

Instructions for FILING Annulment –With Children

23-2702. Grounds for annulment. (a) The district court shall grant a decree of annulment of any marriage for either of the following grounds: (1) The marriage is void for any reason; or (2) the contract of marriage is voidable because it was induced by fraud.

(b) The district court may grant a decree of annulment of any marriage if the contract of marriage was induced by mistake of fact, lack of knowledge of a material fact or any other reason justifying rescission of a contract of marriage.

History: L. 1963, ch. 303, 60-1602; L. 1982, ch. 152, § 2; Jan. 1, 1983.

Source or Prior Law:

G.S. 1868, ch. 80, §§ 639, 648; L. 1909, ch. 182, §§ 663, 677; R.S. 1923, [60-1501](#), 60-1515; L. 1931, ch. 228, § 1; L. 1939, ch. 232, § 1; L. 1947, ch. 318, § 1; L. 1951, ch. 347, § 1.

What is the difference between an **ANNULMENT** and a **DIVORCE**?

A **DIVORCE** ends a marriage

An **ANNULMENT** means no valid marriage ever existed

Should you choose to act as your own attorney, it is up to you to decide if you need to file for a divorce or an annulment. The Court Clerks **cannot** advise you on which forms to file.

You will need the following forms: Civil Information Sheet, Petition for Annulment, Voluntary Entry of Appearance, Request for Service Form, Summons (The Civil Clerk will print this for you), Domestic Relations Affidavit, Child Support Worksheet, Parenting Plan, Kansas Payment Center Information Sheet, Vital Statistics Worksheet, Notice of Hearing and Decree of Annulment.

These forms are for use in annulments where the filing person and spouse have children from their relationship together. The following forms will be used **ONLY** if there is no other way to notify your spouse of the divorce filing as provided in instruction 4d: Affidavit for Service by Publication, Order Allowing Service by Publication and Notice of Suit.)

WARNINGS

1. **The forms provided are basic forms for simple annulments. They do not deal with every situation. An annulment can be complicated and using legal forms without an attorney’s help can harm your legal rights.**
2. **The Clerk of the District Court cannot help you prepare these forms. The Clerk cannot give legal advice about your rights or responsibilities and can only provide very limited information about the annulment process. If you have any questions, you should contact an attorney. There is an attorney available on Wednesdays in the Self-Help Center, 3rd floor.**
3. **It is illegal for anyone who is not licensed to practice law in Kansas to: (A) give another person advice about that other person’s legal rights or duties; (B) help another person to select, draft, or complete any legal document that affects the other person’s rights or duties; (C) represent another person in court; and (D) help another person negotiate legal rights or responsibilities.**

4. **Courts require anyone filing an annulment case to follow court rules. You must follow the court rules or you will not be able to finish your case. Self-represented persons are expected to know the rules as if you were an attorney.**
5. **If your spouse is active-duty military, you should consult an attorney because you must meet specific additional requirements.**
6. **Property decisions are binding on you and your spouse and may not be changed. Agreements are NOT binding on, and do not affect the rights of anyone other than you and your spouse.**
7. **If one spouse is to receive part of the other spouse's retirement benefits, additional documents may be needed to complete the transfer. You will need to seek the advice of an attorney to complete this process because it is outside the scope of these forms.**

Facts About Filing for Divorce in Kansas:

- * You or your spouse must have lived in Kansas for at least sixty (60) days before filing a Petition for Divorce with the court.
- * You must start the legal process by filing certain documents, and paying a filing fee, with the Clerk of the District Court in the county where you or your spouse lives.
- * Once your case is filed, you will be given a case number which must be on all documents you file with the court in the future.
- * If you are filing for a divorce without the assistance of an attorney, you are responsible for completing all the necessary forms and the Clerk of the District Court cannot help you prepare any legal documents or provide any legal advice.
- * Once you have filed your Petition for Divorce, it is important that you inform the Clerk of the District Court if you or your spouse's address changes.

Terminology:

Petitioner = Person who files the Petition
Respondent = Person who did not file the Petition
Parties = Petitioner and Respondent

Case Caption:

The section above the title of every document is called the case caption. It identifies which county the case was filed in, the case number, and the names of the people involved in the case. The person who originally filed the petition is listed on the top line and is called the "Petitioner." The person who did not file the petition is listed on the lower line and is called the "Respondent." These name designations remain the same for the entire case including in all documents filed with the court after the divorce is final.

Instructions for filing an annulment:

1. Complete the Civil Information Sheet, Domestic Relations Affidavit, Parenting Plan, Petition for Annulment and Self Represented Litigant Certification form.
2. Sign the Petition for Annulment in front of a notary public. Notary publics may commonly be found in law firms, title companies and financial institutions, i.e. banks and credit unions.
3. File with the Clerk of the District Court:
 - *the original Petition for Annulment with required copies;
 - *the original Domestic Relations Affidavit with required copies;
 - *the original Civil Information Sheet;
 - *the original SRL form
 - *the Request for Service Form, if not filing a Voluntary Entry of Appearance
 - *the Order for ECT classes
 - *Pay the required filing fee of \$195.00.
4. You must notify your spouse that you have filed a Petition for Annulment in one of the following ways:
 - a. “Voluntary Entry of Appearance”: Your spouse signs a Voluntary Entry of Appearance form in front of a notary public, which acknowledges receipt of the Petition for Divorce. The Voluntary Entry of Appearance with your spouse’s original signature is then filed with the Clerk.
 - b. “Sheriff’s Service”: You must fill out a Request for Service Form, requesting that the sheriff deliver the Petition for Annulment to your spouse. If your spouse lives in Kansas, you must pay a sheriff’s service fee. If your spouse lives in a State other than Kansas, it is your responsibility to find out the procedures required by the sheriff in that state and county and to pay any fees required.
 - c. “Certified Mail Service”: You must mail the summons and Petition for Annulment by certified mail - return receipt requested to your spouse at his or her last known residential address. File the “green” “return-receipt card” with the Clerk when you receive it from the US Postal Service.
 - d. “Publication”: If you cannot provide notice of the annulment to your spouse under either (a), (b), or (c), then you may be able to provide notice of the divorce by publishing notice in a local newspaper. In order to obtain “publication service,” you must request permission to do so by filing the “Affidavit for Service by Publication,” and obtaining an order from the assigned judge allowing you to publish notice. After you obtain the signed “Order Allowing Service by Publication”, you must then publish notice following the process set out in K.S.A. 60-307. You must obtain “proof of publication” from the newspaper and file the proof with the court. Court personnel cannot help you with this process.

- e. “Court Process Server”. You must fill out a Request for Service Form, requesting that the Court Process Server deliver the Petition for Annulment to your spouse. The Court Process Server can only be used if the other party can be served in Wyandotte County.
5. ATTEND THE EFFECTIVE CO-PARENTING TECHNIQUES CLASS. You are required to attend the “ETC” class with Domestic Court Services prior to your final hearing. Classes are currently being held via ZOOM and registration is required. The Court will issue the ETC order when paternity is established by admission or hearing. More information is available on our website www.wycodistrictcourt.org/effective-co-parenting-technique. Proof of attendance of the ETC class will be electronically filed with the clerk’s office by Domestic Court Services prior to your final hearing
6. Contact the Administrative Assistant for the division your case is assigned to to find out how to get a final hearing date and time for your annulment. Different courts have different procedures and requirements. Kansas law provides that an annulment decree cannot be entered until at least 60 days after the petition filing date.
7. Send a copy of the Notice of Hearing to your spouse and file the original of that notice with the Clerk. Certified mail is the preferred method of mailing.
8. If required by local rules, attend and complete any required parenting, co-parenting, divorce or other required classes prior to your final divorce hearing.
9. Complete the Child Support Worksheet (CSW). Instructions for the calculation of child support and completion of the CSW may be found on the Kansas Judicial Branch website at <http://www.kscourts.org/rules-procedures-forms/Child-Support-Guidelines/default.asp>, or by visiting your local law library. The CSW must be completed prior to your hearing.
10. You should complete paragraphs 8, 12-13, 20-23, and 25 of the Decree of Annulment before the final annulment hearing. The remaining paragraphs of the Decree of Annulment are for the judge to complete. Legal descriptions of your house and land may usually be obtained from your local Register of Deeds office.
11. Attend the final annulment hearing, taking with you:
 - a. The Decree of Annulment and at least 3 copies;
 - b. Any written property division agreement signed by you and your spouse;
 - c. Written proof that you gave your spouse notice of the hearing date and time;
 - d. Required copies of the completed Domestic Relations Affidavit;
 - e. Required copies of the completed Parenting Plan;
 - f. Required copies of the completed Child Support Worksheet;
 - g. The Kansas Payment Center Information Sheet (for child support); and,
 - h. The completed Vital Statistics Worksheet.
12. When you present the decree to the judge, you should be prepared to tell the judge about the facts stated in the petition, that you and your spouse are incompatible, and why your proposed agreements are fair.

13. The process of obtaining Income Withholding Orders is separate from the annulment process and is outside the scope of these forms. You will need to check with the Clerk to find out what the local procedures are for obtaining these orders.
14. If the judge orders either parent to pay child support or spousal maintenance (also called spousal support), the child support or spousal maintenance shall be enforced by the Wyandotte County District Court Trustee's Office (913-573-2992), pursuant to local Court Rules, if the case is not an IV-D case - cases in which State funding is received by one or both of the parties. If the case is denoted as an IV-D case, then only Spousal Maintenance orders in the case are enforced by the District Court Trustee's Office and the Child Support enforced may only be pursued through the Department of Children and Families (DCF) through Maximus (913-363-5719). The Court Trustee's enforcement fee shall be assessed on all spousal maintenance and child support amounts that are enforced by the Wyandotte County District Court Trustee's Office. **The fee is 5% of the base spousal maintenance and/or child support amounts and has been calculated and included in the final amounts ordered herein, if applicable.** The enforcement fee will be deducted by the Kansas Payment Center, before distribution to the child support or spousal maintenance receiving party.
15. Once the judge has signed the original decree, take the original and all copies to the Clerk who will file the original. Provide your former spouse a file stamped copy of the decree and keep the remaining copies.

Self-Represented Litigant Certification Form

By signing this form, I certify that the attached filing complies with the certification requirements in the Temporary Rule for Filing in a District Court by a Self-Represented Litigant.

I CERTIFY: *(You must complete this section.)*

- I signed the attached filing and provided my name, address, telephone number, email address (if available), and fax number (if available).

I ALSO CERTIFY: *(Only complete **one** of the next two sections.)*

My document **does not contain prohibited personally identifiable information** (“PII”). I checked my document for PII and made sure that my document meets the requirements of the Temporary Rule. It meets those requirements because:

- my document does not include any of the items listed in [Supreme Court Rule 24\(b\)](#). *(This list is printed on the back of this form for reference.)*
- my document is a Kansas Judicial Council form and I have only provided information that is required on the form.
- the information in my document meets an exception in [Supreme Court Rule 24\(c\)](#). *(This list is printed on the back of this form for reference.)*

OR:

My document **may contain prohibited PII**, but I am asking the court to file it confidentially under seal for the following reason: *(Choose one.)*

- the court entered a prior order on _____ that seals this document.
- the document I am filing now asks the court to issue an order to seal a different document that is not yet filed *(describe the document without using PII)*: _____.
- the document I am filing now asks the court to seal a document that is already filed in this case *(describe the document without using PII)*: _____.

Date: _____

Signature: _____

Name of Party: _____

Personally Identifiable Information – Supreme Court Rule 24(b)

- (1) the name of a minor who is not a named party in a case and, if applicable, the name of a person whose identity could reveal the name of a minor who is not a named party in a case;
- (2) the name of an alleged victim of a sex crime;
- (3) the name of a petitioner in a protection from abuse case;
- (4) the name of a petitioner in a protection from stalking, sexual assault, or human trafficking case;
- (5) the name of a juror or venire member;
- (6) a person's date of birth except for the year;
- (7) any portion of the following:
 - (A) an email address except when required by statute or rule;
 - (B) a computer username, password, or PIN; and
 - (C) a DNA profile or other biometric information;
- (8) the following numbers except for the last four digits:
 - (A) a Social Security number;
 - (B) a financial account number, including a bank, credit card, and debit card account;
 - (C) a taxpayer identification number (TIN);
 - (D) an employee identification number;
 - (E) a driver's license or nondriver's identification number;
 - (F) a passport number;
 - (G) a brokerage account number;
 - (H) an insurance policy account number;
 - (I) a loan account number;
 - (J) a customer account number;
 - (K) a patient or health care number;
 - (L) a student identification number; and
 - (M) a vehicle identification number (VIN);
- (9) any information identified as personally identifiable information by court order; and
- (10) the physical address of an individual's residence.

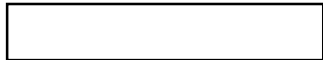
Exceptions – Supreme Court Rule 24(c)

- (1) an account number that identifies the property alleged to be the subject of a proceeding;
- (2) the name of an emancipated minor;
- (3) information used by the court for case maintenance purposes that is not accessible by the public;
- (4) information a party's attorney or a self-represented litigant reasonably believes is necessary or material to an issue before the court;
- (5) the first name, initials, or pseudonym of any person identified in Rule 24(j)(2)(A) to (j)(2)(E);
- (6) any information required to be included by statute or rule; and
- (7) any information in a transcript.

NOTE: Supreme Court Rule 24 includes multiple comments that explain the rule's requirements and exceptions. The summary above is provided for reference, but you should read the rule with comments to fully understand the rule. You will find the full rule here:

<https://www.kscourts.org/KSCourts/media/KsCourts/Rules/Rule-24.pdf>





For Office Use Only

CIVIL COVER SHEET

The civil cover sheet neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Clerk of the District Court for the purposes of initiating the civil docket sheet. This information will not be available to the public and this document will be stored in a separate location from the case file and then destroyed within a reasonable time. A new case **will not be accepted** without a cover sheet attached. (THIS FORM MUST BE TYPED OR PRINTED LEGIBLY). This form can be found at www.kscourts.org.

NATURE OF SUIT (Mark only one - If the case involves more than one of the following categories, indicate the category having the highest dollar value.)

CIVIL If a CH. 61: \$ _____ (Judgment Demand Amount)

- TORT**
 - Asbestos Product Liability
 - Automobile Tort
 - Intentional Tort
 - Legal Malpractice
 - Medical Malpractice
 - Other Professional Malpractice
 - Premises Liability
 - Slander/Libel/Defamation
 - Tobacco Product Liability
 - Toxic/Other Product Liability
 - Other Tort
- CONTRACT**
 - Buyer Plaintiff
 - Employment Dispute - Discrimination
 - Employment Dispute - Other
 - Fraud
 - Landlord/Tenant - Forcible Detainer
 - Landlord/Tenant Dispute - Other
 - Seller Plaintiff (debt collection)
 - Other Contract
- CIVIL APPEALS**
 - Administrative Agency
 - Other Civil Appeal
 - Tax Appeal
- REAL PROPERTY**
 - Eminent Domain
 - Mortgage Foreclosure
 - Other Real Property
 - Tax Foreclosure
- MISCELLANEOUS**
 - 60-1507
 - Habeas Corpus
 - Other Writs
 - Name Change
 - Post Judgment Elevation LM to CV
 - Transfer Pre-Judgment LM to CV
- STATE TAX WARRANT**
- OTHER CIVIL**
- SMALL CLAIMS**

DOMESTIC

- MARRIAGE DISSOLUTION/DIVORCE**
- PROTECTION FROM ABUSE**
- PROTECTION FROM STALKING**
- UIFSA**
- OTHER DOMESTIC RELATIONS**
- NON-DIVORCE SUPPORT, CUSTODY OR VISITATION**
- PATERNITY**
- DOMESTIC FOREIGN JUDGMENT (OUT OF COUNTY)**

PROBATE/ESTATE

- GUARDIAN/CONSERVATOR**
 - Conservatorship/Trusteeship
 - Guardianship - Adult
 - Guardianship - Minor
 - Guardian/Conservator - Adult
 - Guardian/Conservator - Minor
- DETERMINATION OF DESCENT**
- ADOPTION**
- SEXUALLY VIOLENT PREDATOR**
- FOREIGN ADOPTION**
- DECEDENT ESTATE**
- CARE AND TREATMENT**
- REFUSAL TO GRANT LETTERS**
- TERMINATION OF JOINT TENANCY**
- FILING WILL AND AFFIDAVIT**
- TERMINATION OF LIFE ESTATE**
- OTHER PROBATE/ESTATE**

JURY DEMAND YES (Check yes only if jury demand is included in petition or as a separate pleading)
 NO

SUMMONS ATTACHED: YES NO **SHERIFF'S PROCESS FEE ATTACHED** YES NO

SERVICE BY: PROCESS SERVER/ATTORNEY
 SHERIFF IN STATE _____ (County)
 SHERIFF OUT OF STATE _____ (State)

PLAINTIFF/SUBJECT INFORMATION

(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: _____

ADDRESS: _____

PHONE: _____ SEX: _____

CELL PHONE: _____

E-MAIL: _____

SSN: _____ DOB: _____

DL OR STATE ID NO: _____
State and Number

ALIAS NAMES USED: _____

ATTORNEYS

(Firm Name, Address, Telephone Number and Supreme Court ID Number)

DEFENDANT/OTHER PARTY INFORMATION

(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: _____

ADDRESS: _____

PHONE: _____ SEX: _____

CELL PHONE: _____

E-MAIL: _____

SSN: _____ DOB: _____

DL OR STATE ID NO: _____
State and Number

ALIAS NAMES USED: _____

ATTORNEYS

(Firm Name, Address, Telephone Number and Supreme Court ID Number)

FOR DOMESTIC CASES - NAME, DATE OF BIRTH AND SOCIAL SECURITY NUMBER OF EACH DEPENDENT CHILD:

(Name)

(Date of Birth)

(Social Security Number)

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

The requirement that Social Security numbers be included on domestic cases is mandatory, and authorized by the Supreme Court and federal law. On non-domestic cases, the Social Security number is not mandatory. The number is used for purposes of identification and may be disclosed as permitted by law. This form is not considered to be a public record.

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT

In the Matter of the Marriage of

Petitioner

Case No. _____

and

Respondent

PETITION FOR ANNULMENT WITH CHILDREN

Petitioner states:

1. I am now living at: _____ and I have lived there since _____.

2. My spouse is now living at _____ and has lived there since _____.

3. We were married on _____, 20____ in _____ (city), _____ (state) and have been married since that date.

4. We should receive an annulment because:

Marriage is void because:

Marriage is based on fraud and is voidable for the following reasons:

Marriage was induced by the following mistake of fact:

Because the marriage was induced by the following lack of knowledge of a material fact:

5. Alternately, we are incompatible and should receive a divorce.
6. The court should divide our property and debt as we agree or as the court may decide.
7. I do do not request spousal support.
8. Petitioner Respondent should be restored to the following former name:
_____.
9. My spouse is is not now on active duty with the United States Military.
10. Wife is is not pregnant when this Petition is filed.
11. The following children have been born during our marriage:

| <u>Name</u> | <u>DOB</u> | <u>SSN (last 4)</u> |
|-------------|------------|---------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

12. I request an annulment or, in the alternative a divorce, a division of property and debt, support orders, and other appropriate orders.

Signature

Name: _____
 Address: _____
 City, State, Zip: _____
 Telephone Number: _____
 Email Address: _____

VERIFICATION

STATE OF KANSAS)

) ss.

COUNTY OF WYANDOTTE)

I swear or affirm that the statements made in this Petition for Annulment or, in the Alternative Divorce are true and that I am the person filing this petition.

Filing Party

SUBSCRIBED AND SWORN to before me, a Notary Public, on _____, 20____

Notary Public

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS

In the Matter of the Marriage of

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Enter your spouse's full legal name above)

and

Case Number _____

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Enter your full legal name above)

VOLUNTARY ENTRY OF APPEARANCE

1. What is your name? (Enter your full legal name on the lines below)

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

2. Where do you receive mail?

This is the address the court will use to send information about your case to you. If you want to change your mailing address, you must tell or send the clerk of the district court your new mailing address.

(Street or P.O. Box Number)

(City) (State) (Zip Code)

3. What is your telephone number?

(Telephone Number with Area Code)

4. What is your email address?

(Email Address)

5. Are you on active duty with the United States military? (Check one of the three boxes.)

If you are on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may apply. You should contact a lawyer about this situation before filing this Voluntary Entry of Appearance.

- Yes.
 No.
 I do not know.

6. If you are on active duty with the United States military, do you give up your rights under the Servicemembers Civil Relief Act for this case? (Check one of the three boxes.)

If you are on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may apply. You should contact a lawyer about this situation before filing this Voluntary Entry of Appearance.

- Yes.
 No.
 I do not know.

7. How do you want to get documents and notifications about this divorce case: (Check one of the two boxes.)

- mailed** to me (paper copies will be mailed to the address given in #2 above).
 emailed to me (documents will be emailed to the email address given in #4 you will not receive paper copies of documents in the mail).

8. I received a copy of the petition filed in this case. I am not requiring that the sheriff or other person hand me the summons and petition as Kansas law may require.

Sign Below in the Presence of a Notary Public

Here are the most common types of businesses where you can find a Notary Public.

Banks, Law Firms or Law Offices, Real Estate Firms or Real Estate Offices, Tax Preparer or Accountant Offices, Photocopy Shops, Parcel Shipping Stores, Auto tag and license service centers, Colleges and Universities, or Public Libraries.

X _____ (Sign above in the presence of a Notary Public.) _____ (Print your name above.)

Your address:

(Street)

(City)

(State)

(Zip Code)

(Telephone Number with Area Code)

(Email Address)

VERIFICATION

STATE OF KANSAS

COUNTY OF _____

I swear or affirm that the statements made in this affidavit are true and that I am the person filing this petition.

X _____
(Sign above in the presence of a Notary Public.)

SUBSCRIBED AND SWORN to before me, a Notary Public, this _____ day of _____ 20____.

Notary Public

CERTIFICATE OF SERVICE AND MAILING

I certify that on this _____ day of _____, 20____, I sent a true copy of this Voluntary Entry of Appearance by depositing it in the United States mail, postage prepaid, addressed to:

Your Spouse's Name and Address:

(Your Spouse's Name)

(Street)

(City) *(State)* *(Zip Code)*

(Telephone Number with Area Code) *(Email Address)*

and

Your Spouse's Attorney's Name and Address, if any:

(Your Spouse's Attorney's Name)

(Street)

(City) *(State)* *(Zip Code)*

(Telephone Number with Area Code) *(Email Address)*

X _____
(Sign your name.) *(Print your name above.)*

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS

In the Matter of the Marriage of

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Enter your full legal name above)

and

Case Number _____
(Will be assigned when case is filed)

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Enter your spouse's legal name above)

REQUEST AND SERVICE INSTRUCTION FORM

You must give "legal notice" to your spouse that you have filed a Petition for Divorce. Your Petition for Divorce must be filed and stamped with the date it was received by the Clerk of the District Court. Your spouse must get copies of this file-stamped Petition for Divorce and Summons through one of the ways listed below.

Select **ONE** of the five boxes to show how you want to give "legal notice" to your spouse.

Personal Service by Sheriff:

Check options a or b if you want the sheriff to give the paperwork to your spouse.

Option a: If your spouse lives in Kansas, you must fill out the Summons form and pay a sheriff's service fee.

Option b: If your spouse lives in a state other than Kansas, fill out the Summons form. You have to find out the procedures required by the sheriff in that state and county and to pay any fees required.

- a. *Personal Service inside Kansas* – Service through the office of the Sheriff of _____ County, State of Kansas, other than by Service by Return Receipt. The clerk of the court will give your documents to the sheriff.

- b. *Personal Service outside Kansas* – Out of state service by service through the Sheriff of _____ County, State of _____ (your spouse's location) by other than Service by Return Receipt. The clerk of the court will give your documents to the sheriff.

Sheriff's office address (where the Clerk will send the service packet to the sheriff):

(Name of Sheriff's Office)

(Street)

(City)

(State)

(Zip Code)

Sheriff's office phone number:

(Telephone Number with Area Code)

Service by Return Receipt:

Check options c or d if you want the file-stamped paperwork mailed to your spouse.

Option c: After getting the file-stamped copy of the Petition for Divorce and the Summons from the Clerk of the District Court, send the documents to your spouse using return receipt delivery, which can be by certified mail, priority mail, commercial courier service, overnight delivery service or other reliable personal delivery service. For example, these services may be offered by the United States Postal Service, FedEx, or UPS. Once the documents are delivered to your spouse, get the written or electronic receipt from the delivery service and attach it to the Return of Service by Return Receipt form. Complete the Return of Service by Return Receipt form and file it with the Clerk of the District Court's office.

Option d: If you want to have the sheriff send the documents to your spouse using return receipt delivery, the Clerk of the District Court will get the documents to the sheriff. The sheriff will send the documents and file the Return of Service by Return Receipt with the court.

- c. *Service by Return Receipt inside or outside Kansas* – Return Receipt service by the Petitioner. You are responsible for sending the documents to your spouse using return receipt delivery, which can be by certified mail, priority mail, commercial courier service, overnight delivery service or other reliable personal delivery service to the party addressed. The written or electronic receipt must show who the documents were delivered to, the date of delivery, the address where delivered, and the person or entity completing delivery. Complete the Return of Service by Return Receipt form, attach the written or electronic receipt, and file it with the Clerk of the District Court's office. You must file the Return of Service by Return Receipt form before service is complete.

- d. *Service by Return Receipt inside or outside Kansas by Sheriff – Service by Return Receipt by the office of the Sheriff of _____ County, State of _____, AT YOUR EXPENSE. The Sheriff will be responsible for obtaining service and submitting the return of service.*

If the sheriff's office is NOT in Kansas, fill out the name, address, and phone number of the sheriff's office below.

Sheriff's office address (where the Clerk will send the service packet to the sheriff):

(Name of Sheriff's Office)

(Street)

(City)

(State)

(Zip Code)

Sheriff's office phone number:

(Telephone Number with Area Code)

- e. *Personal Service through the Office of the Civil Process Server - Party to be served must live in Wyandotte County, Kansas.*

No Service Required

Check option e if your spouse will complete a Voluntary Entry of Appearance or you are going to ask the court to allow service by publication.

Voluntary Entry of Appearance:

Give your spouse a copy of the completed Petition for Divorce and Domestic Relations Affidavit. After getting the copies of those forms, your spouse can fill out a Voluntary Entry of Appearance form. Your spouse must sign this form in front of a notary public. The completed Voluntary Entry of Appearance with your spouse's original signature must then be filed with the Clerk of the District Court.

Publication:

If you cannot provide notice of the divorce to your spouse through sheriff's service, service by return receipt, or voluntary entry of appearance, then you may be able to provide notice of the divorce by publishing notice in a local newspaper. To get "publication service," you must ask for permission from the judge by filing the Affidavit for Service by Publication form. If the judge says you can use publication service, the judge will sign the Order Allowing Service by Publication. After you get the signed Order Allowing Service by Publication, you must publish notice following the process set out in K.S.A. 60-307. You must obtain "proof of publication" from the newspaper and file the proof with the court. Court personnel cannot help you with this process.

- f. *No service required as my spouse will complete a Voluntary Entry of Appearance, or I am filing an Affidavit for Service by Publication.*

X _____
(Sign above) (Print your name above.)

Your address:

(Street)

(City) (State) (Zip Code)

(Telephone Number with Area Code) (Email Address)

**IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT**

IN THE MATTER OF THE MARRIAGE OF:

Petitioner,

and

Respondent.

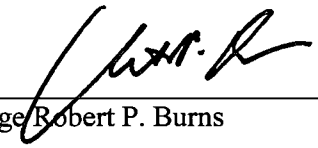
)
)
)
) **Case No.** _____
) **Division** _____
)
)
)
)
)

ORDER FOR EFFECTIVE CO-PARENTING TECHNIQUES (ECT)

NOW ON THE DATE STAMPED ABOVE the Court finds that an action has been filed in this court concerning a parenting plan for parties' minor child(ren) and that it would be in the best interest of the minor child(ren) for the parties to attend **Effective Co-Parenting Techniques (ECT)** within thirty (30) days of service of process, or the entry of an appearance by the respondent (in actions to establish the parentage of a child the parties shall attend within thirty (30) days of the entry of the order establishing parentage). Attendance of ECT must be completed prior to the case being set for trial.

IT IS THEREFORE ORDERED that the parties attend the **Effective Co-Parenting Techniques** educational program through Wyandotte County Domestic Court Services. This is a two-hour educational program which is currently being conducted online. To obtain information regarding registration and class times, contact **Domestic Court Services at (913) 573-2833**. Upon completion of class, your court file will be updated with a certificate of completion.

IT IS SO ORDERED



Chief Judge Robert P. Burns
Div. 1

Domestic Relations Affidavit

IN THE 29th JUDICIAL DISTRICT
WYANDOTTE COUNTY, KANSAS

IN THE MATTER OF)
)
 _____)
 Party Name)
)
 and)
)
 _____)
 Party Name)

Case No. _____

DOMESTIC RELATIONS AFFIDAVIT OF _____
 (name)

1. Party Name Residence _____
 Party Name _____ XXX-XX-_____
 Birth Month/Year Social Security Number Telephone _____
2. Party Name Residence _____
 Party Name _____ XXX-XX-_____
 Birth Month/Year Social Security Number Telephone _____
3. Date of Marriage: _____
4. Number of Marriages: _____
 Party Name Party Name
5. Number of children of the relationship: _____
6. Names, Social Security Numbers, the month and year of each child's birth and ages of minor children of the relationship:

| Name | Social Security Number XXX-XX-____ | Birth Month /Year | Age | Custodian |
|-------|---------------------------------------|----------------------|-------|-----------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

7. Names, Social Security Numbers, and ages of minor children of previous relationships and facts as to custody and support payments paid or received, if any.

| Name | Social Security No. XXX-XX-____ | Age | Custodian | Support Payment | Paid or Rec'd |
|-------|------------------------------------|------|-----------|-----------------|---------------|
| _____ | _____ | ____ | _____ | \$ _____ | _____ |
| _____ | _____ | ____ | _____ | \$ _____ | _____ |
| _____ | _____ | ____ | _____ | \$ _____ | _____ |
| _____ | _____ | ____ | _____ | \$ _____ | _____ |

8. _____ is employed by (name) _____

(address) _____

_____ is employed by (name) _____

(address) _____

with monthly income as follows:

A. Wage Earner

| | Party Name | Party Name |
|---|------------|------------|
| 1. Gross Income | \$ _____ | \$ _____ |
| 2. Other Income | \$ _____ | \$ _____ |
| 3. Subtotal Gross Income | \$ _____ | \$ _____ |
| 4. Federal Withholding (Claiming _____ exemptions) | \$ _____ | \$ _____ |
| 5. Federal Income Tax | \$ _____ | \$ _____ |
| 6. OASDHI | \$ _____ | \$ _____ |
| 7. Kansas Withholding | \$ _____ | \$ _____ |
| 8. Subtotal Deductions | \$ _____ | \$ _____ |
| 9. Net Income | \$ _____ | \$ _____ |

B. Self-Employed

| | Party Name | Party Name |
|--|------------|------------|
| 1. Gross Income from self-employment | \$ _____ | \$ _____ |
| 2. Other Income | \$ _____ | \$ _____ |
| 3. Subtotal Gross Income | \$ _____ | \$ _____ |
| 4. Reasonable Business Expenses (-) (Itemize on attached exhibit) | \$ _____ | \$ _____ |
| 5. Self-Employment Tax (-) | \$ _____ | \$ _____ |
| 6. Business Net Income | \$ _____ | \$ _____ |
| 7. Estimated Tax Payments (Claim _____ exemptions) | \$ _____ | \$ _____ |
| 8. Federal Income Tax | \$ _____ | \$ _____ |
| 9. Kansas Withholding | \$ _____ | \$ _____ |
| 10. Subtotal Deductions | \$ _____ | \$ _____ |

11. Net Income \$ _____ \$ _____
 (Line B.3. minus Line B.9.)

Pay period: _____
_____ Party Name _____ Party Name

9. The liquid assets of the parties are:

| | Item | Amount | Joint or Individual (Specify) |
|----|--|----------|----------------------------------|
| A. | Checking Accounts (Do not list account numbers): | | |
| | _____ | \$ _____ | _____ |
| | _____ | \$ _____ | _____ |
| B. | Savings Accounts (Do not list account numbers): | | |
| | _____ | \$ _____ | _____ |
| | _____ | \$ _____ | _____ |
| C. | Cash | | |
| | _____ (Party Name) | \$ _____ | _____ |
| | _____ (Party Name) | \$ _____ | _____ |
| D. | Other | | |
| | _____ | \$ _____ | _____ |
| | _____ | \$ _____ | _____ |

10. The monthly expenses of each party are: (Please indicate with an asterisk all figures which are estimates rather than actual figures taken from records.)

| | Item | Party Name (Actual or Estimated) | Party Name (Actual or Estimated) |
|----|---------------------------|-------------------------------------|-------------------------------------|
| 1. | Rent | \$ _____ | \$ _____ |
| 2. | Food | \$ _____ | \$ _____ |
| 3. | Utilities/services: | | |
| | Trash Service | \$ _____ | \$ _____ |
| | Newspaper | \$ _____ | \$ _____ |
| | Telephone | \$ _____ | \$ _____ |
| | Cell Phone | \$ _____ | \$ _____ |
| | Cable | \$ _____ | \$ _____ |
| | Gas | \$ _____ | \$ _____ |
| | Water | \$ _____ | \$ _____ |
| | Lights | \$ _____ | \$ _____ |
| | Other | \$ _____ | \$ _____ |
| 4. | Insurance: | | |
| | Life | \$ _____ | \$ _____ |
| | Health | \$ _____ | \$ _____ |
| | Car | \$ _____ | \$ _____ |
| | House/Rental | \$ _____ | \$ _____ |
| | Other | \$ _____ | \$ _____ |
| 5. | Medical and dental | \$ _____ | \$ _____ |
| 6. | Prescriptions drugs | \$ _____ | \$ _____ |
| 7. | Child care (work-related) | \$ _____ | \$ _____ |

| | | | |
|-----|-------------------------------|----------|----------|
| 8. | Child care (non-work-related) | \$ _____ | \$ _____ |
| 9. | Clothing | \$ _____ | \$ _____ |
| 10. | School expenses | \$ _____ | \$ _____ |
| 11. | Hair cuts and beauty | \$ _____ | \$ _____ |
| 12. | Car repair | \$ _____ | \$ _____ |
| 13. | Gas and oil | \$ _____ | \$ _____ |
| 14. | Personal property tax | \$ _____ | \$ _____ |

| Item | Party Name (Actual or Estimated) | Party Name (Actual or Estimated) |
|-----------------------------|-------------------------------------|-------------------------------------|
| 15. Miscellaneous (Specify) | | |
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |
| 16. Debt Payments (Specify) | | |
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |
| Total | \$ _____ | \$ _____ |

*Show house payments, mortgage payments, etc., in Section 10.B.

B. Monthly payments to banks, loan companies or on credit accounts: (Indicate actual or estimated monetary amount in each column; use asterisk for secured.) DO NOT LIST ANY PAYMENTS INCLUDED IN PART 10.A ABOVE.

| Creditor | When Incurred | Amount of Payment | Date of Last Payment | Balance | Responsibility | |
|----------|---------------|-------------------|----------------------|----------------------|----------------|------------|
| | | | | | Party Name | Party Name |
| _____ | _____ | _____ | _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | _____ | _____ | _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | _____ | _____ | _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | _____ | _____ | _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | _____ | _____ | _____ | \$ _____ | \$ _____ | \$ _____ |
| _____ | _____ | _____ | _____ | \$ _____ | \$ _____ | \$ _____ |
| | | | | Subtotal of Payments | \$ _____ | \$ _____ |
| | | | | Total | \$ _____ | \$ _____ |

C. Total Living Expenses

| | Party Name (Actual or Estimated) | Party Name (Actual or Estimated) |
|---|-------------------------------------|-------------------------------------|
| 1. Total funds available to Both Parties (from No. 8) | \$ _____ | \$ _____ |
| 2. Total needed (from No. 10.A and B) | \$ _____ | \$ _____ |
| 3. Net Balance | \$ _____ | \$ _____ |
| 4. Projected child support | \$ _____ | \$ _____ |

D. Payments or contributions received, or paid, for support of others. Specify source and amount.

| Source | Party Name | Party Name |
|-------------|------------|------------|
| _____ (+/-) | \$ _____ | \$ _____ |
| _____ (+/-) | \$ _____ | \$ _____ |

11. How much does the party who provides health care pay for family coverage?
 \$ _____ per _____.
 How much does it cost the provider to furnish health insurance only on the provider?
 \$ _____ per _____.

FURNISH THE FOLLOWING INFORMATION IF APPLICABLE.

12. Income and financial resources of children.

| Income/Resources | Amount |
|------------------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |

13. Child support adjustments requested.

- | | |
|--|---|
| <input type="checkbox"/> parenting time adjustment | <input type="checkbox"/> agreement past majority |
| <input type="checkbox"/> income tax consideration | <input type="checkbox"/> long distance parenting time |
| <input type="checkbox"/> special needs | <input type="checkbox"/> overall financial conditions |
| <input type="checkbox"/> other: _____ | |

14. All other personal property including retirement benefits (including but not limited to qualified plans such as profit-sharing, pension, IRA, 401(k), or other savings-type employee benefits, nonqualified plans, and deferred income plans), and ownership thereof (joint or individual), including policies of insurance, identified as to nature or description, ownership (joint or individual), and actual or estimated value.

| Joint or Individual | Amount | (Specify) |
|---------------------|----------|-----------|
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |
| _____ | \$ _____ | _____ |

THE FOLLOWING NEED NOT BE FURNISHED IN POST JUDGMENT PROCEDURES.

15. List real property identified as to description, ownership (joint or individual) and actual or estimated value.

| Property Description | Ownership | Actual/Estimated Value |
|----------------------|-----------|------------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

16. Identify the property, if any, acquired by each of the parties prior to marriage or acquired during marriage by a will or inheritance.

| Property Description | Ownership | Source of Ownership | Actual/ Estimated Value |
|----------------------|-----------|---------------------|-------------------------|
| | | | |
| | | | |

17. List debt obligations, including maintenance, not listed in Section 10.A or 10.B above, identified as to name or names of payor or payors and payees, balance due and rate at which payable; and, if secured, identify the encumbered property.

| Debt Obligation | Payor | Payee | Balance Due | Payment Rate | Encumbered Property |
|-----------------|-------|-------|-------------|--------------|---------------------|
| | | | | | |
| | | | | | |

8. List health insurance coverage and the right, pursuant to ERISA §§ 601-608, 29 U.S.C. §§ 1161-1168 (1986), to continued coverage by the spouse who is not a member of the covered employee group.

| <u>Health Insurance</u> | <u>COBRA Continuation</u> | | |
|-------------------------|---------------------------|-------|---------|
| | Yes | No | Unknown |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

I declare under penalty of perjury under the laws of the State of Kansas that the foregoing is true, correct and complete.

Executed on the _____ day of _____, 20____.

Name (Print): _____

Signature _____



CHILD SUPPORT ORDER INFORMATION SHEET

As per Supreme Court Administrative Order No. 168 (amended), all new or modified non-IVD support orders filed in the Kansas district courts must be accompanied by this child support order information sheet.

Purpose: Federal law requires Kansas to process child support through a single location in the state. **To insure that processing of child support payments is not delayed, the Kansas Payment Center must have all information listed on the form below.**

Who submits this information sheet: The payee's attorney shall submit a child support order information sheet with any new or modified non-IVD support orders filed with the Clerk of the District Court.

Case Number: You must give the full, accurate case number, or payments may be delayed. The case number may be copied from the child support order.

Date: _____ **Trustee Fee:** _____ **Active or Inactive (please check one)**

Case Number: _____

Payer's Name: _____ **Date of Birth:** _____

Gender: Male Female **SSN:** _____ ***If SSN or**

DOB not known, give reason for unavailability:

Address, City, State, Zip _____

E-mail Address: _____

Phone Numbers (mark primary): Home (____) _____

Work (____) _____

Cell (____) _____

Payee's Name: _____ **Date of Birth:** _____

Gender: Male Female SSN: _____ *If SSN or
DOB not known, give reason for unavailability:

Address, City, State, Zip _____

E-mail Address: _____

Phone Numbers (mark primary): Home (____) _____

Work (____) _____

Cell (____) _____

| Debt Type: | Amount | Start Date | Obligation Frequency: |
|------------|--------|------------|-----------------------|
| CS | _____ | _____ | Weekly |
| MN | _____ | _____ | Bi-weekly |
| OT | _____ | _____ | Semi-Monthly |
| | | | Monthly |

Child #1: Name: _____ Date of Birth: _____
Gender: Male Female
SSN: _____

Child #2: Name: _____ Date of Birth: _____
Gender: Male Female
SSN: _____

Child #3: Name: _____ Date of Birth: _____
Gender: Male Female
SSN: _____

Child #4: Name: _____ Date of Birth: _____
Gender: Male Female
SSN: _____

Child #5: Name: _____ Date of Birth: _____
Gender: Male Female
SSN: _____

Child #6: Name: _____ Date of Birth: _____
Gender: Male Female
SSN: _____

List additional children on a separate sheet.

Third Party Payee: _____

Provide the following if payee is an individual:

Gender: Male Female **Date of Birth:** _____

SSN: _____ (***If SSN or DOB not known, give reason for unavailability**)

Address, City, State, Zip: _____

***Absent extenuating circumstances as determined by the Kansas Payment Center, Payers' and Payees' Social Security Numbers and Dates of Birth must be provided on this form.**

Form Completed By: _____

Child Support Worksheet

IN THE 29th JUDICIAL DISTRICT
WYANDOTTE COUNTY, KANSAS

IN THE MATTER OF:

and

CASE NO. _____

CHILD SUPPORT WORKSHEET OF (name) _____

| | | Party Name | Party Name |
|--|-------|------------|-----------------|
| A. <u>INCOME COMPUTATION – WAGE EARNER</u> | | | |
| 1. Domestic Gross Income (Insert on Line C.1. below)* | \$ | _____ | \$ _____ |
| B. <u>INCOME COMPUTATION – SELF-EMPLOYED</u> | | | |
| 1. Self-Employment Gross Income | | _____ | _____ |
| 2. Reasonable Business Expenses | (-) | _____ | _____ |
| 3. Domestic Gross Income (Insert on Line C.1. below)* | | _____ | _____ |
| C. <u>ADJUSTMENTS TO DOMESTIC GROSS INCOME</u> | | | |
| 1. Domestic Gross Income | | _____ | _____ |
| 2. Court-Ordered Child Support Paid | (-) | _____ | _____ |
| 3. Court-Ordered Maintenance Paid _____% | (-) | _____ | _____ |
| 4. Court-Ordered Maintenance Received _____% | (+) | _____ | _____ |
| 5. Child Support Income (Insert on Line D.1. below) | | _____ | _____ |
| D. <u>COMPUTATION OF CHILD SUPPORT</u> | | | |
| 1. Child Support Income | | _____ | + _____ |
| | | | = _____ |
| 2. Proportionate Shares of Combined Income (Each parent's income divided by combined income) | | _____% | _____% |
| 3. Gross Child Support Obligation** (Using the combined income from Line D.1., find the amount for each child and enter total for all children) | | | |
| Age of Children | 0-5 | 6-11 | 12-18 |
| Number Per Age Category | _____ | _____ | _____ |
| Total Amount | _____ | + _____ | + _____ |
| | | | = _____ |
| * Cost of Living Differential Adjustment? | _____ | Yes | _____ No |
| **Multiple Family Application? | _____ | Yes | _____ No |
| Parenting Time Adjustment | _____ | Yes | _____ No _____% |
| Income Beyond the Child Support Schedule calculation used | _____ | Yes | _____ No |

Case No. _____

| | | _____ Party Name | _____ Party Name |
|-----|---|---------------------|---------------------|
| 4. | Proportionate Share (Line D.3 x Line D.2) | _____ | _____ |
| 5. | Parenting Time Adjustment _____% x Line D.4 (-) | _____ | _____ |
| 6. | Proportionate Shares after Parenting Time Adjustment | _____ | _____ |
| 7. | Health and Dental Insurance Premium | \$ _____ | + \$ _____ |
| 8. | Proportionate Shares Health Insurance Premium | _____ | _____ |
| 9. | Work-Related Child Care Costs Formula: Amt. - (Amt. x %) for each child care credit Example: 200 - (200 x 30%) | _____ | _____ |
| 10. | Proportionate Shares Work-Related Child Care Costs | _____ | _____ |
| 11. | Proportionate Child Support Obligation for Each Parent (Line D.6 + D.8 + D.10) | _____ | _____ |
| 12. | Credit for Insurance or Work-Related Child Care Paid (-) | _____ | _____ |
| 13. | Basic Parental Child Support Obligation ((Line 11-Line D.12); Insert on Line F.1. below) | _____ | _____ |

E. CHILD SUPPORT ADJUSTMENTS

| APPLICABLE | N/A | CATEGORY | _____ PARTY NAME | _____ PARTY NAME |
|-----------------------------|-----------------------------------|------------------------------------|---------------------|---------------------|
| 1. <input type="checkbox"/> | <input type="checkbox"/> | Long Distance Parenting Time Costs | (+/-) _____ | (+/-) _____ |
| 2. <input type="checkbox"/> | <input type="checkbox"/> | Income Tax Considerations | (+/-) _____ | (+/-) _____ |
| 3. <input type="checkbox"/> | <input type="checkbox"/> | Special Needs | (+/-) _____ | (+/-) _____ |
| 4. <input type="checkbox"/> | <input type="checkbox"/> | Agreement Past Majority | (+/-) _____ | (+/-) _____ |
| 5. <input type="checkbox"/> | <input type="checkbox"/> | Overall Financial Condition | (+/-) _____ | (+/-) _____ |
| 6. | TOTAL (Insert on Line F.2. below) | | _____ | _____ |

F. DEVIATION(S) FROM REBUTTABLE PRESUMPTION AMOUNT

AMOUNT ALLOWED

| | | <u>Party Name</u> | <u>Party Name</u> |
|-------|---|---|-------------------|
| 1. | Basic Parental Child Support Obligation (Line D.13. from above) | _____ | _____ |
| 2. | Total Child Support Adjustments (Line E.6. from above) | (+/-) _____ | _____ |
| 3. | Adjusted Subtotal (Line F.1. +/- Line F.2.) | _____ | _____ |
| 4. | Equal Parenting Time Obligation (<input type="checkbox"/> EPT Worksheet or <input type="checkbox"/> Shared Expense Formula) | _____ | _____ |
| 5. a | Ability to Pay Calculation Child Support Income (D.1) _____ - Poverty Guidelines for Household of One _____ = _____ | | |
| 5. b. | Subtotal (lesser amount of F.3 and F.5.a) | _____ | _____ |
| 6. | Social Security Dependent Benefits | (-) _____ | (-) _____ |
| 6. b. | Final Subtotal | _____ | _____ |
| 7. | Enforcement Fee Allowance** (Applied only to Nonresidential Parent) ((Line F.3. x Collection Fee %) x .5) or (Monthly Flat Fee x .5) | Percentage _____ % Flat Fee \$ _____ | |
| | | (+) | (+) |
| 8. | Net Parental Child Support Obligation (Line 5.b. + Line F.4.) | _____ | _____ |

**Parent paying support.

Prepared By (Signature)

Judge/Hearing Officer Signature

Prepared By (Print Name)

Date Submitted

Date Approved

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS

In the Matter of the Marriage of

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Write your full legal name above)

and

Case Number _____

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Write your spouse's full legal name above)

PARENTING PLAN

1. This Parenting Plan is temporary permanent. (Check one of the two boxes)

2. This Parenting Plan is: (check one of the three boxes)

Proposed by _____.
(Print your name)

Agreed to by both parties.

Developed by the Court.

Section 1. General Information

1.1 For the purposes of this parenting plan, the following definitions apply:

Parent A is _____, and
(Write the name of one parent.)

Parent B is _____.
(Write the name of the other parent.)

Parent A is _____ Parent B is _____

1.2 This parenting plan applies to the following children: *(Fill out the chart.)*

| Child's Initials | Year of Birth |
|------------------|---------------|
| | |
| | |
| | |
| | |
| | |

Section 2. Legal Custody (Decision-Making)

2.1 *(Check either box A or B, NOT both. If box B is checked, fill out the boxes and blanks in B.1. and B.2. as needed.)*

A. Joint Legal Custody. Parents shall have joint legal custody of their minor child(ren).

"Joint legal custody" means that both parents have equal rights to participate in, contribute to, and have responsibility for matters of health and education in their child(ren)'s best interests. Neither parent's rights are superior to the other parent's rights, and they should cooperate to determine what is in their children's best interests.

OR

B. Sole Legal Custody. Joint legal custody is not in the child(ren)'s best interests.

"Sole legal custody" means that the parent given sole legal custody has the primary right to decide matters of health and education in the child(ren)'s best interests.

The parent not given sole legal custody may make emergency decisions affecting the child(ren)'s health or safety when the child(ren) is in that parent's physical care and control. Even if one parent has sole legal custody the other parent can still access information regarding the child(ren) unless the court specifically orders a restriction in B.2. below and states the reasons for that determination.

Parent A is _____ **Parent B is** _____

B.1. Sole legal custody is granted to Parent A Parent B for the following reasons:

a. Agreement of the parents.

b. The other parent is unable or should not be allowed to exercise decision-making because:

c. There is a danger to the child(ren) because:

d. Other:

B.2. Restriction of Information Regarding the Child(ren) to Non-Legal Custodian.

Parent A Parent B is restrained from accessing the child(ren)'s health, educational and other personal information because of the following specific reasons:

Parent A is _____ Parent B is _____

Section 3. Parenting Time Schedule. (Physical Custody)

3.1 Parent A Parenting Time

Parent A shall have parenting time beginning at _____ am pm ending at _____ am
 pm as follows:

Parent A's Weekday Schedule:

Parent A's Weekend Schedule:

Parent A's Other Times:

3.2 Parent B Parenting Time

Parent B shall have parenting time beginning at _____ am pm ending at _____ am
 pm as follows:

Parent B's Weekday Schedule:

Parent A is _____ Parent B is _____

Parent B's Weekend Schedule:

Parent B's Other Times:

3.3 Holiday & Special Occasion Parenting Schedule

(Check either box A or B, not both.)

- A.** The holiday schedule as set out in the _____ (name county) Family Law Guidelines controls holiday parenting time. The holiday schedule will take priority over the regular weekday and weekend schedule. A copy of the holiday schedule from the _____ (name county) are attached. If a particular holiday is not included in the guidelines, then the regular schedule controls.

(Print and attach a copy of the holiday schedule to this Parenting Plan. Do not complete the Holiday Parenting Schedule chart below.)

OR

- B.** The holiday schedule is as follows:
The holiday schedule will take priority over the regular weekday and weekend schedule. If a particular holiday is not specified below, then the regular schedule controls.

(If you selected Option B, fill in the chart. You may want to look at your child(ren)'s school calendar to check for other holidays or school breaks to include in the "other" sections below.)

Parent A is _____

Parent B is _____

| <u>HOLIDAY PARENTING SCHEDULE</u> | <u>Parent A</u> | <u>Parent B</u> |
|---|--|--|
| New Year's Day (January 1): From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Martin Luther King, Jr. Day (3rd Monday of January): From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| President's Day (3rd Monday in February): From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Spring Break: From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Spring Break: From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Memorial Day/Weekend (last Monday in May): From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Mother's Day/Weekend (2nd Sunday in May): From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Father's Day/Weekend (3rd Sunday in June): From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Independence Day (July 4): From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |

Parent A is _____ Parent B is _____

| <u>HOLIDAY PARENTING SCHEDULE</u> | <u>Parent A</u> | <u>Parent B</u> |
|---|--|--|
| Labor Day/Weekend (1st Monday in September): From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Halloween (October 31): From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Thanksgiving Day/Weekend (4th Thursday in November): From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Winter Break: From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Winter Break: From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Parent A's Birthday: From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Parent B's Birthday: From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Child's Birthday: Child's name _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Child's Birthday: Child's name _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |

Parent A is _____ Parent B is _____

| <u>HOLIDAY PARENTING SCHEDULE</u> | <u>Parent A</u> | <u>Parent B</u> |
|---|--|--|
| Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |
| Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time) | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year | <input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year |

Parent A is _____ Parent B is _____

3.4 Vacation Schedule *(Check all boxes that apply.)*

- No specific weeks will be set aside for vacations.
- Each parent may designate _____ *(number)* of week(s) each year during which they will have exclusive parenting time of the child(ren) and the regular schedules do not apply. However, during this period, the Holiday Schedule still applies. Parent A will have first choice of weeks in odd-numbered years. Parent B will have first choice of weeks in even-numbered years. The parent with the first choice of weeks must designate the vacation weeks by March 31st of each year. The parent with the second choice of weeks must designate the weeks by April 15 of each year.
- Other:

3.5 Child(ren) Exchange

If a specific location for an exchange is not stated in the parenting time schedule above, then the exchange will happen at the following location: *(Check the box that applies.)*

- All exchanges will happen at the child(ren)'s school or childcare provider when school or childcare is in session. If, or when, school or childcare is not in session, all exchanges will happen at the locations as follows:

- All exchanges will happen at the residence of Parent A or Parent B.

- Exchanges will happen as set out below:

Parent A is _____ Parent B is _____

3.6 Transportation Costs for Parenting Time *(Check the boxes that apply.)*

- Each parent will pay the expenses associated with his or her own transportation to and from the exchange location unless otherwise indicated in this parenting plan.
- Transportation costs shall be split equally between both parents.
- Transportation costs shall be split proportionally as shown on Line D.2 of the current child support worksheet.
- All transportation costs shall be paid by Parent A or Parent B.
- Other:

3.7 Communication Between Parents

All communication regarding the child(ren) shall be between the parents. The parents shall not use the child(ren) as a messenger to convey information, ask questions, or set up schedule changes.

Parents shall communicate with each other: *(Check all boxes that apply.)*

- in person
- by telephone
- by text
- by email
- other: _____

3.8 Changes to the Parenting Time Schedule

The plan may be changed by mutual, written agreement of the parents. Both parents understand that any permanent changes must be approved by the court to be binding and enforceable.

Parent A is _____ Parent B is _____

Section 4. Dispute Resolution Process

4.1 Disputes between the parents, other than about child support, shall be submitted to:
(Check one of the two boxes)

Mediation by:

(name of mediator)

The following dispute resolution method:

Section 5. Military Deployment, Mobilization, or Unaccompanied Tour

5.1 Parent A Parent B is a military servicemember and the following shall apply upon notice of deployment, mobilization, temporary duty, or unaccompanied tour:

- A. A parent receiving deployment, mobilization, temporary duty or unaccompanied tour orders from the military shall be considered a “deployed parent.”
- B. The absence, relocation or failure to comply with a parenting order by a “deployed parent,” shall not by itself constitute a material change in circumstances to make any permanent change to the parenting plan.
- C. Any court order limiting previously ordered parenting rights due to the parent's deployment, mobilization, temporary duty, or unaccompanied tour shall state that event as its basis and shall constitute only a “temporary order.”
- D. The nondeploying parent shall give the court and deployed parent at least 30 days advance written notice of any change of address or telephone number.
- E. The nondeploying parent shall reasonably accommodate the deployed parent's leave schedule.

Parent A is _____ **Parent B is** _____

- F. The nondeploying parent shall assist with telephone and electronic communication between the child(ren) and the deployed parent.
- G. The deployed parent shall give the nondeployed parent timely information about the deployed parent's anticipated deployment, leave during deployment, and release from deployment.
- H. During deployment, mobilization, temporary duty, or unaccompanied tour, the parents shall make decisions about the child(ren) by the following methods:
- I. During deployment, mobilization, temporary duty, or unaccompanied tour, the child(ren) shall live with:
 - Parent A Parent B Other _____ and the deployed parent shall have the following parenting time with the child(ren) when available:

Section 6. Address Change

- 6.1** Each parent shall tell the other parent of any address change in writing at least 30 days before changing address by sending written notice to the other parent by certified mail – restricted delivery, return receipt requested, at that other parent's last known address.
- 6.2** Each parent shall tell the other parent of any plan to remove any child(ren) from the State of Kansas for more than 90 days by sending written notice to the other parent by certified mail – restricted delivery, return receipt requested, at that other parent's last known address.
- 6.3** A parent is not required to give written notice of removal to the other parent under either (A) or (B) if the other parent has been convicted of a crime specified in Article 34 (crimes against

Parent A is _____ **Parent B is** _____

persons), Article 35 (sex offenses), or Article 36 (crimes affecting family relationships and children) of Chapter 21 (Crimes and Punishments) of the Kansas Statutes Annotated to which the child(ren) was the victim.

Section 7. Other Requirements

7.1 Other requirements for this parenting plan:

Section 8. Signatures: Required if agreed upon by the parties.

Parent A

Signature:

Name:

Address:

Phone Number:

Email:

Date Signed:

Attorney's Signature (if any):

Attorney's Name (if any):

Parent B

Signature:

Name:

Address:

Phone Number:

Email:

Date Signed:

Attorney's Signature (if any):

Attorney's Name (if any):

IN THE DISTRICT COURT OF _____ COUNTY, KANSAS

In the Matter of

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Write your full legal name above)

and Case Number _____

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Write your spouse's full legal name above)

NOTICE OF HEARING

Information about the Hearing

1. The hearing will be held at the courthouse in the above county.
2. The date of the hearing is: _____
(mm/dd/yyyy)
3. The time of the hearing is: _____ a.m. p.m.

Person Giving Notice

X _____
(Sign your name) (Print your name)

(Street)

(City) (State) (Zip Code)

(Telephone Number with Area Code) (Email Address)

CERTIFICATE OF SERVICE AND MAILING

You must send (serve) a copy of this *Notice of Hearing* to each of the other parties, or their attorney(s). To obtain service, you may deliver the document by hand, by sending it by first class U.S. mail, or by sending it through a delivery service that provides a written or electronic receipt showing who the documents were delivered to, the date of delivery, the address where delivered, and the person or entity completing deliver. For example, these services may be offered by the United States Postal Service, FedEx, or UPS.

I certified, that on _____ I sent/gave a copy of this *Notice of Hearing* to
(date)
each of the following parties at the following address:

| Name | Address |
|------|---------|
| | |
| | |
| | |
| | |

X _____
(Sign your name) (Print your name)

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT

In the Matter of the Marriage of

Petitioner

Case No. _____

and

Respondent

DECREE OF ANNULMENT WITH CHILDREN

On _____, 20____ this matter was heard by the court.

Petitioner is present not present.

Respondent is present not present.

After considering the evidence presented the court makes the following findings and orders.

1. **RESIDENCE**

The Petitioner has been a resident of Wyandotte County, Kansas for more than sixty (60) days before the filing of the petition.

2. **RESPONDENT**

The court has jurisdiction over the Respondent because they:

- Were served by publication notice.
- Appear in court.
- Were served a petition by Sheriff or Court Process Server.
- Were served a petition by certified mail.
- Have signed and filed a voluntary entry of appearance.

3. **60 DAYS.**

More than sixty (60) days have passed since the filing of the petition.

4. **MARRIAGE.**

The parties were married on _____, 20____ in _____, _____ and have been since that time and now are lawfully husband and wife.

5. **MILITARY SERVICE.**

The Respondent is is not now on active duty with the United States Military. If the Respondent is on active duty, the requirements of the Service members Civil Relief Act (SCRA) have haven't been met.

6. **PERSONAL AND SUBJECT MATTER JURISDICTION; VENUE.**

The Court has personal jurisdiction over the parties and jurisdiction over the subject matter in this action. Venue has been properly placed.

7. An annulment is granted _____

8. Petitioner and Respondent are the parents of the following children who are under eighteen years old or are still in high school:

a. _____ was born in _____, _____.
(Child's name) (Month of Birth) (Year of Birth)

b. _____ was born in _____, _____.
(Child's name) (Month of Birth) (Year of Birth)

c. _____ was born in _____, _____.
(Child's name) (Month of Birth) (Year of Birth)

d. _____ was born in _____, _____.
(Child's name) (Month of Birth) (Year of Birth)

9. Kansas has child custody jurisdiction under the following provision of the U.C.C.J.E.A.: _____ (home state/significant connection)

10. **PARENTING PLAN.** The court adopts the parenting plan filed separately as its order.

11. **PROPERTY AND DEBT DIVIDED:**

The parties have signed an agreement dividing all their property and debts. The agreement is approved by the court OR

Petitioner shall keep the following property: _____

Petitioner shall be responsible for the following debt: _____

Respondent shall keep following property: _____

Respondent shall be responsible for the following debt: _____

12. **INSURANCE POLICIES.**

Any designation previously made by Petitioner or Respondent that names the other as a beneficiary of any individual or group life insurance or annuity policy, trust instrument, transfer-on-death account, or payable-on-death account, is terminated and may be renewed only by designation made after entry of this decree. Petitioner and Respondent shall make any necessary changes to beneficiary designations by filing the changes according to the terms of the policy, trust or account.

13. **SPOUSAL MAINTENANCE:**

Neither party will pay spousal maintenance to the other.

Petitioner Respondent will pay spousal maintenance of \$_____ on the first day of each month beginning ____/____/____ (mo/day/yr). Spousal maintenance will end on the first of the following events to occur:

- a. the death of either party;
- b. the remarriage of the recipient;
- c. the cohabitation (as defined by the then-current Kansas law) of the spouse receiving spousal support with a non-relative adult (regardless of gender) in a marriage-like relationship;
- d. the spouse receiving spousal support living together in a marriage-like relationship with an adult non-relative regardless of gender (for purposes of this provision a civil union or same-sex marriage obtained in a jurisdiction providing for such an arrangement shall be considered evidence of living together); or
- e. _____. (Enter Date)

14. **CHILD SUPPORT.**

Petitioner Respondent will pay child support of \$_____ per month payable on the first day of each month beginning _____, 20____. The Court Trustee's enforcement fee shall be assessed on all spousal maintenance and child support amounts that are enforced by the **WYANDOTTE COUNTY COURT TRUSTEE'S OFFICE**. The fee is **5%** of the base spousal maintenance and child support amount and is calculated and included in the amounts ordered herein, if applicable. The enforcement free will be deducted by the Kansas Payment center, before distribution to the child support or spousal maintenance receiving party.

15. DUTY TO NOTIFY.

Each parent must notify the other of any change of financial circumstances including changes to income, work related childcare costs, and health insurance premiums and any other change that could be a material change of circumstances. If a parent receives a written request for financial information, he or she has thirty days to provide the requested information in writing to the other parent. If a parent refuses to provide the requested information, he or she might be held responsible for the costs and expenses, including attorney fees, the requesting party incurs in obtaining the requested information.

16. KANSAS PAYMENT CENTER.

All support and maintenance payments shall be made payable to the order of the Kansas Payment Center P. O. Box 758599, Topeka, Kansas 66675-8599. Each payment must include in the memo section on the check or in another place the letters "WY" followed by the case number.

17. COURT TRUSTEE/MAXIMUS TO ENFORCE.

The District Court Trustee or DC/Maximus shall enforce the orders of support entered herein. Both parties will inform the District Court Trustee or DCF/Maximus in writing of any change of name, residence, and/or employer (with business address) within 7 days after the change.

18. INCOME WITHHOLDING.

Unless the court makes findings in conformity with K.S.A. 23-3103(j), income withholding shall take effect immediately to enforce the order of child support or child support and maintenance granted herein. Petitioner will pay _____% of the child's uninsured health care costs. (Enter Percentages from Child Support Worksheet) Respondent will pay _____% of the child's uninsured health care costs. (Enter Percentage from Child Support Worksheet) Uninsured healthcare costs include such things as deductibles, co-pays, prescription medications and similar expenses. Petitioner and Respondent shall both sign any documents required by the health insurance provider for the minor child(ren) that are necessary to allow both parents to obtain information from, and to communicate with, the insurance provider about the coverage provided and the payment and reimbursement of health insurance benefits regardless which parent owns, subscribes, or pays for the child(ren)'s health insurance coverage.

19. TEMPORARY SUPPORT ARREARS.

Any arrears in temporary spousal maintenance and/or child support existing as of the date of this Decree (as reflected in the records of the District Court Trustee-child support and spousal maintenance or DCF/Maximus- child support only) shall be a judgment against the Obligor party and the District Court Trustee or Maximus shall enforce said judgment.

20. Petitioner Respondent shall be restored to the former name of:

21. OTHER PROVISIONS.

IT IS SO ORDERED.

Judge of the District Court

X _____
Signature of Petitioner
Name (Print): _____
Address: _____
City, State, Zip: _____
Telephone: _____
Email: _____

X _____
Signature of Respondent
Name (Print): _____
Address: _____
City, State, Zip: _____
Telephone: _____
Email: _____