

*****THE HELP CENTER STAFF CANNOT HELP YOU FILL OUT THE DOCUMENTS*****

- **FILE BEFORE 4:00PM**
- **AVOID THE LUNCH HOUR 12:00PM – 1:30PM**
- **\$196.50 FILING FEE (WE ACCEPT CASH, CHECK, MONEY ORDER, AND CREDIT/DEBIT CARD (\$4.95 FEE W/CARD))**

CHECKLIST FOR DIVORCE WITHOUT CHILDREN

- COVER SHEET -IDENTIFIES THE PARTIES OF CASE**
- PETITION FOR DIVORCE – STARTS CASE -NEEDS NOTARIZED**
- DOMESTIC RELATIONS AFFIDAVIT – NOT DIVIDING ANYTHING -not completing this may delay your hearing**
- VOLUNTARY ENTRY OF APPEARANCE – THIS MAY BE SIGNED BY OTHER PARTY TO WAIVE SERVICE -NEEDS NOTARIZED**
- REQUEST AND SERVICE INSTRUCTION FORM – COMPLETE WITH ADDRESS & HOW YOU’RE SERVING OTHER PARTY (ignore if Voluntary Entry of Appearance is being filed)**

TO BE COMPLETED FOR THE FINAL HEARING DATE

(WE WILL PROVIDE YOU W/ THIS PAPERWORK THE DAY YOU FILE)

- NOTICE OF HEARING – YOU WILL RECEIVE AFTER FILING, DATE AT LEAST 60 DAYS OUT FROM THE DATE YOU FILE**
- RETURN OF SERVICE – PROOF THE OTHER PARTY RECEIVED COPIES OF DOCUMENTS**
- DECREE OF DIVORCE - FINALIZES DIVORCE -needed in Microsoft Word Format**
- VITAL STAT FORM- Certificate of Divorce**

HELP CENTER – CONTACT THE HELP CENTER AND WE CAN VERIFY YOU HAVE ALL THE FORMS YOU NEED FOR YOUR FINAL HEARING



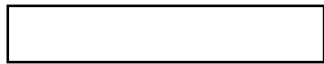


STATE OF KANSAS
TENTH JUDICIAL DISTRICT
JOHNSON COUNTY COURTHOUSE
OLATHE, KANSAS 66061

INSTRUCTIONS FOR FILING YOUR DIVORCE WITHOUT CHILDREN:

Filing: At the time of filing you must pay the filing fee of \$196.50. Using a credit/debit card may also cost additional fees. Cash, Cashier Check, Money Order and Personal Check are accepted.

- A. To start a divorce case you must complete and file the following documents:
 1. Civil Cover Sheet – a general information form for the Clerk’s office.
 2. Petition for Divorce – the main pleading asking for a divorce.
 3. Domestic Relations Affidavit (DRA) – a sworn affidavit of your income, expenses, assets and debts.
 4. Request and Service Instruction Form- how you will be notifying the other party of your filing.
- B. After preparing and printing the above forms, sign the Petition for Divorce in front of a notary public. Notary publics may commonly be found in the Court House, law firms, title companies and financial institutions, i.e. banks and credit unions. The Clerk may notarize your documents. Remember DO NOT sign anything until it can be witnessed with proper Identification.
- C. File your ORIGINAL documents with the Self-Help Center Clerks.
 - Notice of Hearing: Upon filing your documents with the clerk, you will be instructed on how to obtain a hearing date. By statute there is a waiting period to attend your hearing of 60 days



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

DOMESTIC

<u>MARRIAGE DISSOLUTION/DIVORCE</u>	<u>PROTECTION FROM ABUSE</u>	<u>PROTECTION FROM STALKING</u>	<u>UIFSA</u>
<u>OTHER DOMESTIC RELATIONS</u>	<u>NON-DIVORCE SUPPORT, CUSTODY OR VISITATION</u>		<u>PATERNITY</u>

PROBATE/ESTATE

<u>GUARDIAN/CONSERVATOR</u>	<u>DETERMINATION OF DESCENT</u>	<u>ELDER ABUSE</u>	<u>ADOPTION</u>
Conservatorship/Trusteeship			
Guardianship - Adult	<u>SEXUALLY VIOLENT PREDATOR</u>	<u>OTHER PROBATE/ESTATE</u>	
Guardianship - Minor			
Guardian/Conservator - Adult	<u>DECEDENT ESTATE</u>	<u>CARE AND TREATMENT</u>	
Guardian/Conservator - Minor			

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

SUMMONS ATTACHED: YES
NO

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

SHERIFF'S PROCESS FEE ATTACHED YES
NO

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 JOHNSON COUNTY, KANSAS

In the Matter of the Marriage of:

_____ and _____

Case No. _____

Division _____

Chapter 23

TITLE TO REAL ESTATE INVOLVED

PETITION FOR DIVORCE WITHOUT CHILDREN

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 _____ in _____ and have been married since that date.
4. We are incompatible and should receive a divorce.
5. The court should divide our property and debt as we agree or as the court may decide.
6. I have checked this box if I request spousal support.
7. I should be restored to the following former name which is _____.
8. My spouse is not now on active duty with the United States Military.
9. I have checked this box if Wife is now pregnant.
10. No children have been born during our marriage or all of our children are over 18 years old and are no longer in high school.
11. I request a divorce, a division of property and debt, support orders, and other appropriate orders.

Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Email Address: _____

VERIFICATION

STATE OF KANSAS)
) ss.
COUNTY OF JOHNSON)

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

Filing Party

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

Notary Public

Property and Debts

- If you have any property and/or any debts, don't forget to say who is getting which property item and who is going to pay which debt.
- Forgetting to list something might cause confusion later.
- It doesn't matter if it is in one or both persons' name.
- List **ALL** major property. Things to list might include:
 - Houses
 - Cars, trucks, motorcycles, and boats
 - Anything with a title
 - Bank accounts
 - Retirement accounts (401k, IRA, KPERs, etc.)
 - Anything worth more than \$500
 - You don't need to list furniture if it is already divided
- List **ALL** debts either you or your spouse owe to anyone.
 - Credit cards
 - Car/truck/motorcycle/boat loans
 - Mortgages
 - Personal loans
 - Consolidation loans
 - Student loans
 - Unpaid taxes
- It's important to remember that the people you owe are not required to honor your agreement.



Domestic Relations Affidavit

IN THE _____ JUDICIAL DISTRICT
 _____ COUNTY, KANSAS

IN THE MATTER OF _____)
)
)
 Petitioner _____)
)
 and _____)
)
)
 Respondent _____)
)

Case No. _____

DOMESTIC RELATIONS AFFIDAVIT OF _____
 (name)

1. Petitioner Residence _____

Petitioner _____
 Birth Month/Year XXX-XX-____ Social Security Number Telephone _____

2. Respondent Residence _____

Respondent _____
 Birth Month/Year XXX-XX-____ Social Security Number Telephone _____

3. Date of Marriage: _____

4. Number of Marriages: Petitioner _____ Respondent _____

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. Petitioner is employed by (name) _____

(address) _____

Respondent is employed by (name) _____

(address) _____

with monthly income as follows:

A. Wage Earner	Petitioner	Respondent
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	Petitioner	Respondent
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: _____
Petitioner Respondent

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		
	Petitioner	\$ _____	_____
	Respondent	\$ _____	_____
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	Petitioner (Actual or Estimated)	Respondent (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	<u>Petitioner</u> (Actual or Estimated)	<u>Respondent</u> (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	
					Petitioner	Respondent
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
				Subtotal of Payments	\$ _____	\$ _____
				Total	\$ _____	\$ _____

C. Total Living Expenses

	<u>Petitioner</u> (Actual or Estimated)	<u>Respondent</u> (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	Petitioner	Respondent
_____ (+/-)	\$ _____	\$ _____
_____ (+/-)	\$ _____	\$ _____

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 _____

IN THE DISTRICT COURT OF JOHNSON COUNTY, KANSAS

In the Matter of

Case No.

And

Court No.

VOLUNTARY ENTRY OF APPEARANCE

I received a copy of the petition/motion filed in this case. I am not requiring that the sheriff or other person hand me the summons and petition/motion as Kansas law may require. I understand that if I do not file an answer or appear at the hearing in this case that the court can enter orders against me.

Further, I acknowledge and so advise the court that I am am not a member of the active duty United States _____ and by signing this voluntary entry of appearance I am waiving my rights for the purpose of the captioned case, under the Service Members Civil Relief Act (SCRA) pursuant to 50 U.S.C. App. paragraphs 501-597b.

Name:

Address:

City, State, Zip:

Telephone Number:

Email:

ACKNOWLEDGEMENT

STATE OF KANSAS)

COUNTY OF _____) ss.

On this ____ day of _____, 20____,

_____ personally appeared in front of me, signed this document, and acknowledged to me that s/he signed this document voluntarily for purpose stated in this document. IN WITNESS, I have set my hand and affixed my seal.

Notary

IN THE DISTRICT COURT OF _____ COUNTY, KANSAS

In the Matter 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 opposing party legal name above)

REQUEST AND SERVICE INSTRUCTION FORM

You must give "legal notice" to opposing party that you have filed a Petition for. Your Petition must be filed and stamped with the date it was received by the Clerk of the District Court. The other party must get copies of this file-stamped Petition and Summons through one of the ways listed below. You will need one of these forms per opposing party.

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

Personal Service by Sheriff:

Check options a or b if you want the sheriff to give the paperwork to the other party.

Option a: If the other party lives in Kansas, you must pay a sheriff's service fee.

Option b: If the other party lives in a state other than Kansas, you have to find out the county and procedures required by the sheriff in that state and county and to pay any fees required.

LIST DOCUMENTS YOU WANT SERVED: SUMMONS, PETITION

NAME OF PERSON TO BE SERVED: _____

ADDRESS FOR SERVICE: _____

- 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 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 the other party, 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 the other party 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)

No Service Required

Check option e if the other party 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 the other party a copy of the completed Petition. After getting the copies of the petition the other party can fill out a Voluntary Entry of Appearance form. The other party must sign this form in front of a notary public. The completed Voluntary Entry of Appearance with the other party's original signature must then be filed with the Clerk of the District Court.

Publication: (not applicable for all situations)

If you cannot provide notice of the Petition to the other party through sheriff's service, service by return receipt, or voluntary entry of appearance, then you may be able to provide notice of the Petition 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.

- e. No service required, other party 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)