IN THE SUPERIOR COURT FOR THE STATE OF ALASKA
AT _____

In the Matter of the Dissolution of the Marriage of	)	
_____ Party A,	)	CASE NO. _____
_____ Party B.	)	**PETITION FOR DISSOLUTION OF MARRIAGE (WITH CHILDREN)**

☐ There is an open Child-in-Need-of-Aid Case.
Court Location:_____. Case number (if known):_____.

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 in this petition and 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. PARTY A

1. Date of birth: _____ Place of birth: _____
2. Length of Alaska residence: _____ Driver's License Number: _____
3. Home phone: _____ Cell phone: _____
4. Residence address: _____
   (street address) (city) (state) (ZIP)
5. Mailing address: _____
   (box or street number) (city) (state) (ZIP)
6. Email Address*: _____
   *☐ I authorize the court to email me court documents in this case to the email address above.
7. Occupation: _____ Work phone: _____
8. Most recent employer: _____ Phone: _____
9. Employer's address: _____

B. PARTY B

1. Date of birth: _____ Place of birth: _____
2. Length of Alaska residence: _____ Driver's License Number: _____
3. Home phone: _____ Cell phone: _____
4. Residence address: _____
   (street address) (city) (state) (ZIP)
5. Mailing address: _____
   (box or street number) (city) (state) (ZIP)
6. Email Address*: _____
   *☐ I authorize the court to email me court documents in this case to the email address above.
7. Occupation: _____ Work phone: _____
8. Most recent employer: _____ Phone: _____
9. Employer's address: _____

_____ Print or Type Party A's Name	_____ Print or Type Party B's Name
_____ Signature of Party A	_____ Signature of Party B

C. Date and Place of Marriage. Date of marriage: _____ /_____ / _____
(month) (day) (year)

Place of marriage: _____ _____
(city) (state)

D. 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 (by an employer or otherwise)? ☐ Yes ☐ No
If yes, state which spouse and the amount paid for the insurance by the spouse or spouses:

_____
_____
_____

E. 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

F. Has either spouse received advice from an attorney about dissolution or divorce?

☐ Yes ☐ No If yes, state which spouse(s): _____

Is either spouse represented by an attorney? ☐ Yes ☐ No
If yes, state which spouse(s): _____

_____	_____
Print or Type Party A's Name	Print or Type Party B's Name
_____	_____
Signature of Party A	Signature of Party B

II. FINANCIAL INFORMATION

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

A. Gross Income (Do not list ATAP or SSI below.)	**Party A**	**Party B**
Gross wages	$_____	$_____
Value of employer-provided housing/food/etc.[1]	$_____	$_____
Unemployment compensation	$_____	$_____
Permanent fund dividend (PFD)	$_____	$_____
Other:_____	$_____	$_____
_____	$_____	$_____
TOTAL INCOME	**$** 0	**$** 0
B. Deductions Allowable Under Civil Rule 90.3		
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[2]	$_____	$_____
Child support ordered for prior children[3]	$_____	$_____
In-kind support for prior children[4]	$_____	$_____
Work-related child care for children in this case	$_____	$_____
Health insurance for parent (limited to 10% of wages)[5]	$_____	$_____
TOTAL DEDUCTIONS	**$** 0	**$** 0
C. Net Income		
TOTAL INCOME from section A	$ 0	$ 0
TOTAL DEDUCTIONS from section B	$ 0	$ 0
Subtract deductions from income to get **NET INCOME**	**$** 0	**$** 0

_____ Print or Type Party A's Name

_____ Print or Type Party B's Name

_____ Signature of Party A

_____ Signature of Party B

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

D. Adjusted Annual Income

	Party A	Party B
1. If the above figures are based on monthly information, multiply NET INCOME from section C by 12 to get		
ADJUSTED ANNUAL INCOME	$ 0	$ 0
2. If the above figures are based on yearly information, repeat the NET INCOME amount from section C to show		
ADJUSTED ANNUAL INCOME	$ 0	$ 0

This figure will be used to calculate child support on page 11.

E. Monthly Expenses

	Party A	Party B
Housing and utilities	$	$
Food	$	$
Transportation	$	$
Medical	$	$
Other _____	$	$
_____	$	$
_____	$	$
_____	$	$
TOTAL EXPENSES	$ 0	$ 0

F. Bankruptcy. ☐ Party A ☐ Party B filed for bankruptcy and that case is pending.

III. PROPERTY AND DEBT INFORMATION, AND AGREEMENT OF 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 Be sure to include community 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*
_____	$	☐	☐	☐	☐	☐	☐	☐	☐
_____	$	☐	☐	☐	☐	☐	☐	☐	☐
_____	$	☐	☐	☐	☐	☐	☐	☐	☐
_____	$	☐	☐	☐	☐	☐	☐	☐	☐
_____	$	☐	☐	☐	☐	☐	☐	☐	☐

_____ Print or Type Party A's Name

_____ Print or Type Party B's Name

_____ Signature of Party A

_____ Signature of Party B

*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 ☐ 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.

[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).]

3. Motor Vehicles (include make, model, and license or registration number, and/or vehicle identification 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
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								
_____	$_____								

_____ Print or Type Party A's Name

_____ Print or Type Party B's Name

_____ Signature of Party A

_____ Signature of Party B

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

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

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:

_____

_____

_____

_____	_____
Print or Type Party A's Name	Print or Type Party B's Name
_____	_____
Signature of Party A	Signature of Party B

☐ 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 made 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 owed. Then check the boxes showing whether the debt was incurred during the marriage, who now owes the debt, and who you agree will pay 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 who 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.]

Owed To	Amount	Incurred During Marriage		Currently Owed By			To Be Paid By		
		yes	no	A	B	JT	A	B	JT
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐
_____	$_____	☐	☐	☐	☐	☐	☐	☐	☐

IV. SPOUSAL MAINTENANCE (ALIMONY) AGREEMENT

$_____ per month to be paid by ☐ Party A ☐ Party B, beginning _____ until _____ or until the recipient dies or remarries. If child support payments will be made through CSSD, you may also have spousal maintenance payments made through CSSD. Do you want spousal maintenance payments to be made through CSSD? ☐ Yes ☐ No

_____	_____
Print or Type Party A's Name	Print or Type Party B's Name
_____	_____
Signature of Party A	Signature of Party B

V. CHILD CUSTODY JURISDICTION INFORMATION

A. The following are children under age 19 and born of the marriage or adopted by the parties:

CHILD 1		
First Name	Middle Name	Last Name
Date of Birth	Place of Birth	Gender ☐ Male ☐ Female
Current Address (since ____/____/____)	Who has custody?	Relationship

Past Addresses (last 5 years)		City and State	Who did this child live with then? (name and current address)	Relationship
From	To			

CHILD 2		
First Name	Middle Name	Last Name
Date of Birth	Place of Birth	Gender ☐ Male ☐ Female
Current Address (since ____/____/____)	Who has custody?	Relationship

Past Addresses (last 5 years)		City and State	Who did this child live with then? (name and current address)	Relationship
From	To			

CHILD 3		
First Name	Middle Name	Last Name
Date of Birth	Place of Birth	Gender ☐ Male ☐ Female
Current Address (since ____/____/____)	Who has custody?	Relationship

Past Addresses (last 5 years)		City and State	Who did this child live with then? (name and current address)	Relationship
From	To			

_____ Print or Type Party A's Name

_____ Print or Type Party B's Name

_____ Signature of Party A

_____ Signature of Party B

CHILD 4		
First Name	Middle Name	Last Name
Date of Birth	Place of Birth	Gender ☐ Male ☐ Female
Current Address (since ____/____/____)	Who has custody?	Relationship

Past Addresses (last 5 years)		City and State	Who did this child live with then? (name and current address)	Relationship
From	To			

[Attach extra pages if there are more than four children.]

B. Has either Party A or Party B participated as a party, a witness, or in another capacity in another proceeding concerning the custody of any of the above children or visitation with them? ☐ Yes ☐ No If yes, describe the previous child custody determination:
Name of Court _____ Case Number _____Date _____
Court's Decision _____

C. Does either Party A or Party B know of a proceeding that could affect this dissolution case (such as a proceeding relating to domestic violence, protective orders, termination of parental rights, adoption or enforcement of a court order)? ☐ Yes ☐ No
If yes, describe: Name of Court_____Case Number_____
Nature of Proceeding_____

D. Does either Party A or Party B know of any person not a party to this dissolution case who has physical custody of any of the above children or claims to have the right to physical custody, legal custody, or visitation? ☐ Yes ☐ No
If yes, list each person's name and address, and what the person claims:
_____
_____
_____

E. Is Party A or Party B pregnant? ☐ Yes ☐ No
If yes, include arrangements for this child in the following sections.

F. Is paternity disputed regarding any child? ☐ Yes ☐ No
Has paternity been disestablished for any child born during the marriage? ☐ Yes ☐ No
If you answer yes to either of these questions, there may be additional requirements.

NOTE: You both have a continuing duty to inform the court of any other court proceeding in this state or any other state concerning any of the children listed

_____	_____
Print or Type Party A's Name	Print or Type Party B's Name
_____	_____
Signature of Party A	Signature of Party B

VI. CHILD CUSTODY AGREEMENT

Name of Child	Physical Custody Awarded To	Legal Custody Awarded To

If you agreed to a shared physical custody arrangement, you must specify the custody schedule. The details of our custody schedule are described in: *(you must attach a detailed parenting plan which outlines your shared custody schedule)*

☐ The attached and completed model parenting plan, DR-475, Parenting Plan.

☐ The attached parenting agreement which is titled:_____

VII. VISITATION AGREEMENT

A. Visitation Rights of Parents

☐ We agree _____ will have the following specific visitation rights:

☐ summer vacation:_____

_____

☐ holidays:_____

_____

☐ weekends:_____

_____

☐ other:_____

_____

[If you want child support reduced, you must specify dates as explained in section V, page 11, of the Instructions.]

☐ Our agreement about parenting and visitation is set forth in the attached parenting agreement (DR-475 or other). We understand that the court must approve a parenting agreement as being in our child(ren)'s best interest. We also understand that this dissolution will not be approved until we have an approved parenting plan.

B. Visitation with Other Persons

Names of Other Persons:_____

Describe visitation agreement:

_____

_____

_____

_____

_____	_____
Print or Type Party A's Name	Print or Type Party B's Name
_____	_____
Signature of Party A	Signature of Party B

VIII. CHILD SUPPORT (Civil Rule 90.3)

[Note: You cannot waive child support or agree to a different amount than what is calculated under Civil Rule 90.3, unless one of the exceptions in Civil Rule 90.3(c) applies. For example, the obligor's adjusted annual income is more than $126,000; or the obligor's annual income is so low that the amount of support would be less than $600; or you can prove to the court that manifest injustice will result unless the support amount is varied.]

A. Child Support Calculation

	Party A	Party B
1. a. Adjusted Annual Income (from II.D. on page 4)	$ 0	$ 0
b. If line 1.a. is more than $126,000, write $126,000 here. Otherwise, repeat amount on line 1.a.:	0	0
2. Multiply line 1.b. by: .20 for one child; .27 for two children; .33 for three children; and .03 for each additional child	x 0	x 0
TOTAL	0	0
ANNUAL CHILD SUPPORT (amount from "TOTAL" line above ***or*** $600, whichever is larger.)	$ 0	$ 0

3. Monthly Child Support Payment (before calculating child's health insurance adjustment). Child support will be paid as stated below. The first payment will be made no later than _____. Payments after that will be made no later than the 1st day of each month thereafter. [See definitions of types of custody in Civil Rule 90.3(f).]

☐ a. Primary Custody. One parent has primary physical custody. Divide Annual Child Support amount from line 2 above for the non-custodial parent by 12 = $0 to be paid each month by ☐ Party A ☐ Party B.

☐ b. Shared Custody. The child(ren) will reside with each parent for a period specified in writing of at least 30% of the year. [Attach form DR-306 to show calculations.] Monthly child support payment (from line 10 of DR-306) to be paid each month except _____ = $ _____ to be paid by the ☐ Party A ☐ Party B.

☐ c. Divided Custody. Each parent will have primary physical custody of one or more of the children and the parents will not share physical custody of any of the children. [Attach form DR-307 to show your calculations.] Monthly child support payment (from line 7 of DR-307) = $ _____ to be paid by the ☐ Party A ☐ Party B.

☐ d. Hybrid Custody. One parent has primary physical custody of one or more of the children and the parents will share physical custody of at least one child of the relationship. [Attach form DR-308 to show your calculations.] Monthly child support payment (from line 8 of DR-308) = $ _____ to be paid by the ☐ Party A ☐ Party B.

Print or Type Party A's Name	Print or Type Party B's Name
Signature of Party A	Signature of Party B

4. Children's Health Care Coverage.

   a. Health Insurance. If the children are covered by an insurance company other than the Indian Health Service or Tricare, you should also fill out court form DR-330, *Notice to Employer Re: Children's Medical Insurance.*

      (1) Does Party A have health insurance available for the child(ren) at reasonable cost through Party A's employer, union, or otherwise? ☐ Yes ☐ No

      (2) Does Party B have health insurance available for the child(ren) at reasonable cost through Party B's employer, union, or otherwise? ☐ Yes ☐ No

      (3) Are the children eligible for services through the Indian Health Service? ☐ Yes ☐ No

      (4) Do the children have other health insurance or care available? ☐ Yes ☐ No
      Describe:_____

      If the answer to (3) and (4) is no, one of the parents must agree to provide insurance for the child(ren) if such insurance is available at a reasonable cost. The cost of the children's insurance must be divided equally by the parents unless the court orders a different division for good cause.

      AGREEMENT: Health insurance for the child(ren) will be purchased by:

      ☐ Party A at a monthly cost to Party A of $ _____*

      ☐ Party B at a monthly cost to Party B of $ _____*

      through the above person's ☐ employer ☐ union ☐ _____
      whose name and address are _____

      _____

      The cost of health insurance for the child(ren) will be divided between the parties ☐ equally ☐ _____ Explain reason for unequal division:

      _____

      _____

      [*List only the cost to insure the children involved in this case. If there is no extra cost to the parent to include the children in the parent's insurance coverage, you cannot deduct any cost for the children's health insurance. The parent must submit documentation from the health insurance provider (employer, union, etc.) showing separately the cost of health insurance for the parent and the parent's dependents. See Civil Rule 90.3(d) for further explanation. For more information, see Calculating Cost of Child(ren)'s Health Insurance chart on the court's website.]

   b. Children's Health Care Expenses Not Covered by Insurance (including medical, dental, vision and mental health counseling expenses).

      We agree that the children's reasonable health care expenses not covered by insurance will be paid as follows (unless they are over $5,000 in a calendar year):

      ☐ Party A will pay half and Party B will pay half.

      ☐ Party A will pay _____ and Party B will pay _____.
      Explain reason for not sharing these uncovered expenses equally:

      _____

      If the uncovered expenses are over $5,000 in a calendar year, the parties will pay based on their relative financial circumstances when the expense occurs.

_____	_____
Print or Type Party A's Name	Print or Type Party B's Name
_____	_____
Signature of Party A	Signature of Party B

We agree that each of us will reimburse the other for our share of uncovered health care expenses within 30 days after we are given the bill, proof of payment and, if applicable, a health insurance statement (EOB) showing what part of the cost is uncovered. We understand that the bills and other materials must be sent to the other parent for reimbursement within a reasonable time.

5. Monthly Child Support Payment (including adjustment for children's health insurance).

   a. Monthly Child Support Payment from paragraph 3 above (on page 11) $ 0

   b. If obligor is buying health insurance for the child(ren), subtract 50% (or _____%) of the monthly insurance payment. − $_____
   (The "obligor" is the parent paying child support.)

   c. If obligee is buying health insurance for the child(ren), add 50% (or _____%) of the monthly insurance payment. + $_____
   (The "obligee" is the parent receiving child support.)

   d. Net Monthly Child Support Payment $ 0

6. We calculated the Net Monthly Child Support Payment in paragraph 5.d. according to:
   a. ☐ The formula in Civil Rule 90.3(a) or (b).
   b. ☐ Civil Rule 90.3(c)(2). Obligor's adjusted annual income is more than $126,000.
   c. ☐ Civil Rule 90.3(c)(3). Obligor's amount of support is less than $600 per year. Obligor's income is low because obligor is:
      ☐ incarcerated
      ☐ unable to work because _____
      ☐ other_____
   d. ☐ Civil Rule 90.3(c)(1). Manifest injustice will result if support is not varied because: _____

7. Seasonal Income. ☐ Obligor's income is seasonal and obligee agrees that, as long as the total annual amount remains the same, obligor can make higher payments during high income months and lower payments during low income months as follows:
   Higher Monthly Amount $ _____ should be paid in (list months) _____
   Lower Monthly Amount $ _____ should be paid in (list months) _____

8. Travel Expenses. Travel expenses necessary for visitation will be paid as follows:

Print or Type Party A's Name	Print or Type Party B's Name
Signature of Party A	Signature of Party B

9. Native Corporation Dividends.
   a. The custodian of any Native Corporation dividends paid on behalf of the child(ren) will be _____
   b. Except as provided below, the funds will be saved in an account for the child(ren). Both parents will have access to all statements from the account annually.
   c. Any taxes owing on any Native Corporation dividends paid on behalf of the child(ren) will be timely paid by (name)_____
   d. Any Native Corporation dividends paid on behalf of the children:
      ☐ May be spent for the child(ren)'s health, education, and welfare.
      ☐ May be spent only if both parents provide prior written approval.
      ☐ Other: _____
10. Extended Visitation Credit.
   ☐ This credit does not apply to us.
   ☐ This credit applies to us because one of us will have primary physical custody and the other (the obligor parent) will have extended visits with the children for periods longer than 27 consecutive days. If and when the obligor parent actually exercises the extended visitation, child support will be reduced for these periods as follows:
   _____
   [Note: This credit may not be more than 75% of the amount owed for the period.]

B. ☐ We agree that child support will continue while each child is 18 years old as long as the child is (1) unmarried, (2) actively pursuing a high school diploma or equivalent level of technical or vocational training, and (3) living as a dependent with the obligee parent or guardian or a designee of the parent or guardian. ☐ We object to continuing child support to the date of graduation because: _____

C. Do you want the assistance of the Child Support Services Division (CSSD) to enforce the support order and keep records of the payments? ☐ Yes ☐ No
If yes, fill out the attached application for CSSD services. [Note: If the parent with custody of the children is receiving assistance from the Alaska Temporary Assistance Program (ATAP), child support payments must be made to CSSD.]

D. Immediate Income Withholding

Child support will be withheld from the income of the person paying support and paid through the Child Support Services Division (CSSD) unless one of the following exceptions is approved by the court:

☐ We made the following alternative arrangement [Note that if you receive ATAP, CSSD must agree to the arrangement]:

_____

_____

Also, the person paying support agrees to keep the other party (or CSSD if CSSD is enforcing the order) informed of his/her current employer and the availability of employment-related health insurance coverage for the child(ren) until the support order is satisfied.

_____	_____
Print or Type Party A's Name	Print or Type Party B's Name
_____	_____
Signature of Party A	Signature of Party B

☐ We believe there is good cause not to require immediate income withholding because it is not in the best interests of the child(ren) for the following reason:

_____

Also, the person paying support agrees to keep the other party (or CSSD if CSSD is enforcing the order) informed of his/her current employer and the availability of employment-related health insurance coverage for the child(ren) until the support order is satisfied.

☐ The person paying support currently receives social security or other disability compensation that includes regular payments to the child(ren) at least equal to the child support owed each month. Monthly payment to child(ren): $_____. Source of the payment: _____. [Note: To the extent that these payments to the children do not satisfy the monthly amount owed, the court will order that the remaining amount due be withheld from income.]

E. Federal Taxes

1. Federal Tax Credit. We agree as follows:

   ☐ _____ will claim the child(ren) every year.

   ☐ Every year, Party A will claim the following child(ren)_____ and Party B will claim the following child(ren)_____

   ☐ The parents will claim the child(ren) in alternating years with ☐ Party A ☐ Party B claiming the child(ren) for odd-numbered tax years such as 2019 and 2021, and the other parent claiming them for even-numbered tax years such as 2020 and 2022.

   ☐ Other: _____

   The parties also agree to provide each other with a signed IRS Form 8332, if needed, by February 1 so that it may be timely filed with the IRS.

   This agreement regarding tax benefits may be modified without a court order if both parties agree in writing. As required by AS 25.24.232, we also agree that the parent who has physical custody of the child(ren) for a period less than the other parent may not claim the tax benefits in any tax year if on December 31 of that year the parent was behind in child support payments in an amount more than four times the monthly child support obligation.

2. Federal Tax Considerations. We understand that physical custody of a child may impact whether we can claim tax benefits such as the Earned Income Credit, Head of Household filing status, and Credit for Dependent (Child) Care Expenses.

F. Permanent Fund Dividend (PFD)

1. We agree that _____ will timely apply for the Alaska PFD on behalf of the child(ren) while they are minors. ☐ The parent who claims the child(ren) for tax purposes also agrees to timely pay the taxes on the children's PFD.

2. Except as provided below, the child(ren)'s PFD funds will be saved in an account for the child(ren). Both parents will have access to all statements from the account annually.

_____	_____
Print or Type Party A's Name	Print or Type Party B's Name
_____	_____
Signature of Party A	Signature of Party B

3. The child(ren)'s PFD funds:
   - ☐ May be spent for the child(ren)'s health, education, and welfare.
   - ☐ May be spent only if both parents provide prior written approval.
   - ☐ Other: _____

IX. RESTORE OR CHANGE 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 any person. The reasons stated are consistent with the public interest.

X. OTHER AGREEMENTS (IF ANY)

_____

_____	_____
Print or Type Party A's Name	Print or Type Party B's Name
_____	_____
Signature of Party A	Signature of Party B

XI. SIGNATURES AND VERIFICATIONS

After you have both completely filled out this petition, each of you must sign below in front of a notary. 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, _____.	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-105 with the court, make sure you have also completed the following checklist items:**	
☐	DR-105: All pages are signed by both parties.
☐	DR-105: Both signatures are notarized on the last page within the past 60 days.
☐	DR-105: On page 3, make sure you have completely filled in the income information.
☐	DR-105: On page 5, make sure the VIN number, or license or registration number is provided for all vehicles.
☐	DR-105: On page 6 and 7, make sure you have fully described how you will divide retirement benefits and that you have attached all required documents.
☐	DR-105: On Page 9, if you marked that paternity was disputed or disestablished for any child, you must attach an affidavit of paternity, a certified birth certificate, or DNA results.
☐	DR-105: On Page 10, make sure you have attached Form DR-475 or detailed parenting agreement.
☐	DR-105: On page 11, • if shared custody, attach: ☐ Form DR-306 ☐ Form DR-475 or detailed parenting agreement *(referenced on page 10)* • if divided custody, attach: ☐ Form DR-307 • if hybrid custody, attach: ☐ Form DR-308
☐	DR-105: On page 11-13, make sure the child support payment section is completely filled out. **Note:** If you are requesting to reduce or have no child support, you must clearly demonstrate why it is necessary before the court will consider the request.
☐	Attach proposed Qualified Domestic Relations Order (QDRO), if needed *(see page 7 of DR-10 Instructions for more information).*
☐	Attach Certificate of Completion of Education Requirement. Shows compliance with parent education requirement. You can find information about the education requirements for your location here: www.courts.alaska.gov/shc/family/shcparent-ed.htm.
☐	Attach income verification for both parties (two current pay stubs, recent tax returns, and W-2s).
☐	Included filled-out VS-401, Certificate of Dissolution form. **No cross-outs or white-outs acceptable.**
☐	Completed DR-314, Information Sheet.
☐	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.	