u>		.+1		_	Г.	Da	
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	vehicle, mobile home, ATV, boat, snow machine, etc.)						ıring rriag			FO:		seu		A		0	e u
	Show machine, etc.)			<u>Value</u>	Γ		no			Α	By B	JT	1	Α	E		JT
		\$		value	ŀ	yes	110	'	-	_	ם	JI	1			٠	JI
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	jewelry, computers, guns, tools, etc.) For bank or other finan accounts, you may list the last account number and the nam institution.	icia 3 e	al dig 5 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	institut gits of	tio th	n e <i>A</i> al <u>N</u>	Dur	ired ing age no						A	wa	B B	ed
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	Signature of Party A						5	Signa	atu	re	of P	arty E	3				

	5.	pensior also un	nent Benefits. We undern n plan provider(s) may need the derstand that the court d domestic relations order	require other docu will not draft a wa	ments to accept our iver document or an o	agreement. We order including a
		<u> </u>	ther of us earned retirem			• •
		☐ One	e or both of us earned re	etirement or pension	n benefits during the r	marriage:
			Party A earned retireme	nt or military pension	on benefits during the	marriage:
			Last 3 numbers of account	Value of account	Being paid now? (Y/N)	
			Party B earned retireme	ı nt or military nensid	n benefits during the	marriage:
			Last 3 numbers of account	Value of account	Being paid now? (Y/N)	marriage:
			We agree that we will ea	•	etirement and pensior	benefits.
			This is fair and equitable	e because:		
		☐ Our	agreement about the di	istribution of retirer	nent or military pension	on benefits is
			ached. If the agreement			
			lified domestic relations			
			arty, may make any nece effective date of the ord			
		Δ (converge the present vi	alue statement fro	om the plan adminis	strator for each
		reti	copy of the present variety rement account is attack the same as a <u>present</u>	hed. [Note: This	is required. An acco	unt statement is
		not	the same as a <u>present</u> e concerns about the va	<u>value statement</u> . Justion of pension b	You should consult an	n attorney if you
	6		er Deadline.	idation of pension t	Deficition.]	
	0.		ments from one party to	the other party will	I be done by	
		All docu	uments necessary to cari	ry out this agreeme	ent (including but not l	
			im deeds, refinancing, tr			
		Any <u>pro</u>	<u>operty stored</u> by one par	ty for the other will	be transferred by	
В.	Deb	ts				
			ebt owed whether or not			
			that is owed. Then che narriage, who now owes			
			nclude <u>ALL</u> debts that a			
	etc.)	For cre	edit card, bank card, or c	lebit card accounts,	, you may list the last	4 digits of the
			ber and the name of the			
			e is responsible to pay a still hold the other spou			
	Cicui	icoi illay	our noid the other spou	se responsible for t	ne debe ii payinenes a	re not made.j
		Signa	ature of Party A		Signature of P	arty B

						D	curred uring rriage		Curren Owed			To Be Paid B	
	_		Owed To		\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		no	A	В	JT	A	В	JT
IV.	SPO	USAL MA	INTENANC	E (ALIMO	NY) AGRE	EMENT	,	<u> </u>					<u>_</u>
			per mon	· · · · · · · · · · · · · · · · · · ·	=	=			_	ng			
	until			or unt	il the recip	ient die	s or rer	narrie	S.				
V.	RES		CHANGE O										
			Name. Petiti										
		From:	(Party A's c		-ma\	_ To	: :	(Doub	, Ala n	viou fu	II name		
						To	:	(Party	yASp	rior tu	ıı name)	
			(Party B's c	urrent full n	ame)			(Par	ty B's	prior f	ull nam	ıe)	
		instructio	o New Name ons. Failure t f dissolution	o publish n	otice of yo	our hear	ing on	the c	ourt's	webs			
		Petitioner	r						wants	s to ta	ike and	d be l	egally
		known by	y a <u>new nam</u>		egal name)								
		The reason	ons for this r	equest for	a change c	of name	are:						
			r seeks this ins, or to def		-					_	_	-	-
		Signat	ure of Party	Α				Signa	ature (of Par	tv B		

VI. OTHER AGREEMENTS (IF ANY)	
-	
VII. SIGNATURES AND VERIFICATIONS Do not sign until this petition has been of be separately notarized. You will need to	completely filled out. Each signature on this page must
<u>V</u>	erification
statements made in this petition are true. I al	jury that I have read this petition and believe that all lso certify that I am signing voluntarily and not because state that this petition contains the entire agreement
Signature of Party A	Signature of Party B
Date	
Subscribed and sworn to or affirmed before me at, Alaska, on	
	_··
Clerk of Court, Notary Public or other person authorized to administer oaths. My commission expires:	Clerk of Court, Notary Public or other person authorized to administer oaths. My commission expires:
(SEAL)	(SEAL)