|  |  |  |  |
| --- | --- | --- | --- |
| **State of Minnesota** |  |  | District Court |
| **County of** |  | Judicial District: |  |
|  |  | Court File Number: |  |
|  |  | Case Type: | Dissolution without Children |

**In Re the Marriage of:**

Name of Petitioner (first, middle, last) **Findings of Fact, Conclusions of Law, Order for Judgment,**

**Judgment and Decree**

and

Name of Respondent (first, middle, last)

A. This proceeding for dissolution of marriage came before the undersigned judge of district court on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date) at (location) in the State of Minnesota. Petitioner  did  did not appear. Respondent  did  did not appear. appeared as attorney for .

B. Petitioner  is NOT represented by an attorney OR

Petitioner  is represented by the following attorney: .

C. Respondent  is NOT represented by an attorney OR

Respondent  is represented by the following attorney: .

D. Service of the *Summons and Petition for Dissolution of Marriage*:

Respondent was personally served on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_. **OR**  Respondent signed an *Admission of Service* on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_. **OR**  Respondent was served by alternate means as ordered by the court as follows:

By mailing the *Summons and Petition* to Respondent at the address(es) stated in the *Order for Service by Alternate Means* on this date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By publication of the *Summons* in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ newspaper for 3 consecutive weeks, once each week, on the following 3 dates:

E. Petitioner was served with an *Answer and Counter-Petition*:  YES  NO

If YES, Petitioner was served with the *Answer and Counter-Petition* on

Month Day Year

F.  Respondent did not respond, so Petitioner proceeded by default.

(Note: If the parties reached an agreement, use the *Stipulated Findings of Fact, Conclusions of Law, Order for Judgment, Judgment and Decree.*)

**Findings of Fact**

1. **Information about Petitioner**

Full Name: First Middle Last

Address where you live:

Street Address Apt. No.

City County State Zip Code

Mailing address:  Same as above address OR

Street Address Apt. No.

City County State Zip Code

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Month Day Year

List all of Petitioner’s former or other names or write “None”:

First Middle Last

First Middle Last

Petitioner’s social security number is listed on Confidential Form 11.1 and submitted along with the Petition.

1. **Information about Respondent**

Full Name:

First Middle Last

Address:

Street Address Apt. No.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City County State Zip Code

Respondent's address is unknown to Petitioner.

Respondent’s Mailing address:  Same as above address OR

Street Address Apt. No.

City County State Zip Code

Respondent’s Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Month Day Year

List all of Respondent’s former or other names or write “None”:

First Middle Last

First Middle Last

**3. Our Marriage**

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

1. **180 Day Requirement**

Petitioner has been living in Minnesota for the past six (6) months.  YES  NO

Respondent has been living in Minnesota for the past six (6) months.

YES  NO  UNKNOWN

Petitioner and Respondent were married in Minnesota, but neither Petitioner nor Respondent reside in Minnesota, nor reside in a jurisdiction that will allow an action for dissolution because of the sex or sexual orientation of the Petitioner and Respondent.

YES  NO

**5. Armed Forces**

1. Is Petitioner an active duty member of the armed forces?  YES  NO

**If YES**, has Petitioner been stationed in Minnesota for the past six (6) months?

YES  NO

Is Respondent an active duty member of the armed forces?

YES  NO UNKNOWN

**If YES**, has Respondent been stationed in Minnesota for the past (6) months?

YES NO

1. **Marriage Cannot be Saved**

There has been an irretrievable breakdown of the marriage relationship and the marriage between Petitioner and Respondent cannot be saved.

1. **Physical Living Situation**

The Petitioner and Respondent live together at this time.  YES  NO

If **NO**, the date of separation was: .

Month Day Year

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

**8. Other Proceedings**

A separate court case for marriage dissolution, legal separation, or annulment has already been started by Petitioner or Respondent in Minnesota or elsewhere.  YES  NO If YES, the type of court case is: , and it was started in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County in the State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and the Court file number is , and the status or outcome of the case is:

Open  Closed  Unknown or

**9. Protection or Harassment Order**

An *Order for Protection* or a *Harassment/Restraining Order* is in effect regarding Petitioner and Respondent?  YES  NO **If YES:**  The *Order* protects:  Petitioner  Respondent and the Order was filed in County in State on date, and the Court file number is .

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

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

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

c. Has either Petitioner or Respondent given birth during the marriage to a child who is not a child of the other spouse?  YES  NO

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

i. Fill in the information for all children during the marriage who are not biological children of both spouses.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name of Child | Date of Birth | Age | Which Party is Birth Parent? |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

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

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

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

If **YES**, state the full name of the child: and submit a **certified** **copy of the Recognition of Parentage,** if not submitted with the Petition.

iv. Has a “Husband’s Non-Paternity Statement” for any of the children listed at (i) above been signed?  YES  NO

If **YES**, state the name of the child: and submit **a certified copy of the “Husband’s Non-Paternity Statement,”** if not submitted with the Petition.

**(**For each minor child listed at c.(i.) there should be a paternity court order OR the Recognition of Parentage **and** Non-Paternity Statement to use this Dissolution Without Children form.)

d. Neither spouse is pregnant.  YES  NO (If either spouse is pregnant use Marriage Dissolution With Children form.)

**11. Public Assistance/Medical Assistance**

Note: If either party is receiving public assistance from the State of Minnesota or applies for it after this proceeding is started, the Petitioner should give notice of this marriage dissolution action to the Public Authority office for the county paying the assistance.

a. Petitioner receives public assistance from the State of Minnesota:  YES  NO

If YES, the assistance is from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County. (Check all that apply):

MFIP Tribal TANF General Assistance Child Care Assistance

Minnesota Care Medical Assistance

b. Respondent receives public assistance from the State of Minnesota:

YES NO UNKNOWN

If YES, the assistance is from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County. (Check all that apply):

MFIP Tribal TANF General Assistance Child Care Assistance

Minnesota Care Medical Assistance

**12. Supplemental Security Income (SSI)**

Supplemental Security Income (SSI) is a Federal income supplement program. It is available to low-income

people if they are over age 65, or blind, or disabled.

a. Petitioner receives Supplemental Security Income:  NO  YES in the amount of

$\_\_\_\_\_\_\_\_\_\_\_\_ per month.

b. Respondent receives Supplemental Security Income:  NO  YES in the amount of

$\_\_\_\_\_\_\_\_\_\_\_\_ per month, or UNKNOWN

**13. Petitioner’s Employment**

a. Petitioner is employed.  YES  NO

b. Petitioner is Self-Employed.  YES  NO

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Employer’s Street Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip Code

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Employer’s Street Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip Code

1. Petitioner’s Gross Income

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

###### Source of Income Amount per month (or zero) before taxes and deductions

Self Employment Income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month

Calculate net monthly self employment revenues as follows: (Annual gross revenues minus annual ordinary and necessary business expenses) divided by 12=Net Monthly

Revenue.

Income from all jobs $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Commissions from all jobs $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Unemployment benefits $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Social Security Retirement, Survivors or

Disability Income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month

Investments or Rental Income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Annuity payments $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Pension or Disability from work or military $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Worker’s Compensation $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

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

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Identify Source

Total **gross** income $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month

Petitioner receive child support payments.  YES  NO If YES, Petitioner receives child support payments from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name(s) of payor(s)) in the total amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month.

**15. Respondent’s Employment**

a. Respondent is employed.  YES  NO  UNKNOWN

b. Respondent is Self-Employed.  YES  NO  UNKNOWN

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer’s Street Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip Code

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer’s Street Address

City State Zip Code

1. Respondent’s Gross Income

Petitioner has no information about Respondent’s income. OR

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

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

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

###### Source of Income Amount per month (or zero) before taxes and deductions

Self Employment Income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Calculate net monthly self employment revenues as follows: (Annual gross revenues

minus annual ordinary and necessary business expenses) divided by 12=Net Monthly

Revenue.

Income from all jobs $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Commissions from all jobs $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Unemployment benefits $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Social Security (SSDI or RSDI) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Investments or Rental Income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Annuity payments $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Pension or Disability from work or military $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Worker’s Compensation $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

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

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month

Identify Source

Total **gross** income $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ per month

Does Respondent receive child support payments?  YES  NO If YES, Respondent receives child support payments from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name(s) of payor(s)) in the total amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_per month.

1. **Health Care Coverage**

a. Petitioner has insurance coverage **through his/her employment.**

Medical:  YES  NO Dental:  YES  NO

If YES, this medical insurance covers:  Petitioner  Respondent and this dental insurance covers:  Petitioner  Respondent

b. Respondent has insurance coverage **through his/her employment.**

Medical:  YES  NO  UNKNOWN

Dental:  YES  NO  UNKNOWN

If YES, this medical insurance covers:  Petitioner  Respondent

and this dental insurance covers:  Petitioner  Respondent

c. Petitioner receives Medical Assistance or Minnesota Care through the State of

Minnesota.  YES  NO

d. Respondent receives Medical Assistance or Minnesota Care through the State of Minnesota.  YES  NO  UNKNOWN

1. **Spousal Maintenance**

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

**Check only one box:**

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

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

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

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

**19. Vehicles**

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

Petitioner owns a vehicle.  YES  NO

Respondent own a vehicle.  YES  NO  UNKNOWN

List all vehicles owned by Petitioner and Respondent together or separately:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Type of Vehicle** (car, boat, truck etc.) | **Year/Make/**  **Model** | **Name(s) on**  **Title** | Value | Balance Owed | **Monthly**  **Payment** |
|  |  |  | $ | $ | $ |
|  |  |  | $ | $ | $ |
|  |  |  | $ | $ | $ |
|  |  |  | $ | $ | $ |

**20. Marital Property**

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

The marital property been divided between Petitioner and Respondent already, to Petitioner’s satisfaction.  YES  NO

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

**21. Non-Marital Property**

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

a. Petitioner has non-marital property.  YES  NO

If YES, list Petitioner’s non-marital property:

b. Respondent has non-marital property.  YES  NO  UNKNOWN

If YES, list Respondent’s non-marital property:

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

Petitioner has money in banks, savings, cash or investments.  YES  NO

Respondent has money in banks, savings, cash or investments.  YES  NO

UNKNOWN

If YES,

a. List all accounts owned by you alone, your spouse alone, or owned by both of you jointly including those opened after separation. “Type of account” means checking, savings, money market accounts, certificates of deposit, stocks, bonds, stock options, mutual funds, savings bonds, and Treasury Bills, etc. Use Confidential Information Form 11.1 (CON111) to list Financial Institution name, account holder name(s), and account numbers.

Do not include Pension or Employer-Funded Retirement Accounts, which are listed at #26.

|  |  |  |  |
| --- | --- | --- | --- |
| Financial Institution | Type of Account | Amount | Belongs to: (name on account) |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |

b. List cash not listed at a.:

Petitioner has cash in the amount of $ .

Respondent has cash in the amount of $ OR  UNKNOWN

**23. Business Interest**

Petitioner has an interest in a business.  YES  NO

Respondent had an interest in a business.  YES  NO  UNKNOWN

If YES, the name of the business is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the address is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_and the value is $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I arrived at this value as follows:

**24. Manufactured Home**

Petitioner owns a manufactured home.  YES  NO

Respondent owns a manufactured home.  YES  NO  UNKNOWN

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

a. Address of the manufactured home:

in the city of , state of

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

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

d. When was the home purchased?

e. What was the purchase price? $

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

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

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

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

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

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

**25. Real Property - Land, Buildings, Contracts for Deed**

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

a. Petitioner and Respondent jointly own real property.  YES  NO

b. Petitioner owns real property solely in his/her own name or with someone other than Respondent.  YES  NO

c. Respondent owns real property solely in his/her own name or with someone other than Petitioner.  YES  NO  UNKNOWN

d. How many properties are owned by you and your spouse in total?  None  One  Two  Three  \_\_\_\_\_\_\_

**If you or your spouse own real property, separately or together,** complete the following information about the property. If there is more than one piece of real property, photocopy and complete a Real Property Information page for each piece of property. Staple the additional sheets to the Stipulated Findings of Fact and label each sheet "Attachment to Stipulated Findings of Fact of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(your names)"

**Real Property Information**

1. Real Estate belongs to: (List full names of all owners
2. Legal Description is: (The full legal description **must** be included. Copy the legal description from the deed. Do not use the property tax statement legal description. If the legal description is long, you may use an attachment. Type or print neatly.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Street Address of the real property is:

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip

The property is in\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County.

4. Purchase date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(month , day, year) and purchase price:$

5. Mortgages or loans: (List all mortgages and loans on the property)

There are no mortgages or loans on this property.

1st Mortgage: Amount currently owed $ and name of lender 2nd Mortgage: Amount currently owed $ and name of lender

Other mortgages or loans:

6. Current Market Value of this property: $

How did you arrive at this value?

7. This property is the homestead: \_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_\_\_No

**26. Retirement Plans**

a. **Petitioner** has a retirement account. (IRA, 401(k), 403(b) or other)

YES  NO If **YES:** The name of the Financial Institution, account holder name(s), and account number is listed on Confidential Information Form 11.1 (CON111). The current balance is: $

b. **Petitioner**, or Petitioner’s past or present employer, union, or other group, paid money into a pension, profit sharing, or other retirement plan for Petitioner.

YES  NO **If** YES:

* + 1. The name of the plan is:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. The employer, union or group providing the plan is:
2. The date Petitioner began working at the job or joined the union or group plan is:
3. The type of plan is: (e.g. defined benefit, defined contribution)

v. The present value of the pension or plan is:

c. **Respondent** has a retirement account. (IRA, 401(k), 403(b) or other)

YES  NO  UNKNOWN If YES: The name of the Financial Institution, account holder name(s), and account number is listed on Confidential Information Form 11.1 (CON111). The current balance is: $

d. **Respondent**, or Respondent’s past or present employer, union, or other group, paid money into a pension, profit sharing, or other retirement plan for Respondent.

YES  NO  UNKNOWN **If** YES**, and it is a** Pension, Profit-Sharing, or other RetirementPlan:

1. The name of the plan is:
2. The employer, union or group providing the plan is:
3. The date Respondent began working at the job or joined the union or group plan is:
4. The type of plan is: (e.g. defined benefit, defined contribution)
5. The present value of the pension or plan is:

**27. Debts**

Petitioner has debts.  YES  NO

Respondent has debts.  YES  NO  UNKNOWN

If YES, list debts in your name, your spouse’s name and in both names jointly. Include unpaid debts from before the marriage date, during the marriage, and after separation. Fill in all information completely and attach another sheet of paper if necessary.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Money is owed to:** | **Money was used for:** | **Whose Name is on the Account and When was the Debt Incurred?**  Name Date | **Balance Owed** | **Monthly Payment** |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  |  |  | $ | $ |
|  | | **Total Debt** | **$** | **$** |

**28. Name Change**

a. Neither person wants to change his/her name.

b.  Petitioner  Respondent want to change his/her name to: (*full name, not initials)*

*first middle last*

This name change request is made with no intent to defraud or mislead anyone:

True  False.

The person requesting the name change has been convicted of a felony:

YES  NO If YES:

i. Notice of this request for name change has been given to the proper authority as required by Minn.Stat.§259.13. (IMPORTANT NOTICE: If you are a convicted felon and you request a name change without following the requirements of Minn. Stat § 259.13, using the new last name after your divorce is a gross misdemeanor.)

ii. An *Affidavit of Service of the Notice* marked Exhibit “A” has been submitted along with this Findings of Fact, Conclusions of Law, Order for Judgment, Judgment and Decree.

**29. Other Findings**

**BASED UPON THE ABOVE INFORMATION,** the Court makes the following:

**CONCLUSIONS OF LAW**

1. The bonds of matrimony between Petitioner and Respondent are dissolved, so they are single and not married.

**2. Health Care Coverage for the Parties**

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

b. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(full name) shall provide  medical

dental insurance for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(full name)

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

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

**3. Spousal Maintenance**

a. Neither party is awarded spousal maintenance.

b. Maintenance is reserved because:

Either party can ask the court to order the payment of spousal maintenance in the future by filing a Motion stating a change in circumstances.

c.  Petitioner  Respondent shall pay permanent spousal maintenance to the other party in the amount of $ per month starting on (date): .

Any past due amounts are still owed.

d.  Petitioner  Respondent shall pay temporary spousal maintenance to the other party in the amount of $ per month starting on (date): and ending: . Any past due amounts are still owed.

The monthly amount of permanent or temporary spousal maintenance shall be:

subject to income withholding from the payor’s income, regardless of source, by his or her employer, trustee, or other payor of funds and mailed to: Minnesota Child Support Payment Center, P.O. Box 64326, St. Paul, MN 55164-0326. If the person paying spousal support is self-employed, send payments to Minnesota Child Support Payment Center, P.O. Box 64306, St. Paul, MN 55164-0306. **To start income withholding, Petitioner or Respondent must apply for income withholding at the Child Support Office in their county.** Until income withholding starts, the person owing maintenance shall pay the amount directly to the spouse receiving it.

**OR**

Maintenance shall be paid directly by the spouse owing the maintenance to the spouse receiving it, payable on the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_day of each month.

**4.** **Vehicles**

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

|  |  |
| --- | --- |
| Year / Make / Model | **Awarded to:** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**5. Marital Property**

The parties’ marital property, household goods, furniture and furnishings are awarded:

a. As currently divided **OR**

b. As follows (add pages if necessary):

To Petitioner:

To Respondent:

**6. Non-Marital Property**

The parties’ non-marital property is awarded:

a. As currently divided **OR**

b. As follows (add pages if necessary):

To Petitioner:

To Respondent:

**7.** **Cash and Accounts**

a. Awarding the savings and investments as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| Institution | Type of Account | Amount | Awarded to |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |
|  |  | $ |  |

b.  Awarding any cash not included in a. above to the party who currently has the cash OR

Awarding the cash as follows:

**8.** **Business**

None OR

Awarding the parties’ **business** as follows:

**9**. **Manufactured Home**

None OR

Awarding the manufactured home located at :

street address

city state

to  Petitioner  Respondent. The debt on the manufactured home owed to: \_\_\_\_shall be paid by  Petitioner  Respondent.

**10. Real Property**

None OR

Awarding solely to  Petitioner  Respondent all right, title, and interest of the parties in the real property located at:

Street address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the City of , County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of , which has the following legal description:

with the following mortgages and loans to be paid, after the divorce is final, by

Petitioner  Respondent:

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

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

and subject to the following liens or other agreements:

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

Other request regarding the property: (describe the request fully)

**11. Additional** **Real Property**

None OR

Awarding solely to  Petitioner  Respondent all right, title, and interest of the parties in the real property located at:

Street address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the City of , County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of , which has the following legal description:

with the following mortgages and loans to be paid, after the divorce is final, by

Petitioner  Respondent:

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

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

and subject to the following liens or other agreements:

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

Other request regarding the property: (describe the request fully)

**12. Retirement Funds**

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

Petitioner has no retirement funds OR

100% to Petitioner OR

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

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

Respondent has no retirement funds OR

100% to Respondent OR

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

**13. Debts**

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

|  |  |
| --- | --- |
| **Debt Owed To:** | **To Be Paid By:** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

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

**14. Name Change**

Neither party is requesting a name change.

OR

Changing Petitioner’s name to:

First Middle Last

Changing Respondent’s name to:

First Middle Last

**15.** **Other**:

**16.** **Other**:

**17.** Each party shall execute any and all documents necessary to transfer real and personal property as awarded herein without further order of the Court. Should either party fail to execute the necessary documents, a certified copy of the Judgment and Decree shall operate to transfer title as awarded.

**18.** Petitioner shall personally serve Respondent with a copy of the *Judgment and Decree* by having a third party (the server), age 18 or older, hand a copy of the *Judgment and Decree* to Respondent. The server’s *Affidavit of Service*, filed with the Court by Petitioner, will be proof of service.

**NOTICE: APPENDIX A SHALL BE INCORPORATED AND MADE A PART OF THE JUDGMENT AND DECREE.** Appendix A contains provisions regarding Payments to Public Agency, Minnesota Statutes § 518A.50; Depriving Another of Custodial or Parental Rights--A Felony, Minnesota Statutes § 609.26; Rules of Support, Maintenance, Parenting Time; Parental Rights from Minnesota Statutes § 518.17, subdivision 3; Wage and Income Deduction of Support and Maintenance, Minnesota Statutes § 518A.53; Change of Address or Residence; Cost of Living Increase of Support and Maintenance pursuant to Minnesota Statutes § 518A.75; Judgments for Unpaid Support pursuant to Minnesota Statutes § 548.091; Judgments for Unpaid Maintenance pursuant to Minnesota Statutes §548.091; Medical Insurance and Expenses pursuant to Minnesota Statutes § 518A.41; and Minnesota Statutes § 259.115 regarding criminal penalties for failure to comply with felon name change law.

**ORDER FOR JUDGMENT**

**LET JUDGMENT BE ENTERED IMMEDIATELY.**

The foregoing facts were found BY THE COURT

by me after due hearing and the

Order thereon is recommended.

District Court Referee Judge of District Court

Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# JUDGMENT

I certify the above *Conclusions of Law* are the Judgment of the Court and Judgment is hereby entered.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Court Administrator

Deputy

Dated:

**APPENDIX A**

**NOTICE IS HEREBY GIVEN TO THE PARTIES:**

**I. PAYMENTS TO PUBLIC AGENCY.** According to Minnesota Statutes, section 518A.50, payments ordered for maintenance and support must be paid to the Minnesota child support payment center as long as the person entitled to receive the payments is receiving or has applied for public assistance or has applied for support and maintenance collection services. Parents mail payments to: P.O. Box 64326, St. Paul, MN 55164-0326. Employers mail payments to: P.O. Box 64306, St. Paul, MN 55164.

**II. DEPRIVING ANOTHER OF CUSTODIAL OR PARENTAL RIGHTS -- A FELONY.** A person may be charged with a felony who conceals a minor child or takes, obtains, retains, or fails to return a minor child from or to the child's parent (or person with custodial or parenting time rights), according to Minnesota Statutes, section 609.26. A copy of that section is available from any court administrator.

**III. NONSUPPORT OF A SPOUSE OR CHILD – CRIMINAL PENALTIES.** A person who fails to pay court-ordered child support or maintenance may be charged with a crime, which may include misdemeanor, gross misdemeanor, or felony charges, according to Minnesota Statutes, section 609.375. A copy of that section is available from any district court clerk.

**IV. RULES OF SUPPORT, MAINTENANCE, PARENTING TIME.**

A. Payment of support or spousal maintenance is to be as ordered, and the giving of gifts or making purchases of food, clothing, and the like will not fulfill the obligation.

B. Payment of support must be made as it becomes due, and failure to secure or denial of parenting time is NOT an excuse for nonpayment, but the aggrieved party must seek relief through a proper motion filed with the court.

C. Nonpayment of support is not grounds to deny parenting time. The party entitled to receive support may apply for support and collection services, file a contempt motion, or obtain a judgment as provided in Minnesota Statutes, section 548.091.

D. The payment of support or spousal maintenance takes priority over payment of debts and other obligations.

E. A party who accepts additional obligations of support does so with the full knowledge of the party's prior obligation under this proceeding.

F. Child support or maintenance is based on annual income, and it is the responsibility of a person with seasonal employment to budget income so that payments are made throughout the year as ordered.

G. A *Parental Guide to Making Child-Focused Parenting-Time Decisions* is available from any court administrator.

H. The nonpayment of support may be enforced through the denial of student grants; interception of state and federal tax refunds; suspension of driver’s, recreational, and occupational licenses; referral to the department of revenue or private collection agencies; seizure of assets, including bank accounts and other assets held by financial institutions; reporting to credit bureaus; interest charging, income withholding, and contempt proceedings; and other enforcement methods allowed by law.

I. The public authority may suspend or resume collection of the amount allocated for child care expenses if the conditions of Minnesota Statutes, section 518A.40, subdivision 4, are met.

J. The public authority may remove or resume a medical support offset if the conditions of section 518A.41, subdivision 16, are met.

K. The public authority may suspend or resume interest charging on child support judgments if the conditions of section 548.091, subdivision 1a, are met.

**V. MODIFYING CHILD SUPPORT.** If either the obligor or obligee is laid off from employment or receives a pay reduction, child support may be modified, increased, or decreased. Any modification will only take effect when it is ordered by the court, and will only relate back to the time that a motion is filed. Either the obligor or obligee may file a motion to modify child support, and may request the public agency for help. UNTIL A MOTION IS FILED, THE CHILD SUPPORT OBLIGATION WILL CONTINUE AT THE CURRENT LEVEL. THE COURT IS NOT PERMITTED TO REDUCE SUPPORT RETROACTIVELY.

**VI. PARENTAL RIGHTS FROM MINNESOTA STATUTES, SECTION 518.17, SUBDIVISION 3.** UNLESS OTHERWISE PROVIDED BY THE COURT:

A. Each party has the right of access to, and to receive copies of, school, medical, dental, religious training, police reports, and other important records and information about the minor children. Each party has the right of access to information regarding health or dental insurance available to the minor children. Presentation of a copy of this order to the custodian of a record or other information about the minor children constitutes sufficient authorization for the release of the record or information to the requesting party.

B. Each party has the right to be informed by the other party as to the name and address of the school of attendance of the minor children. Each party has the right to be informed by school officials about the children's welfare, educational progress and status, and to attend school and parent teacher conferences. The school is not required to hold a separate conference for each party.

C. Each party has the right to be notified by the other party of an accident or serious illness of a minor child, including the name of the health care provider and the place of treatment.

D. Each party has the right to be notified by the other party if the minor child is the victim of an alleged crime, including the name of the investigating law enforcement officer or agency. There is no duty to notify if the party to be notified is the alleged perpetrator.

E. Each party has the right of reasonable access and telephone contact with the minor children.

**VII. WAGE AND INCOME DEDUCTION OF SUPPORT AND MAINTENANCE.** Child support and / or spousal maintenance may be withheld from income, with or without notice to the person obligated to pay, when the conditions of Minnesota Statutes, section 518A.53, have been met. A copy of that section is available from any court administrator.

**VIII. CHANGE OF ADDRESS OR RESIDENCE.** Unless otherwise ordered, each party shall notify the other party, the court, and the public authority responsible for collection, if applicable, of the following information within ten days of any change: residential and mailing address, telephone number, driver's license number, social security number, and name, address, and telephone number of the employer.

**IX. COST OF LIVING INCREASE OF SUPPORT AND MAINTENANCE.** Basic support and / or spousal maintenance may be adjusted every two years based upon a change in the cost of living (using the U.S. Department of Labor, Bureau of Labor Statistics, consumer price index Mpls. St. Paul, for all urban consumers (CPI-U), unless otherwise specified in this order) when the conditions of Minnesota Statutes, section 518A.75, are met. Cost of living increases are compounded. A copy of Minnesota Statutes, section 518A.75, and forms necessary to request or contest a cost of living increase are available from any court administrator.

**X. JUDGMENTS FOR UNPAID SUPPORT; INTEREST.** According to Minnesota Statutes, section 548.091:

A. If a person fails to make a child support payment, the payment owed becomes a judgment against the person responsible to make the payment by operation of law on or after the date the payment is due, and the person entitled to receive the payment or the public agency may obtain entry and docketing of the judgment **without notice** to the person responsible to make the payment.

B. Interest begins accruing on a payment or installment of child support whenever the unpaid amount due is greater than the current support due.

**XI. JUDGMENTS FOR UNPAID MAINTENANCE.** A judgment for unpaid spousal maintenance may be entered and docketed when the conditions of Minnesota Statutes, section 548.091, are met. A copy of that section is available from any court administrator.

**XII. ATTORNEY FEES AND COLLECTION COSTS FOR ENFORCEMENT OF CHILD SUPPORT.** A judgment for attorney fees and other collection costs incurred in enforcing a child support order will be entered against the person responsible to pay support when the conditions of Minnesota Statutes, section 518A.735, are met. A copy of that section and forms necessary to request or contest these attorney fees and collection costs are available from any court administrator.

**XIII. PARENTING TIME EXPEDITOR PROCESS.** On request of either party or on its own motion, the court may appoint a parenting time expeditor to resolve parenting time disputes under Minnesota Statutes, section 518.1751. A copy of that section and a description of the expeditor process is available from any court administrator.

**XIV. PARENTING TIME REMEDIES AND PENALTIES.** Remedies and penalties for wrongful denial of parenting time are available under Minnesota Statutes, section 518.175, subdivision 6. These include compensatory parenting time; civil penalties; bond requirements; contempt; and reversal of custody. A copy of that subdivision and forms for requesting relief are available from any court administrator.

**In addition to the Notices on pages 29 and 30, the following NOTICE applies to all orders addressing custody pursuant to Minn. Stat. § 518.17, subd. 3a.**

**NOTICE**

**EACH PARTY IS GRANTED THE FOLLOWING RIGHTS:**

1. Right of access to, and to receive copies of, school, medical, dental, religious training, police reports, and other important records and information about the minor children.
2. Right of access to information regarding health or dental insurance available to the minor children.
3. Right to be informed by the other party as to the name and address of the school of attendance of the minor children.
4. Right to be informed by school officials about the children’s welfare, educational progress and status, and to attend school and parent-teacher conferences. The school is not required to hold a separate conference for each party, unless attending the same conference would result in violation of a court order prohibiting contact with a party.
5. Right to be notified by the other party of an accident or serious illness of a minor child, including the name of the health care provider and the place of treatment.
6. Right to be notified by the other party if the minor child is the victim of an alleged crime, including the name of the investigating law enforcement officer or agency. There is no duty to notify if the party to be notified is the alleged perpetrator.
7. Right to reasonable access and telephone or other electronic contact with the minor children.