

Have you seen a marriage counselor, either alone or with your spouse? YES NO

Have you or your spouse spoken to an attorney (other than our office) about a divorce? YES NO

If yes, please explain: _____

Has your spouse spoken to our office about this divorce or any other legal matter? YES NO

Have you been a resident of the county in which you now live for at least three months? YES NO

Have you or your spouse ever been a member of the Military? YES NO

If YES you or your spouse? _____

Grounds

The grounds for a divorce would normally be irreconcilable differences.

Should the grounds be irreconcilable differences? YES NO

If not, please state the reason: _____

Debts

List ALL debts incurred during the marriage that are still outstanding.

CREDITOR	PURPOSE OF DEBT	AMOUNT OWED	PAID BY WHOM?	
			Petitioner (You)	Respondent (Spouse)
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<i>Example:</i> America's First Bank	Car Loan 2016 Subaru Outback	\$9,000.00	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(If you need more space, CHECK HERE and use the next sheet)

CREDIT REPORT: Under federal law you are entitled to receive a free copy of your credit report once a year. If you have questions about your indebtedness or the indebtedness of your spouse, you may want to get a copy of your credit report. To get a copy at no charge contact: www.annualcreditreport.com, call (877) 322-8228 or send a written request to Annual Credit Report Request Service, P.O. Box 105281, Atlanta, GA 30348-5281. You must provide your name, date of birth, Social Security number and current and previous address, if you have moved within the past two (2) years.

Assets

Do either you or your spouse have a retirement, 401(k), I.R.A., or pension plan? YES NO

If yes, what type of account is it, who is to receive it or how is it to be divided?

Is ALL of the personal property (furniture, vehicles, etc. including intangible assets such as bank accounts, I.R.A.'s stocks, etc.) owned by you and/or your spouse PRESENTLY divided to your satisfaction?

YES NO If no, list the property to be divided:

IN WHOSE POSSESSION		PROPERTY	TO BE AWARDED TO	
Petitioner (You)	Respondent (Spouse)		Petitioner (You)	Respondent (Spouse)
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>

(If you need more space, CHECK HERE and use the next sheet)

Real Property

Do you or your spouse own any real property (home or land)? YES NO

If yes, list the property address and how it should be divided: _____

Name Change

Do you or your spouse want a previous/maiden name restored to you/them? YES NO UNKNOWN

If yes, what name? _____

Alimony

Should alimony be awarded to either spouse? YES NO

If alimony is awarded, specify the amount per month: _____ For how long should it be awarded: _____

To whom should alimony be awarded: _____

Waiting Period

Are you interested in asking the Court to waive the required 90-day waiting period? Yes No Maybe

If yes, for what reason: _____

(Courts often require a showing of extraordinary circumstances, so please list any consequences you or your partner may face if not waived)

Fee Waiver

(Not optional for Divorce with Assistance)

Are you able to pay the \$318 filing fee? YES NO

If no, would you like us to prepare a fee waiver? YES NO

ADDITIONAL DEBT AND PROPERTY INFORMATION FROM PAGE 2 and 3, IF APPLICABLE:

Debts (Continued from Page 2)

CREDITOR	PURPOSE OF DEBT	AMOUNT OWED	PAID BY WHOM?	
			Petitioner (You)	Respondent (Spouse)
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Property (Continued from Page 3)

IN WHOSE POSSESSION		PROPERTY	TO BE AWARDED TO	
Petitioner (You)	Respondent (Spouse)		Petitioner (You)	Respondent (Spouse)
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>

OTHER NOTES:

*** If there are no minor children, skip to bottom of page 8 ***

Children

NAME OF CHILD / SOCIAL SECURITY NUMBER / DATE OF BIRTH / CURRENT AGE

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Where have your children lived for the last five years (county, city, state) and who have they lived with?

CHILDS INITIALS / WHERE THE CHILD LIVED / HOW LONG THEY LIVED THERE / WHO DID THEY LIVE WITH

Rule 100

The court must be notified of any party being witness to or participating in any litigation concerning custody, child support, or parent time. The court also needs to be informed of any criminal or delinquency cases regarding a party or parties' minor children, any protective order cases involving a party, any juvenile cases pending, any persons that are not a party to these proceedings that has physical custody of the parties minor children.

Are there any cases the court needs to be informed of pursuant to Rule 100? Yes No

If yes, please explain: _____

Please complete the following for all minor or dependent adopted or born of this marriage children (under the age of 18 and/or still in high school):

Who should be given permanent LEGAL CUSTODY (make decisions regarding the children) of the children?

- PETITIONER (ME)
- RESPONDENT (SPOUSE)
- JOINT

Who should be given permanent PHYSICAL CUSTODY (where the children reside) of the children?

- PETITIONER (ME)
- RESPONDENT (SPOUSE)
- JOINT

Joint Physical Custody (anywhere from 111-254 overnights for one parent)

If JOINT custody is selected, please indicate the percentage of overnights for each parent and a proposed schedule for the children. *Remember if using percentages the total between spouse 1 and spouse 2 must equal 100%; if using days the total between you and your spouse must equal 365.* _____

Example: 50% You 50% Spouse. 183 Days You and 182 days Spouse.

_____ % YOU _____ % SPOUSE **OR** _____ DAYS YOU _____ DAYS SPOUSE

Proposed Schedule: _____

Sole Physical Custody Visitation (under 111 overnights for the noncustodial parent)

Normally the non-custodial parent is granted reasonable visitation with the children. Reasonable visitation is generally what you and your spouse can agree upon. In the event you cannot agree, the statutory parent-time would apply. That is, the noncustodial parent would have one evening a week (Wednesday is default) and every other weekend with the minor child(ren).

Holidays are shared based on the year (odd/even) and are explained in our holiday time worksheets. If you would like to deviate from the standard parent-time visitation, please indicate below.

The divorce decree should provide for (check one):

Standard Visitation - Utah Code Ann. § 30-3-35 (one evening a week and every other weekend, Friday to Sunday)

Alternative schedule (must be less than 111 overnights): _____

Right of First Refusal

Rather than having to depend on a third party (daycare, nanny, etc.) to provide childcare for children the custodial parent can agree to cooperate so that the other parent, if willing and able to transport, can provide childcare for periods that exceed a certain period of time (example: 4 hours)

Would you and your spouse like to participate in Right of First Refusal? YES NO

If so, how many hours and would you like any exceptions (grandparents / spouse): _____

Summer-time Visitation

If you do not specify summer visitation, it will be as defined in § 30-3-35. Do you wish to have the decree specify a summer-time visitation schedule? YES NO

If yes, please explain: _____
(It is recommended to define this schedule especially in joint custody arrangements as §30-3-35 is tailored to a sole custody arrangement)

Financial

Are you (or your spouse) receiving any financial assistance from the State of Utah? YES NO

If yes, please explain: _____

Have you (or your spouse) in the last year received any financial assistance from the State of Utah?

YES NO If yes, please explain: _____

By law each party should pay one-half (1/2) of all day care expenses incurred for the minor children so that the parties can work or go to school full time.

Amount of work-related CHILD CARE paid each month: \$ _____

By law each party should pay one-half (1/2) of all out-of-pocket health/dental insurance premiums incurred for the minor children.

Who will maintain health insurance for the minor children?

- PETITIONER (ME) - Number of People currently covered by that policy: _____ Cost: \$ _____
- RESPONDENT (SPOUSE) - Number of People currently covered by that policy: _____ Cost: \$ _____
- BOTH *Complete information for each plan above.*

In addition to insurance premiums, each party will be ordered to pay one-half (1/2) of all routine and major medical, dental, etc. expenses incurred for the minor children and not covered by insurance.

Is there some reason why the parties should not each pay one-half (1/2) of the medical, dental, etc., expenses incurred for the minor children? YES NO

If yes, please explain: _____

Do you or your spouse have any court ordered child support or alimony obligations from any previous marriage or relationship?

YES NO If yes, please explain: _____

Child Support & Universal Withholding

The amount of child support to be paid will be determined using the Utah Uniform Child Support Guidelines based on the financial information you have provided. The child support to be ordered is required to meet at least the guideline amount. You will be informed as to the level of support the Guidelines require at your appointment.

Utah law requires the parent paying child support to pay through Universal Withholding. To commence Universal Withholding, one parent must contact the Office of Recovery Services. Then, the employer of the parent obligated to pay support will be notified and child support will be deducted from the parent's paycheck automatically, forwarded to Office of Recovery Services, then forwarded to the parent receiving support. If both parents are willing to pay and receive child support directly, we may ask that the Court waive the Universal Withholding requirement, so long as both parties remain satisfied with the arrangement.

Would you like to ask the Court to WAIVE the Universal Withholding requirement? YES NO

Life Insurance

Although not required by law, unless there is good reason otherwise, the parent paying child support is normally ordered to pay for and maintain life insurance on his/her own life naming the children as the beneficiaries as long as support is owed. A good way to calculate the amount of needed insurance is to take the monthly child support award and multiply that amount by the number of months that child support will be paid.

Would you like the Court to order the parent paying child support to maintain life insurance? YES NO

If yes, what amount of life insurance should be ordered?

\$50,000 \$100,000 \$200,000 \$500,000 \$1,000,000 Other: _____

Taxes

There is no presumption as to which parent should be awarded the right to claim a child as exemptions/dependents for income tax purposes. Unless the parties can agree who will claim the children, the Court will award the exemption based on a case-by-case basis. Who should be allowed to claim the children as dependents/exemptions for tax purposes:

(It is very common to share odd/even years exemptions as long as the obligated party is current on child support)

- | | | | |
|--|------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> YOU | <input type="checkbox"/> Odd Years | <input type="checkbox"/> Even Years | <input type="checkbox"/> Every Year |
| <input type="checkbox"/> SPOUSE | <input type="checkbox"/> Odd Years | <input type="checkbox"/> Even Years | <input type="checkbox"/> Every Year |
| <input type="checkbox"/> OTHER (Please Explain): _____ | | | |

***** RESUME HERE IF THERE ARE NO MINOR CHILDREN FROM THIS MARRIAGE. *****

HOW DID YOU HEAR ABOUT OUR DIVORCE SERVICES?

- | | |
|--|--|
| <input type="checkbox"/> Friend - Name _____ | <input type="checkbox"/> Utah Legal Services |
| <input type="checkbox"/> Utah State Bar | <input type="checkbox"/> Attorney Referral - Name: _____ |
| <input type="checkbox"/> Court Clerk | <input type="checkbox"/> Newspaper / Magazine |
| <input type="checkbox"/> Television or Radio | <input type="checkbox"/> Internet Search |
| <input type="checkbox"/> Legal Aid Society | <input type="checkbox"/> Other: _____ |

AGREEMENT

_____ The undersigned agrees and understands that the law office of Angela H. Elmore and Utah Legal Clinic are providing this information and legal advice to the undersigned for the purpose of representing himself/herself (DIY) in an uncontested divorce action in a district court of the State of Utah; or for the purpose of Angela H. Elmore and Utah Legal Clinic (Divorce with Assistance) to represent the undersigned in an uncontested divorce action in a district court of the State of Utah. This information and advice is being provided by Angela H. Elmore, Esq., personally and/or by and through her staff, written data and sample documents.

_____ All of the information contained in the foregoing answers is true, correct and complete. The undersigned acknowledges that the foregoing information will be used to provide legal advice and therefore must be true, correct and complete.

_____ I agree and understand that I will thoroughly review the documents for my divorce prepared for me by Utah Legal Clinic before I sign them and before I file them with the court. I have been informed that I should sign and file those documents only if I completely understand and agree to the terms of the divorce as set out in those documents.

_____ I have been informed and understand that the papers that are being prepared are for an uncontested divorce action in which my spouse and I agree on all the terms of the divorce. I understand that to do my own divorce, I must know where my spouse is so that I can contact him/her. I understand that if the divorce becomes contested (that is, my spouse and I cannot agree on the terms of the divorce), that I probably will not be able to represent myself in the divorce action and will have to seek further legal advice and assistance from an attorney. Angela H. Elmore and Utah Legal Clinic may represent me in such a contested divorce for additional fees if the contested divorce is in the State of Utah.

_____ I have been informed and understand that if I do not have my spouse sign the Acceptance, Waiver and Consent documents and file those papers with the court within 120 days of the date I file the Complaint, the court may dismiss my divorce action and may require me to start over, file a new Complaint and pay a new filing fee.

_____ I understand that Utah Legal Clinic will provide advice, assistance, all completed forms and the step-by-step procedure for me to handle my own divorce. The fee for that service is Two Hundred and Twenty-five Dollars (\$225.00) for an action not involving custody of children; that amount includes ~ 30 pages of typing necessary for the divorce. The fee is Three Hundred and Twenty-Five Dollars (\$325.00) for an action involving custody of children which includes all the typing (~ 60 pages). In addition to these fees, a Three Hundred Eighteen Dollars (\$318.00) filing fee must be paid to the court clerk to file the case and the cost must be paid to attend the Divorce Education and Orientation classes (approx. \$55.00 per parent) if there are minor children. I understand that the flat rate for Divorce with Assistance is an additional Three Hundred Dollars (\$300) and the Three Hundred and Eighteen Dollar (\$318) filing fee must be paid to us in order to pay the court clerk.

_____ I understand if I meet with Utah Legal Clinic staff and discuss terms of my divorce, but I do not have the documents prepared, I will receive a refund of the fees paid except for \$75.00 which represents fees for that consultation.

_____ Included in the fee I pay is the typing of the divorce papers. However, I understand Utah Legal Clinic will type the papers ONLY ONCE. Therefore, I must be sure that my spouse and I agree as to the terms of the divorce.

_____ If it is necessary to re-type the papers, Utah Legal Clinic will charge an additional fee of Fifty Dollars (\$50.00). If I want to attempt to waive the required 90-day waiting period before my divorce can be finalized or if I must have my spouse formally served with the divorce papers, an additional Twenty-Five Dollars (\$25.00) will be charged for the extra paperwork for either process. If I request any additional waivers to be prepared, there will be an additional minimum \$25.00 charge for each such waiver. Utah Legal Clinic will have my divorce papers on their computers for a maximum of six (6) months. If a re-type is done when my divorce paperwork is no longer on Utah Legal Clinic's computers, I will be required to pay the full fee.

I HAVE READ AND UNDERSTAND AND AGREE TO THE ABOVE TERMS.

_____ DATE

_____ SIGNATURE

Angela H. Elmore, Attorney at Law
Utah Legal Clinic
214 East 500 South Street
Salt Lake City, Utah 84111-3204

_____ PRINT NAME