

For the Stockbridge-Munsee Judiciary to grant you a divorce or legal separation, either party is a resident of the Stockbridge-Munsee Community for at least six (6) months or is a member of the Stockbridge-Munsee Tribe, who has resided within the state of Wisconsin for at least six (6) months, immediately preceding the date you file for divorce or legal separation.

IN ADDITION, the filing party must meet one of the following:

- Be a Stockbridge-Munsee tribal member or a member of a federally recognized tribe. OR**
- Be married to a Stockbridge-Munsee tribal member. OR**
- Be married to a Native American who is a resident of the Stockbridge-Munsee Reservation.**

IF YOU DO NOT MEET THESE REQUIREMENTS, YOUR CASE WILL LIKELY BE DISMISSED.

Any questions, call the Clerk of Court at 715-793-4397.

**INSTRUCTIONS FOR FILING A PETITION FOR DIVORCE OR LEGAL
SEPARATION**

- 1. Complete the Petition and the Summons. BE SURE TO SIGN THE PETITION IN FRONT OF A NOTARY PUBLIC SO THAT YOUR SIGNATURE CAN BE NOTARIZED.**
- 2. Make two copies of the Petition.**
- 3. File the original and two copies of the Petition (1 for you and 1 for service on your spouse) and the Summons. Pay the \$75.00 filing fee online or with the Finance Department.**
 - a. The Clerk will look over your papers, file stamp and fill in the case number.**
- 4. Serve the Petition and Summons on the other party (Respondent).**
 - a. The Summons and Petition must be served within 30 days after they are filed.**
 - i. An additional 30 days may be requested in writing. The written request may be granted by the court upon a showing of good cause.**
 - b. Serving a person means delivering the court papers to them in person. Service may be made by any law enforcement officer or other person, not a party, who is at least 18 years of age. You may not deliver the court papers yourself!**
 - c. The person serving the Petition and Summons must complete an Affidavit of Service which is included in this packet. The Affidavit of Service must be returned to the Clerk's office.**
- 5. If personal service is not possible, you may mail the Petition and Summons to those entitled to notice via certified mail with return receipt requested. If you, complete service by certified mail, you must file the certified return receipt (green card) showing the date of delivery with the Clerk.**
- 6. If personal service and mail service are not possible, you may ask the court to permit service by publication.**

Any questions, call the Clerk of Court at 715-793-4397.

STOCKBRIDGE-MUNSEE FAMILY COURT
PETITION FOR DIVORCE

Case No: _____

Petitioner:

First name	Middle name	Last name	(maiden name)
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Current Mailing address	City	State	Zip
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Phone number	Attorney information if you have one
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Respondent:

First name	Middle name	Last name	(maiden name)
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Current Mailing address	City	State	Zip
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Phone number	Attorney information if you have one
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I am the Petitioner in this action.

A. I am providing the following information about myself:

1. Date of birth: _____ SSN: _____
2. Immediately before filing this petition, I will have lived on the Stockbridge-Munsee Reservation for: _____ months years.
3. Check one of the following:
 - a. I am a Stockbridge-Munsee tribal member (Enrollment No. _____).
 - b. I am a member of another federally recognized Indian tribe (list tribe: _____).
 - c. I am married to a Stockbridge-Munsee tribal member.
 - d. I am married to a member of a federally recognized Indian tribe who resides on the Stockbridge-Munsee Reservation.
4. I am currently on active duty as a member of the Armed Forces of the United States of America or its allies. Yes No.

B. I am providing the following information about the Respondent, my spouse:

1. Date of birth: _____ SSN: _____
2. Immediately before filing this petition, I will have lived on the Stockbridge-Munsee Reservation for: _____ months years.
3. The Respondent is: (check one)
 - a. Stockbridge-Munsee tribal member (Enrollment No. _____).
 - b. A member of another federally recognized Indian tribe
 - c. Non-Native
4. The Respondent is currently on active duty as a member of the Armed Forces of the United States of America or its allies. Yes No.

C. I am providing the following marriage information:

1. My spouse and I were married on (date): _____
2. We were married in (city): _____ (state) _____
3. I am filing for:
 - a. Divorce: This marriage is irretrievably broken.
 - b. Legal Separation: This marriage is broken and the reason I am requesting a legal separation and not a divorce is: _____

4. This my first marriage Yes No

a. I was previously married to _____

b. The marriage was terminated by : divorce death

c. Date of divorce or death: _____

d. The divorce was granted in:

Name of court: _____

City _____ State _____

e. I was also previously married to _____

f. The marriage was terminated by: divorce death.

g. Date divorce or death: _____

h. The divorce was granted in:

Name of court: _____

City _____ State _____

If you had more than 2 previous marriages, please give the above information for each one on a separate sheet of paper and include with your filing.

5. This my spouse's first marriage Yes No

a. My spouse was previously married to

b. The marriage was terminated by : divorce death

c. Date of divorce or death: _____

d. The divorce was granted in:

Name of court: _____

City _____ State _____

e. My spouse was also previously married to

f. The marriage was terminated by: divorce death.

g. Date divorce or death: _____

h. The divorce was granted in:

Name of court: _____

City _____ State _____

If your spouse had more than 2 previous marriages, please give the above information for each one on a separate sheet of paper and include with your filing.

D. I am providing the following information regarding children:

1. The minor children (age 17 or younger) born to or adopted together by me and my spouse before or during our marriage are: None

Name of Child	Date of Birth
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Other children born to the wife during this marriage, but not fathered by the husband are:
 None

Name of Child	Date of Birth
_____	_____
_____	_____
_____	_____

3. To the best of my knowledge, the wife in this marriage:

- a. is currently pregnant.
- b. is not currently pregnant.

4. The current address of the minor children is:

- a. with mother at above address.
- b. with father at above address.
- c. with both mother and father at the above address(es).
- d. at the address below:

Address _____

City _____ State _____ ZIP _____

5. Previous addresses for the minor children are: None

Address _____

City _____ State _____ ZIP _____

Address _____

City _____ State _____ ZIP _____

6. Currently, or during the last 5 years, one or more of the minor children lived with a person other than a parent. Yes No

Child _____

Person _____

Address _____

City _____ State _____ ZIP _____

Child _____

Person _____

Address _____

City _____ State _____ ZIP _____

7. My spouse and I have made written agreements or received orders from the court about some or all of the matters in this action such as maintenance (spousal support), child support, legal custody or physical placement of the minor children, or property division.

a. Yes, and I have attached a copy of the written agreement to this Petition.

b. No

E. I ASK THAT THE COURT:

1. Grant judgment as requested.
2. Enter an order granting child support maintenance (spousal support).
3. Enter other orders as it deems just and equitable.

Petitioner:

Signature: _____

Print: _____

Date: _____

Parenting Plan (if children are involved)

I will be requesting the court to grant the following:

A. Legal Custody (decision making) for the following Child(ren):

Name of Child	Date of Birth	Joint Leal Custody	Sole Legal Custody to Petitioner	Sole Legal Custody to Respondent
		<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"/>

B. Physical Placement (time with children):

Name of Child	Equal Shared Placement	Primary Physical Placement to Petitioner	Primary Physical Placement to Respondent
	<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"/>

AND the physical placement schedule shall be:

- 1. As listed in the attached document.
- 2. As proposed below (on a biweekly basis)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Week 1							
Week 2							

C. Summer and Holiday Placement Schedule

The summer and holiday placement schedule should be as follows:

- 1. As proposed here:

	With Petitioner the following years	With Respondent the following years
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Holidays	Every year	Odd years	Even years	Every Year	Odd Years	Even Years
a. Mother's Day						
b. Memorial Day						
c. Father's Day						
d. July 4 th						
e. Labor Day						
f. Halloween						
g. Thanksgiving						
h. Christmas Eve						
i. Christmas Day						
j. New Year's Eve						
k. New Year's Day						
l. Mother's Birthday						
m. Father's Birthday						
n. Children's Birthday						
o. School Spring Break						
p. School Winter Break						
q. Summer Break to be shared as follows:						

2. According to the attached: (see attachment)

_____ Signature
 _____ Print Name
 _____ Date

ACTS PROHIBITED BY STOCKBRIDGE-MUNSEE LAW

In accordance with the Stockbridge-Munsee Divorce law neither the petitioner nor the respondent to this action can participate in any of the following activities while this action is pending:

(1) Harassing, intimidating, physically abusing, or imposing any restraint on the personal liberty of the other party or a minor child of either of the parties.

(2) Encumbering, concealing, damaging, destroying, transferring, or otherwise disposing of property owned by either or both of the parties, except in the usual course of business, in order to secure necessities, or in order to pay reasonable costs and expenses of the action, including attorney fees.

(3) Without the consent of the other party or an order of the court, establishing a residence with a minor child of the parties outside the state of Wisconsin or more than 150 miles from the residence of the other party within the state, removing a minor child of the parties from the state of Wisconsin for more than 90 consecutive days.

A VIOLATION OF THE ABOVE PROHIBITIONS MAY RESULT IN PUNISHMENT FOR CONTEMPT, WHICH MAY INCLUDE MONETARY PENALTIES AND OTHER SANCTIONS AS PROVIDED FOR UNDER THE STOCKBRIDGE-MUNSEE CODE OF LAWS.

THESE PROHIBITIONS apply until the action is dismissed, a final judgment in the action is entered, or the court orders otherwise.

ATTENTION: ONLY SIGN THIS DOCUMENT IN FRONT OF A NOTARY PUBLIC

Signature

Print Name

Date

Subscribed and sworn before me
this ____ day of _____, 20__

NOTARY PUBLIC
My commission expires: _____

STOCKBRIDGE-MUNSEE TRIBAL COURT

Mohican Nation

Stockbridge-Munsee Community

Date: --

Petitioner,

Respondent.

)
)
)
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Case No:

FINANCIAL DISCLOSURE FORM

Important Required Information

	Husband	Wife
Home Address:	<input type="text"/>	<input type="text"/>
S.S. Number:	<input type="text"/>	<input type="text"/>
Birth date:	<input type="text"/>	<input type="text"/>
Employer:	<input type="text"/>	<input type="text"/>
Occupation:	<input type="text"/>	<input type="text"/>
Date of Marriage:	<input type="text"/>	<input type="text"/>
Date of Separation:	<input type="text"/>	<input type="text"/>

Statement of Income

	Husband	Wife
Gross Monthly Income - Salary:	\$ <input type="text"/>	\$ <input type="text"/>
Total Gross Monthly Income:	\$ <input type="text"/>	\$ <input type="text"/>

Monthly Deductions for Gross Income

	Husband	Wife
Monthly Deductions from Gross Income:	\$ <input type="text"/>	\$ <input type="text"/>
Taxes - State:	\$ <input type="text"/>	\$ <input type="text"/>
Taxes - Federal:	\$ <input type="text"/>	\$ <input type="text"/>
Taxes - Social Security:	\$ <input type="text"/>	\$ <input type="text"/>
Insurance:	\$ <input type="text"/>	\$ <input type="text"/>
401 K Loan (Home Improvements):	\$ <input type="text"/>	\$ <input type="text"/>
Retirement:	\$ <input type="text"/>	\$ <input type="text"/>
Credit Union:	\$ <input type="text"/>	\$ <input type="text"/>
Maintenance:	\$ <input type="text"/>	\$ <input type="text"/>
Total Monthly Deductions:	\$ <input type="text"/>	\$ <input type="text"/>
Net Monthly Income (Take Home Pay):	\$ <input type="text"/>	\$ <input type="text"/>

Statement of Monthly Marital Expenses

	Husband	Wife
Name of Expense	\$ <input type="text"/>	\$ <input type="text"/>
Rent/Mortgage Payments:	\$ <input type="text"/>	\$ <input type="text"/>
Food:	\$ <input type="text"/>	\$ <input type="text"/>
Utilities:	\$ <input type="text"/>	\$ <input type="text"/>
Clothing:	\$ <input type="text"/>	\$ <input type="text"/>
Laundry:	\$ <input type="text"/>	\$ <input type="text"/>
Medical Not Covered by Insurance:	\$ <input type="text"/>	\$ <input type="text"/>
Dental Not Covered by Insurance:	\$ <input type="text"/>	\$ <input type="text"/>

Insurance:	\$		\$	
Automobile Expense:	\$		\$	
Auto Payments:	\$		\$	
Debts:	\$		\$	
Total Monthly Marital Expenses:	\$		\$	

Statement of Marital Assets

	Husband	Wife
Residence (Appraised Value):	\$	
Automobiles:	\$	
Personal Property:	\$	
Jewelry (Appraised Value):	\$	
Checking Account (Name of Bank):	\$	
Cash at Commencement of Action:	\$	
Pension:	\$	
Other:	\$	
Total Marital Assets:	\$	

Statement of Marital Liabilities

	Husband	Wife
Mortgage:	\$	
Credit Cards:	\$	
Loans:	\$	
Total Marital Liabilities:	\$	

Summary

	Husband	Wife
Total Marital Assets:	\$	
Total Marital Liabilities:	\$	
Total Net Marital Estate:	\$	

Assets

	Husband	Wife
Residence:	\$	
Automobiles:	\$	
Personal Property:	\$	
Jewelry (Appraised):	\$	
Checking Account:	\$	
Cash at Commencement of Action:	\$	
Pensions:	\$	
Other Property:	\$	
Totals:	\$	

Liabilities

	Husband	Wife
Mortgage:	\$	
Credit Cards:	\$	

Loans:

\$	
\$	
\$	
\$	
\$	
\$	

\$	
\$	
\$	

Totals:

Net Marital Estate:

Total Share of Net Estate:

\$	
\$	
\$	
\$	
\$	

\$	
\$	

Other Issues to be decided by the Court:

1.
2.

Husband's Signature:
Husband's Printed Name:
Date:

Wife's Signature:
Wife's Printed Name:
Date:

AFFIDAVIT OF SERVICE

Case No. _____

Petitioner

and

Respondent

I, _____, swear that on _____, I personally served the Motion on the following person: _____.

DATE: _____

TIME: _____

LOCATION: _____

I swear the foregoing is true and correct.

Dated this _____ day of _____, 20____.

Signature of Person serving other party