



FORT MOJAVE TRIBAL COURT
 Fort Mojave Indian Tribe of Arizona, California & Nevada Reservation
 Physical & Mailing Address:
 8492 South Highway 95, Mohave Valley, Arizona 86440
 Telephone: (928) 346-5200 Fax: (928) 346-5287

COURT USE ONLY

PETITIONER: _____

Address: _____

City, State, Zip: _____

Phone: Home: _____ Work: _____ Mobile: _____

v.

RESPONDENT: _____

Address: _____

City/State/Zip: _____

Phone: Home: _____ Work: _____ Mobile: _____

Case Number

Division: **CIVIL**

PETITION FOR DISSOLUTION OF MARRIAGE

1. Information about Petitioner

Full Name: _____
 First Middle Last

Physical Address: _____
 Street Address Apt. No.

 City County State Zip Code

Mailing address: Same as above address **OR**

 Street Address Apt. No.

 City County State Zip Code

Date of Birth: _____
 Month Day Year

Petitioner is the husband wife

List all of Petitioner's former or other names or write "None":

First Middle Last

First Middle Last

2. Information about Respondent

Full Name: _____

First Middle Last

Physical Address: _____

Street Address Apt. No.

City County State Zip Code

Mailing address: Same as above address **OR**

Street Address Apt. No.

City County State Zip Code

Date of Birth: _____ Respondent is the husband wife

Month Day Year

List all of Respondent's former or other names or write "None":

First Middle Last

First Middle Last

3. Our Marriage

Petitioner and Respondent were married on (month, day, year) _____, in the City of _____, County of _____, State of _____, Country: _____.

4. 90 Day Requirement

Has Petitioner been living in within the boundaries of the Fort Mojave Indian Reservation for the past ninety (90) days? YES NO

Has Respondent been living within the boundaries of the Fort Mojave Indian Reservation for the past ninety (90) days? YES NO UNKNOWN

5. Marriage Cannot be Saved

There has been an irreparable breakdown of my marriage relationship with Respondent and the marriage cannot be saved.

6. Physical Living Situation

Do Petitioner and Respondent live together at this time? YES NO

If **NO**, the date we separated was: _____
Month Day Year

If **YES**, Petitioner and Respondent are living together because: _____

7. Other Proceedings

Has a separate court case for marriage dissolution, legal separation, or annulment already been started by Petitioner or Respondent elsewhere? YES NO

If YES, the type of court case is: _____, and it was started in _____ Tribal/County in the State of _____

and the Court file number is _____, and the status or outcome of the case is:

Open Closed I do not know

8. Protection or Harassment Order

Is an *Order for Protection* or a *Harassment/Restraining Order* in effect regarding Petitioner and Respondent? YES NO

If YES: The *Order* protects: Petitioner Respondent and the Order was filed in _____ County in _____ State on _____ date and the court file number is _____.

A Copy of the Order Must be Attached

9. Children

“Minor” children are under age 18 or under age 20 but still in high school.

a. Do Petitioner and Respondent have minor children together? YES NO

b. Do Petitioner and Respondent have any adult dependent children who are not able to support themselves because of a physical or mental condition? YES NO

(If you answered YES, you may ask the Court to make an order regarding support for the adult dependent(s).)

c. Has Wife given birth, *since marrying Husband*, to a child who is *not Husband’s child*?
 YES NO

If you answered NO to “c,” skip to “d.” If YES continue below:

i. Fill in the information for all children born to *Wife since marrying Husband*, who are not husband’s biological children.

Full Name of Child	Date of Birth	Age

- ii. Is there a Court Order naming someone other than the Husband as the father of the child(ren) listed in "i"? YES NO If YES, fill in:

Full Name of Child	Date of Court Order	County/State of Order	Court Case No.

- iii. Have the Wife and biological father signed a Recognition of Parentage (ROP) for any of the children listed in (i) above? YES NO

If **YES**, state the full name of the child: _____ and attach to the Petition **a certified copy of the "Recognition of Parentage."**

- iv. Has the Husband signed the "Husband's Non-Paternity Statement" for any of the children listed at (i) above? YES NO

If **YES**, state the name of the child: _____ and attach **a certified copy of the "Husband's Non-Paternity Statement."**

- d. Is Wife pregnant? YES NO UNKNOWN

10. Supplemental Security Income (SSI)

Supplemental Security Income (SSI) is a federal income supplement program. It is available to low-income people if they are over age 65, or blind, or disabled.

- a. Petitioner receives Supplemental Security Income (SSI): NO YES in the amount of \$ _____ per month.
- b. Respondent receives Supplemental Security Income (SSI): NO YES in the amount of \$ _____ per month, or UNKNOWN

11. Petitioner's Employment

a. Is Petitioner employed? YES NO Is Petitioner Self-Employed? YES NO

b. Name and address of Petitioner's employer. (If Petitioner has more than one job, list the Name and Address of each employer.)

Name of Petitioner's Employer _____
(If Self-Employed, list name and business address)

Employer's Street Address

City State Zip Code

Name of Petitioner's Employer (If Self-Employed, list name and business address)

Employer's Street Address

City State Zip Code

12. Petitioner's Gross Income

These income questions ask for monthly income. If you are paid weekly, multiply your weekly income by 4.33 to get monthly income. If you are paid every two weeks, multiply by 2.17 to get monthly income. If you are paid twice a month, multiply by 2.

Sources of Income

Amount per month (or zero) before taxes and deductions

Self Employment Income \$ _____ per month

If you are **self-employed**, calculate your net monthly revenues as follows: (Annual gross revenues minus annual ordinary and necessary business expenses) divided by 12 = Net Monthly Revenue. Also, **attach Schedule C** from last year's tax return to this Petition.

Income from all jobs \$ _____ per month

Commissions from all jobs \$ _____ per month

Unemployment benefits \$ _____ per month

Social Security Retirement, Survivors or

Disability Income (SSDI or RSDI) \$ _____ per month
 Investments or Rental Income \$ _____ per month
 Annuity payments \$ _____ per month
 Pension or Disability from work or military \$ _____ per month
 Workers Compensation \$ _____ per month
 Court-ordered spousal maintenance you receive \$ _____ per month
 Other _____ \$ _____ per month
 Identify Source

Total Gross Income \$ _____ per month

Does Petitioner receive child support payments? YES NO

If YES, Petitioner receives child support payments from _____
 (name(s) of payor(s)) in the total amount of \$ _____ per month.

13. Respondent's Employment

a. Is Respondent employed? YES NO Is Respondent Self-Employed? YES NO

b. Name and address of Petitioner's employer. (If Petitioner has more than one job, list the Name and Address of each employer.)

Name of Respondent's Employer _____
 (If Self-Employed, list name and business address)

 Employer's Street Address

 City State Zip Code

Name of Respondent's Employer (If Self-Employed, list name and business address)

 Employer's Street Address

 City State Zip Code

14. Respondent's Gross Income

Petitioner has no information about Respondent's income. **OR**

Petitioner does not have detailed information about Respondent's income, but has good reason to believe that Respondent's pay is \$ _____ per week month year, with bonuses, overtime or commissions in the additional amount of \$ _____ per week month year. This is Respondent's Net Income (after taxes and deductions) or Gross Income (before taxes and deductions.) **OR**

Petitioner has detailed information about Respondent's income. (If this is true, fill out the income information below.)

The Income questions ask for monthly income. If Respondent is paid weekly, multiply weekly income by 4.33 to get monthly income. If Respondent is paid every two weeks, multiply by 2.17 to get monthly income. If Respondent is paid twice a month, multiply by 2.

Sources of Income

Amount per month (or zero) before taxes and deductions

Self Employment Income \$ _____ per month

If you are **self-employed**, calculate your net monthly revenues as follows: (Annual gross revenues minus annual ordinary and necessary business expenses) divided by 12 = Net Monthly Revenue. Also, **attach Schedule C** from last year's tax return to this Petition.

Income from all jobs \$ _____ per month

Commissions from all jobs \$ _____ per month

Unemployment benefits \$ _____ per month

Social Security Retirement, Survivors or

Disability Income (SSDI or RSDI) \$ _____ per month

Investments or Rental Income \$ _____ per month

Annuity payments \$ _____ per month

Pension or Disability from work or military \$ _____ per month

Workers Compensation \$ _____ per month

Court-ordered spousal maintenance you receive \$ _____ per month

Other _____ \$ _____ per month

Identify Source

Total Gross Income

\$ _____ per month

15. Medical / Dental Insurance

a. Does Petitioner have insurance coverage **through his/her employment?**

Medical: YES NO Dental: YES NO

If **YES**, this medical insurance covers: Petitioner Respondent

and this dental insurance covers: Petitioner Respondent

b. Does Respondent have insurance coverage **through his/her employment?**

Medical: YES NO UNKNOWN

Dental: YES NO UNKNOWN

If **YES**, this medical insurance covers: Petitioner Respondent

and this dental insurance covers: Petitioner Respondent

c. Does Petitioner receive Medical Assistance or Care through the State? YES NO

If YES, state insurance: _____

d. Does Respondent receive Medical Assistance or Care through the State? YES NO

UNKNOWN If YES, state insurance: _____

16. Spousal Maintenance

Spousal Maintenance is money paid by one spouse to the other for living expenses.

Check only one box:

Petitioner and Respondent can each pay their own living expenses and do not need spousal maintenance at this time or in the future.

Petitioner or Respondent may need spousal maintenance in the future. The court should reserve maintenance to allow either party to ask for spousal maintenance in the future because: (explain why you want to do this) _____

Petitioner needs spousal maintenance from Respondent now. Petitioner is _____ years of age. Petitioner and Respondent have been married for _____ years. Petitioner has the following education: _____ . Petitioner's gross monthly income totals \$_____. Petitioner's monthly expenses total \$_____ and Petitioner is not able to maintain the standard of living established during the marriage because: _____

Respondent has the ability to pay Petitioner \$_____per month for spousal maintenance.

Respondent needs spousal maintenance from Petitioner now. Respondent is _____ years of age, Petitioner and Respondent have been married for _____ years. Respondent has the following education:_____. Respondent's gross monthly income totals \$_____. Respondent's monthly expenses total \$_____, and Respondent is not able to maintain the standard of living established during the marriage because: _____

Petitioner has the ability to pay Respondent \$_____per month for spousal maintenance.

17. Vehicles

Vehicles are cars, trucks, boats, motorcycles, snowmobiles, personal watercraft, all-terrain vehicles etc. owned by husband or wife together or separately, including vehicles purchased after separation:

Does Petitioner own a vehicle? YES NO

Does Respondent own a vehicle? YES NO UNKNOWN

List all vehicles owned by husband or wife together or separately:

Vehicle Type (car/boat/etc.)	Year/Make/Model	Name(s) on Title	Value	Balance Owed	Monthly Payment
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$

18. Marital Property

Marital property means almost anything that you or your spouse now own that was received or bought during the marriage, even during the times you were separated. Marital Property includes household goods, furniture, jewelry, boats, real estate, and other things. Marital property does *not* include a gift or inheritance received by one spouse *alone*.

Has the marital property been divided between the Petitioner and Respondent to Petitioner's satisfaction? YES NO

If **NO**, Petitioner requests the following marital property: _____

19. Non-Marital Property

Non-marital property means: (1) anything that you or your spouse owned before the marriage; (2) anything that you or your spouse received as a gift, bequest, devise, or inheritance, *to you or your spouse alone*; (3) anything that you or your spouse got in trade or in exchange for your non-marital property; (4) anything that is an increase in the value of non-marital property; (5) anything you or your spouse received after the valuation date set by the court; or (6) anything defined as non-marital property by a valid antenuptial contract.

a. Does Petitioner have non-marital property? YES NO

If YES, list Petitioner's non-marital property: _____

b. Does Respondent have non-marital property? YES NO UNKNOWN

If YES, list Respondent's non-marital property: _____

20. Cash & Accounts – Not including Pension and Employer-Funded Retirement Accounts

Does Petitioner have money in banks, savings, cash or investments? YES NO

Does Respondent have money in banks, savings, cash or investments? YES NO

UNKNOWN

If YES,

- a. List all accounts owned by you alone, your spouse alone, or owned by both of you jointly including those opened after separation. “Type of Account” means checking, savings, money market accounts, certificates of deposit, stocks, bonds, stock options, mutual funds, savings bonds, Treasury Bills, etc.

Do not include Pension or Employer-Funded Retirement Accounts (listed at #26).

Financial Institution	Type of Account	Account # Last 4 Digits Only	Amount	Owner (Name(s) on Account)
		XX	\$	
		XX	\$	
		XX	\$	
		XX	\$	
		XX	\$	
		XX	\$	

- b. List cash not listed at “a”:

Petitioner has cash in the amount of \$_____.

Respondent has cash in the amount of \$_____OR UNKNOWN

21. Business Interest

Does Petitioner have an interest in a business? YES NO

Does Respondent have an interest in a business? YES NO UNKNOWN

If YES, the name of the business is _____, the address is

_____ and the value is \$_____. How did you arrive at this value? _____

22. Manufactured Home

Does Petitioner own a manufactured home? YES NO

Does Respondent own a manufactured home? YES NO UNKNOWN

If either Petitioner or Respondent own a manufactured home, together or separately, complete the following information:

a. Address of the manufactured home: _____

in the city of _____, state of _____

b. What type of home is it? (single, double-wide etc.) _____

c. Whose name(s) is on the title? _____

d. When was the home purchased? _____

e. What was the purchase price? \$ _____

f. What is the current values of the home? \$ _____

g. How did you arrive at that amount as the current value? _____

h. How much money is still owed on the home? \$ _____

i. If money is owed on the home, who is the money owed to? _____

j. Do you own the land the home sits on, or do you rent a lot? Rent Own

Note: If you own the lot, you must list the land at Paragraph 25.

23. Real Property - Land, Buildings, Contracts for Deed

All real property now owned by Petitioner or Respondent together or separately must be listed. Include real property acquired before the marriage, during the marriage, and after separation.

- a. Do Petitioner and Respondent jointly own real property? YES NO
- b. Does Petitioner own real property solely in his/her own name or with someone other than Respondent? YES NO
- c. Does Respondent own real property solely in his/her own name or with someone other than Petitioner? YES NO UNKNOWN
- d. How many properties are owned by you and your spouse in total?
 None One Two Three _____

If you or your spouse own real property, separately or together, complete the following information about the property. If there is more than one piece of real property, photocopy and complete a "Real Property Information Attachment" page for each piece of property. Staple the additional sheets to this Petition.

24. Retirement Plans

Does **Petitioner** have a retirement account? (IRA, 401(k), 403(b) or other)

YES NO If **YES**:

- a) The account number is: (last 4 digits only) _____
- b) The name of the bank that has the account is: _____
- c) The current account balance is: _____

Has **Petitioner**, or Petitioner's past or present employer, union, or other group, paid money into a pension, profit sharing, or other retirement plan for Petitioner?

YES NO If **YES**:

- a) The name of the plan
is: _____
- b) The employer, union, or group providing the plan is: _____
- c) The date Petitioner began working at the job or joined the union or group plan is: _____

- d) The type of plan is: (e.g. defined benefit, defined contribution) _____

- e) The present value of the pension or plan is: _____

Does **Respondent** have a retirement account? (IRA, 401(k), 403(b) or other)

YES NO UNKNOWN If **YES**:

- a) The account number is: (last 4 digits only) _____
- b) The name of the bank that has the account is: _____
- c) The current account balance is: _____

Has **Respondent**, or Respondent's past or present employer, union, or other group, paid money into a pension, profit sharing, or other retirement plan for Respondent?

YES NO UNKNOWN

If **YES**, and it is a **Pension, Profit-Sharing, or other Retirement Plan**:

- a) The name of the plan is: _____
- b) The employer, union or group providing the plan is: _____
- c) The date Respondent began working at the job or joined the union or group plan is:

- d) The type of plan is: (e.g. defined benefit, defined contribution) _____

- e) The present value of the pension or plan is: _____

b. Petitioner has no intent to defraud or mislead anyone by changing his/her name:

TRUE FALSE

c. Has Petitioner been convicted of a felony? YES NO If YES, answer i. and ii:

i. Petitioner has given notice of this request for name change.

ii. Petitioner has attached to this Petition a *Proof of Service* of the notice.

27. Other: Include other facts you think the Court should know.

BASED UPON THE ABOVE INFORMATION, Petitioner requests that the Court issue a final judgment and decree granting the following relief:

1. Dissolving the bonds of matrimony between Petitioner and Respondent to end the marriage.

2. Medical and Dental Insurance for the Parties

a. Ordering each party to provide for his or her own medical dental insurance.

b. Ordering _____ (full name) to provide medical
dental insurance for _____ (full name).

c. Allowing _____ (full name), at his/her own expense, to
continue the dependent coverage available under the other party's insurance plan,
pursuant to federal and state statutes.

d. Reserving the issue of medical and dental insurance for the parties.

3. Spousal Maintenance

- a. Denying maintenance to Petitioner and Respondent.
- b. Reserving the issue of maintenance.
- c. Ordering Petitioner Respondent to pay spousal maintenance to
 Petitioner Respondent.

4. Vehicles

Awarding the vehicles as follows and ordering the party receiving the vehicles to pay for any loans or insurance for such vehicle:

Year / Make / Model	Awarded to:

5. Marital Property

Dividing the parties' marital property, household goods, furniture and furnishings **either**:

- a. As currently divided **OR**
- b. As follows (attach additional page if necessary):

To Petitioner: _____

To Respondent: _____

6. Non-Marital Property

Dividing the parties non-marital property

- a. As currently divided **OR**
- b. As follows (attach additional page if necessary):

To Petitioner: _____

To Respondent: _____

7. Cash and Accounts

a. Awarding the savings and investments as follows:

Institution	Type of Account	Account # (Last 4 Digits Only)	Amount	Awarded To
		XX	\$	
		XX	\$	
		XX	\$	
		XX	\$	
		XX	\$	
		XX	\$	

- b. Awarding any cash not included in "a" above to the party who currently has the cash **OR**
 Awarding the cash as follows: _____

8. Business

- None **OR**
 Awarding the parties' **business** as follows: _____

9. Manufactured Home

- None **OR**
 Awarding the manufactured home located at: _____

Street Address

City

State

Zip Code

to Petitioner Respondent. The debt on the manufactured home owed to: _____
_____ shall be paid by Petitioner Respondent.

10. Real Property

- None **OR**
 Awarding solely to Petitioner Respondent all right, title, and interest of husband and wife in the real property located at:

Street address _____

in the City of _____, County of _____,

State of _____, which has the following legal description: _____

The following mortgages and loans are to be paid, after the divorce is final, by Petitioner

Respondent:

1st Mortgage: Amount currently owed: \$ _____ and name of lender: _____

2nd Mortgage: Amount currently owed: \$ _____ and name of lender: _____

and subject to the following liens or other agreements:

A lien in favor of Petitioner Respondent in the amount of \$ _____

Other request regarding the property: (Describe the request fully) _____

11. Additional Real Property

None **OR**

Awarding solely to Petitioner Respondent all right, title, and interest of husband

and wife in the real property located at:

Street address _____

in the City of _____, County of _____,

State of _____, which has the following legal description: _____

The following mortgages and loans are to be paid, after the divorce is final, by Petitioner

Respondent:

1st Mortgage: Amount currently owed: \$ _____ and name of lender: _____

2nd Mortgage: Amount currently owed: \$ _____ and name of lender: _____

and subject to the following liens or other agreements:

A lien in favor of Petitioner Respondent in the amount of \$ _____

Other request regarding the property: (Describe the request fully) _____

12. Retirement Funds

a. Awarding Petitioner's pension, profit sharing, retirement plan, I.R.A., or 401(k) or other retirement fund as follows:

Petitioner has no retirement funds **OR**

100% to Petitioner **OR**

Dividing Petitioner's retirement benefits fairly and equitably between the parties as follows:

b. Awarding Respondent's pension, profit sharing, retirement plan, I.R.A., or 401(k) or other retirement fund as follows:

Respondent has no retirement funds **OR**

100% to Respondent **OR**

Dividing Respondent's retirement benefits fairly and equitably between the parties as follows:

13. Debts

a. Dividing the debts as follows and ordering each party to hold the other harmless from any responsibility for the debts so divided. *Include all debts listed at #27 above.*

Debt Owed To:	To Be Paid By:

b. Ordering that each party is solely responsible for paying any other debts incurred solely by him or her and ordering each party to hold the other harmless from any responsibility for such separately incurred debts.

14. Name Change

Petitioner is not requesting a name change **OR**

Changing Petitioner's name to: _____
First Middle Last

15. Other: _____

16. Ordering such other relief as the Court deems just and equitable.

Read and Sign the Verification and Acknowledgments.

Verification and Acknowledgments

- a. I have read this document. To the best of my knowledge, information, and belief the information contained in this document is factual and relevant under existing law.
- b. I have not been determined by any Court or in any other State to be a frivolous litigant and I am not the subject of an Order precluding me from serving or filing this document.
- c. I am not serving or filing this document for any improper purpose, to harass the other party, to cause delay or needless increase in the cost of litigation, or to commit a fraud on the Court.
- d. I understand that if I am not telling the truth, misleading the Court, or serving or filing this document for an improper purpose, the Court can order me to pay money to the other party, including the reasonable expenses incurred by the other party because of the serving or filing this document, Court costs, and reasonable attorney's fees. I understand that I could also be prosecuted for perjury if I am not telling the truth in my Petition.

DATE: _____ / _____ / _____
Month Day Year

Petitioner's Signature

(Sign Only in Presence of Notary Public or Clerk)

Subscribed and sworn to
before me this _____ day of
_____, 20 _____

Street Address: _____
City, State: _____
Zip Code: _____
Telephone: () _____

Notary Public or Clerk