

# PACKET NO. 2

## DISSOLUTION OF MARRIAGE FORMS FOR MARRIED PERSONS FILING TOGETHER (NO MINOR CHILDREN)

(This packet does not deal with child custody, visitation, or child support.  
For a dissolution with minor children, please use Packet No. 1 instead.)

<i>Form Number</i>	<i>Form Name</i>
<b>WHERE CAN I FIND INSTRUCTIONS?</b>	
<a href="#"><u>DR-15</u></a>	<b>Instructions are available online at:</b> <a href="https://public.courts.alaska.gov/web/forms/docs/dr-15.pdf">https://public.courts.alaska.gov/web/forms/docs/dr-15.pdf</a> Printed copies are available for customers with limited or no internet access.
<b>WHAT IS INCLUDED IN THIS PACKET?</b>	
<a href="#"><u>DR-100</u></a>	<b>Petition for Dissolution of Marriage (no children)</b>
<a href="#"><u>DR-110</u></a>	<b>Appearance and Waiver of Notice of Hearing</b>
<a href="#"><u>DR-314</u></a>	<b>Information Sheet</b>
<a href="#"><u>PUB-15</u></a>	<b>Mediation Information available online at:</b> <a href="https://public.courts.alaska.gov/web/forms/docs/pub-15.pdf">https://public.courts.alaska.gov/web/forms/docs/pub-15.pdf</a> Printed copies are available for customers with limited or no internet access.
<b>VS-401</b>	<b>Certificate of Divorce, Dissolution or Annulment</b> The VS-401 must be printed on a special kind of paper and filled in without mistakes. If your packet does not include a VS-401, ask for a copy from your local courthouse or office of Health Analytics and Vital Records.

**October 2019  
Alaska Court System**

The statutes, court rules and most of the forms referenced in this packet are available on the court's website: [www.courts.alaska.gov](http://www.courts.alaska.gov). The website also has information about the court system's Family Law Self-Help Center. The Center may be able to help you with questions about dissolution procedure.

## FILING CHECKLIST

**When turning in your DR-100 with the court, make sure you have also completed the following checklist items:**

- |                          |  |
|--------------------------|--|
| <input type="checkbox"/> | DR-100: All pages are signed by both parties.  |
| <input type="checkbox"/> | DR-100: Both signatures are notarized on the last page within the past 60 days.  |
| <input type="checkbox"/> | DR-100: On page 3, make sure you have completely filled in the income information.   |
| <input type="checkbox"/> | DR-100: On page 4 and 5, make sure you have fully described how you will divide retirement benefits and that you have attached all required documents. |
| <input type="checkbox"/> | DR-100: On page 5, make sure the VIN number, or license or registration number is provided for all vehicles.   |
| <input type="checkbox"/> | Attach proposed Qualified Domestic Relations Order (QDRO), if needed ( <i>see page 7 of DR-10 Instructions for more information</i> ).                 |
| <input type="checkbox"/> | Attach income verification for both parties (two current pay stubs, recent tax returns, and W-2s).   |
| <input type="checkbox"/> | Included filled-out VS-401, Certificate of Dissolution form.<br><b>No cross-outs or white-outs acceptable.</b>   |
| <input type="checkbox"/> | Paid filing fee or included Request for Exemption of Fees form.  |

**An incomplete petition or failure to provide the above items could result in your hearing being delayed, or additional hearings being required before your dissolution can be granted.**

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA  
AT \_\_\_\_\_

In the Matter of the Dissolution  
of the Marriage of

\_\_\_\_\_  
Party A,

\_\_\_\_\_  
Party B.

CASE NO. \_\_\_\_\_

**PETITION FOR DISSOLUTION  
OF MARRIAGE (NO MINOR CHILDREN)**

We consent to the court's jurisdiction and request a decree of dissolution of marriage. Our marriage has broken down and we no longer want to be married. We agree this petition is the entire agreement between us. We understand that only the agreements written in this petition and its attachments are enforceable.

**I. INFORMATION ABOUT THE PARTIES**

Has either spouse filed an action for legal separation before filing this action?  Yes  No  
If yes, please list the case number, date, and place of filing:

**A. Children**

1. Do you have any children (currently under age 19) born or adopted during your marriage?  Yes  No
2. Do you have any children together (currently under age 19) from before your marriage?  Yes  No
3. Is one of you now pregnant?  Yes  No

If you checked "yes" in response to any of the above questions, you should not use this form. You must use Packet No. 1 unless paternity has been legally disestablished. (If it has been, attach to this petition a copy of the documentation disestablishing paternity.)

**B. Party A**

1. Length of residence in Alaska: \_\_\_\_\_
2. Residence address: \_\_\_\_\_  
(street address) (city) (state) (zip)
3. Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_
4. Mailing address: \_\_\_\_\_  
(box or street number) (city) (state) (zip)
5. Email Address\*: \_\_\_\_\_  
\* I authorize the court to email me court documents in this case to the email address above.
6. Occupation: \_\_\_\_\_ Work phone: \_\_\_\_\_
7. Most recent employer: \_\_\_\_\_

\_\_\_\_\_  
Print or Type Party A's Name

\_\_\_\_\_  
Print or Type Party B's Name

\_\_\_\_\_  
Signature of Party A

\_\_\_\_\_  
Signature of Party B

**C. Party B**

1. Length of residence in Alaska: \_\_\_\_\_
2. Residence address: \_\_\_\_\_  
   (street address)  (city)  (state)  (zip)
3. Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_
4. Mailing address: \_\_\_\_\_  
   (box or street number)  (city)  (state)  (zip)
5. Email Address\*: \_\_\_\_\_  
    \*  I authorize the court to email me court documents in this case to the email address above.
6. Occupation: \_\_\_\_\_ Work phone: \_\_\_\_\_
7. Most recent employer: \_\_\_\_\_

**D. Date and Place of Marriage.** Date of marriage: \_\_\_\_\_  
 Place of marriage: (city and state): \_\_\_\_\_

**E. Health Care and Health Insurance**

Does either spouse need medical care or treatment?  Yes  No  
 If yes, state which spouse and describe the care or treatment needed:  
 \_\_\_\_\_  
 \_\_\_\_\_

Is either spouse covered by health insurance (through an employer or otherwise)?  
 Yes  No  
 If yes, state which spouse and the amount paid for the insurance by the spouse or spouses:  
 \_\_\_\_\_  
 \_\_\_\_\_

**F. Domestic Violence**

Has either spouse been involved in any of the following during the marriage:  
 1. a criminal charge of a crime involving domestic violence,  
 2. a domestic violence protective order under AS 18.66.100 - 18.66.180,  
 3. injunctive relief against domestic violence under former AS 25.35.010 or 25.35.020, or  
 4. a domestic violence protective order issued in another jurisdiction and filed with the court in this state under AS 18.66.140?  
 Yes  No If yes, describe below:  
 \_\_\_\_\_  
 \_\_\_\_\_

Has there been any domestic violence during the marriage (whether or not the police were involved or anything was filed in court)?  Yes  No

**G. Has either spouse received advice from an attorney about divorce or dissolution?**  
 Yes  No If yes, state which spouse(s): \_\_\_\_\_  
 Is either spouse represented by an attorney?  Yes  No  
 If yes, state which spouse(s): \_\_\_\_\_

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Print or Type Party A's Name

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Print or Type Party B's Name

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Signature of Party A

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Signature of Party B

**II. FINANCIAL INFORMATION**

Each party **must** attach a copy of their most recent federal tax return, W2, and at least two recent paystubs. If work is seasonal, show yearly income. If income or deductions will change after the dissolution, file documents showing expected income and deductions. The following income and deductions are  **monthly**  **yearly**.

	<b>Party A</b>	<b>Party B</b>
<b>A. Income</b> (Do not list ATAP or SSI below.)		
Gross wages	\$ _____	\$ _____
Value of employer-provided housing/food/etc. <sup>1</sup>	\$ _____	\$ _____
Unemployment compensation	\$ _____	\$ _____
Permanent fund dividend (PFD)	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
_____	\$ _____	\$ _____
<b>TOTAL INCOME</b>	<b>\$ _____</b>	<b>\$ _____</b>
<b>B. Deductions Allowable Under Civil Rule 90.3</b>		
Federal, state and local income tax	\$ _____	\$ _____
Social security tax (FICA) or self-employment tax	\$ _____	\$ _____
Medicare tax	\$ _____	\$ _____
Employment security tax (SUI)	\$ _____	\$ _____
Mandatory retirement contributions	\$ _____	\$ _____
Mandatory union dues	\$ _____	\$ _____
Voluntary retirement contributions if plan earnings are tax-free or deferred, up to 7.5% of gross wages & self-employ. income when combined with mand. contrib.	\$ _____	\$ _____
Other mandatory deductions (specify):		
_____	\$ _____	\$ _____
Alimony ordered in other cases and currently paid <sup>2</sup>	\$ _____	\$ _____
Child support ordered for prior children <sup>3</sup>	\$ _____	\$ _____
In-kind support for prior children <sup>4</sup>	\$ _____	\$ _____
Health insurance for parent (limited to 10% of wages) <sup>5</sup>	\$ _____	\$ _____
<b>TOTAL DEDUCTIONS</b>	<b>\$ _____</b>	<b>\$ _____</b>
<b>C. Net Income</b>		
TOTAL INCOME from section A	\$ _____	\$ _____
TOTAL DEDUCTIONS from section B	\$ _____	\$ _____
Subtract deductions from income to get		
<b>NET INCOME</b>	<b>\$ _____</b>	<b>\$ _____</b>

\_\_\_\_\_  
 Print or Type Party A's Name

\_\_\_\_\_  
 Signature of Party A

\_\_\_\_\_  
 Print or Type Party B's Name

\_\_\_\_\_  
 Signature of Party B

<sup>1</sup> This also includes COLA, military BAH, and BAS.  
<sup>2</sup> Includes spousal support ordered in other cases and currently paid.  
<sup>3</sup> "Prior children" include children from a different relationship who were born or adopted before this case.  
<sup>4</sup> For more information, see [Prior Child Deduction Chart](#) and Civil Rule 90.3(a)(1)(D).  
<sup>5</sup> This deduction cannot be more than 10% of gross wages and self-employment income (90.3(a)(1)(F)).

**D. Monthly Expenses**

	<b>Party A</b>	<b>Party B</b>
Housing and utilities	\$ _____	\$ _____
Food	\$ _____	\$ _____
Transportation	\$ _____	\$ _____
Medical	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
_____	\$ _____	\$ _____
<b>TOTAL EXPENSES</b>	<b>\$ _____</b>	<b>\$ _____</b>

**E. BANKRUPTCY.**  Party A  Party B filed for bankruptcy and that case is pending.

**III. PROPERTY AND DEBT INFORMATION, AND AGREEMENT OF THE PARTIES**

Below is a list of our assets and debts, and our agreement about dividing our assets and debts. **We believe the division below is fair and just.**

**A. Assets**

[Describe all your property and its value. Then check the boxes showing whether it was acquired during the marriage, who possesses it now, and to whom you want it awarded.]

1. Do you have a written community property agreement or a community property trust under Alaska law (AS 34.77)?  Yes  No Include this property in the lists below.

2. Real Property (land and buildings) provide street address or legal description	Value	Acquired During Marriage		Currently Possessed By			To Be Awarded To		
		yes	no	A	B	JT	A	B	JT*
_____	\$ _____								
_____	\$ _____								
_____	\$ _____								
_____	\$ _____								

[Note: An award of real property to the parties jointly does not convey a right of survivorship. Consult an attorney with concerns about your right of survivorship. AS 13.12.804(a)(2).]

\*For jointly awarded real property at address \_\_\_\_\_:

a.  We will sell the property and split any profit with \_\_\_\_\_ % to Party A and \_\_\_\_\_ % to Party B. Until the property is sold,  Party A  Party B will make all payments and decisions about the property, and  will be  will not be reimbursed from sale proceeds before any profit is paid.

b.  One of us will buy the other out.  Party A  Party B will buy the other party's interest in the property in an amount equal to \_\_\_\_\_ % of the fair market value. We also agree that  the amount of this payment will be \$ \_\_\_\_\_ or  we will have a licensed appraiser or real estate broker determine the property's fair market value. We will select the appraiser or broker together.

c.  Other: \_\_\_\_\_

Use separate sheets for other real property to be awarded jointly.

\_\_\_\_\_  
Print or Type Party A's Name

\_\_\_\_\_  
Print or Type Party B's Name

\_\_\_\_\_  
Signature of Party A

\_\_\_\_\_  
Signature of Party B

3. Motor Vehicles (include make, model, license or reg. number, &/or vehicle ID number, for each vehicle, mobile home, ATV, boat, snow machine, etc.)

	Value	Acquired During Marriage		Currently Possessed By			To Be Awarded To		
		yes	no	A	B	JT	A	B	JT
_____ \$	_____								
_____ \$	_____								
_____ \$	_____								
_____ \$	_____								
_____ \$	_____								
_____ \$	_____								
_____ \$	_____								
_____ \$	_____								
_____ \$	_____								
_____ \$	_____								

4. Other Personal Property (furniture, appliances, jewelry, computers, guns, tools, bank accounts, etc.) For bank or other financial accounts, you may list the last 3 digits of the account number and the name of the issuing financial institution.

	Value	Acquired During Marriage		Currently Possessed By			To Be Awarded To		
		yes	no	A	B	JT	A	B	JT
_____ \$	_____								
_____ \$	_____								
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\_\_\_\_\_  
Print or Type Party A's Name

\_\_\_\_\_  
Print or Type Party B's Name

\_\_\_\_\_  
Signature of Party A

\_\_\_\_\_  
Signature of Party B

5. Retirement Benefits. We understand that this agreement is only between us and that pension plan provider(s) may require other documents to accept our agreement. We also understand that the court will not draft a waiver document or an order including a qualified domestic relations order (QDRO) that divides the retirement asset(s).

Neither of us earned retirement or military pension benefits during the marriage.

One or both of us earned retirement or pension benefits during the marriage:

Party A earned retirement or military pension benefits during the marriage:

Last 3 numbers of account	Value of account	Being paid now? (Y/N)

Party B earned retirement or military pension benefits during the marriage:

Last 3 numbers of account	Value of account	Being paid now? (Y/N)

We agree that we will each keep our own retirement and pension benefits. This is fair and equitable because:

\_\_\_\_\_

Our agreement about the distribution of retirement or military pension benefits is attached. If the agreement is not accepted by the retirement plan administrator as a qualified domestic relations order (QDRO), we agree that the court, upon motion by a party, may make any necessary changes. If changes are necessary, we agree that the effective date of the order will remain the date of our original dissolution decree.

A copy of the present value statement from the plan administrator for each retirement account is attached. [Note: **This is required.** An account statement is not the same as a present value statement. You should consult an attorney if you have concerns about the valuation of pension benefits.]

6. Transfer Deadline.

All payments from one party to the other party will be done by \_\_\_\_\_.

All documents necessary to carry out this agreement (including but not limited to signing quit claim deeds, refinancing, transferring title) will be done by \_\_\_\_\_.

Any property stored by one party for the other will be transferred by \_\_\_\_\_.

**B. Debts**

[List every debt owed whether or not it is a joint debt. List to whom each debt is owed and the amount that is owed. Then check the boxes showing whether the debt was incurred during the marriage, who now owes the debt, and who you agree will be responsible for paying it. Include ALL debts that are currently owed (mortgages, car loans, credit cards, etc.) For credit card, bank card, or debit card accounts, you may list the last 4 digits of the account number and the name of the issuing institution. Note: Even though you agree which spouse is responsible to pay a debt that is in both of your names, the bank or other creditor may still hold the other spouse responsible for the debt if payments are not made.]

\_\_\_\_\_  
Print or Type Party A's Name

\_\_\_\_\_  
Print or Type Party B's Name

\_\_\_\_\_  
Signature of Party A

\_\_\_\_\_  
Signature of Party B



Debt Owed To	Amount	Incurred During Marriage		Currently Owed By			To Be Paid By		
		yes	no	A	B	JT	A	B	JT
_____	\$ _____								
_____	\$ _____								
_____	\$ _____								
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**IV. SPOUSAL MAINTENANCE (ALIMONY) AGREEMENT**

\$ \_\_\_\_\_ per month to be paid by  Party A  Party B, beginning \_\_\_\_\_ until \_\_\_\_\_ or until the recipient dies or remarries.

**V. RESTORE OR CHANGE OF NAME**

Restore Name. Party A and/or B wants to restore a **prior name** (print full names clearly):

From: \_\_\_\_\_ To: \_\_\_\_\_  
 (Party A's current full name) (Party A's prior full name)

From: \_\_\_\_\_ To: \_\_\_\_\_  
 (Party B's current full name) (Party B's prior full name)

Change to New Name. [Before checking this box, it is important to read the instructions. Failure to publish notice of your hearing on the court's website may delay the decree of dissolution or result in denial of the requested name change.]

Party  A  B, \_\_\_\_\_ wants to take and be legally  
 (current legal name)

known by a new name, which is \_\_\_\_\_

The reasons for this request for a change of name are:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The party seeks this name change for personal reasons and not to avoid judgments, debts, obligations, or to defraud anybody person. The reasons stated are consistent with the public interest.

\_\_\_\_\_

Print or Type Party A's Name

\_\_\_\_\_

Print or Type Party B's Name

\_\_\_\_\_

Signature of Party A

\_\_\_\_\_

Signature of Party B

**VI. OTHER AGREEMENTS (IF ANY)**

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**VII. SIGNATURES AND VERIFICATIONS**

Do not sign until this petition has been completely filled out. Each signature on this page must be separately notarized. You will need to show identification to the notary.

**Verification**

I say on oath or affirm under penalty of perjury that I have read this petition and believe that all statements made in this petition are true. I also certify that I am signing voluntarily and not because of fear, threat, coercion or restraint. I also state that this petition contains the entire agreement between my spouse and me.

\_\_\_\_\_  
Signature of Party A

\_\_\_\_\_  
Signature of Party B

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Subscribed and sworn to or affirmed before me  
at \_\_\_\_\_, Alaska, on  
\_\_\_\_\_.

Subscribed and sworn to or affirmed before me  
at \_\_\_\_\_, Alaska, on  
\_\_\_\_\_.

\_\_\_\_\_  
Clerk of Court, Notary Public or other person  
authorized to administer oaths.  
My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Clerk of Court, Notary Public or other person  
authorized to administer oaths.  
My commission expires: \_\_\_\_\_

(SEAL)

(SEAL)

## FILING CHECKLIST

**When turning in your DR-100 with the court, make sure you have also completed the following checklist items:**

<input type="checkbox"/>	DR-100: All pages are signed by both parties.
<input type="checkbox"/>	DR-100: Both signatures are notarized on the last page within the past 60 days.
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<input type="checkbox"/>	DR-100: On page 4 and 5, make sure you have fully described how you will divide retirement benefits and that you have attached all required documents.
<input type="checkbox"/>	DR-100: On page 5, make sure the VIN number, or license or registration number is provided for all vehicles.
<input type="checkbox"/>	Attach proposed Qualified Domestic Relations Order (QDRO), if needed ( <i>see page 7 of DR-10 Instructions for more information</i> ).
<input type="checkbox"/>	Attach income verification for both parties (two current pay stubs, recent tax returns, and W-2s).
<input type="checkbox"/>	Included filled-out VS-401, Certificate of Dissolution form. <b>No cross-outs or white-outs acceptable.</b>
<input type="checkbox"/>	Paid filing fee or included Request for Exemption of Fees form.

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IN THE SUPERIOR COURT FOR THE STATE OF ALASKA  
AT \_\_\_\_\_

In the Matter of the Dissolution  
of the Marriage of

\_\_\_\_\_  
Party A,

\_\_\_\_\_  
Party B.

CASE NO. \_\_\_\_\_

**WAIVER OF APPEARANCE  
AT HEARING**

I, \_\_\_\_\_, say on oath or affirm under penalty of perjury that:

1. I have read the petition in this case and agree to all its terms relating to custody of the children, child support, visitation, spousal maintenance and tax consequences, division of property (including retirement benefits) and allocation of debts.
2. I believe the property and spousal maintenance agreements are fair and just, and take into consideration the factors listed in AS 25.24.160(a)(2) and (4) so that the economic effect of the dissolution is fairly allocated.
3. I agree that the petition constitutes the entire agreement between the parties.
4. I agree that an incompatibility of temperament has caused the irremediable breakdown of the marriage.
5. I understand fully the nature and consequences of this Petition for Dissolution of Marriage.
6. I understand that I have a right to be present at the dissolution hearing. I agree, however, that the court may proceed without me.
7. I am not under duress or coercion to sign this Waiver of Appearance at Hearing.
8. It would be a significant hardship for me to attend the hearing because:

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

I agree to be available by telephone to answer questions during the hearing. I understand that several hearings may be scheduled at the same time and I should remain available for at least one hour after the scheduled hearing time.

I understand that even though I have waived my right to be present at the hearing, the court may still require that I attend the hearing.

_____	_____
Date	Signature of Party
_____	_____
Email Address	Mailing Address
_____	_____
Phone Number	City State Zip

ACKNOWLEDGMENT

This is to certify that on \_\_\_\_\_, the person who executed the above instrument appeared before me personally in \_\_\_\_\_, Alaska and acknowledged to me that he/she signed the same freely and voluntarily for the purposes stated in it.

(SEAL)

\_\_\_\_\_  
Clerk of Court, Notary Public or other person  
authorized to administer oaths.  
My Commission Expires: \_\_\_\_\_

**Clerk: This form is CONFIDENTIAL and must be kept in a confidential envelope or file.**

## Information Sheet

Case Number: \_\_\_\_\_ Court Location: \_\_\_\_\_

I am not filling out the following three paragraphs because an Information Sheet providing all this information has already been filed in this case

1. Full Name of Party A/Parent A: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No.\* \_\_\_\_\_

2. Full Name of Party B/Parent B: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No.\* \_\_\_\_\_

3. Children Involved in This Case:

<u>Full Name of Child</u>	<u>Date of Birth</u>	<u>Social Security Number*</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I certify that the above information is correct.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Party

\_\_\_\_\_  
Print Name

\* Disclosure of social security numbers is mandatory under AS 25.24.210(f), AS 18.50.280(a) and 42 USC 666(a)(13). The numbers may be used to insure compliance with the child support order.