

CONTESTED DIVORCE—NO CHILDREN

The forms presented in this packet are designed to guide you in the preparation of your divorce papers. You must fill in the required information as it applies to your situation. Your papers should remain in the same order as they appear in this packet. If you do not have access to a typewriter, you may fill the papers out by hand in neat print using BLACK ink.

You should fill in every blank line EXCEPT for the civil action file number blanks and the lines provided for signatures by the Notary Public and the Judge.

In the Complaint and the Settlement Agreement, some sections have two possible answers, separated by an [OR]. In these sections, you must choose which of the two choices fits best in your situation, and then include only that choice in your documents. The other choice should be ignored, and should not be included in your documents.

Make sure that everything is signed. All signatures that require notarization must be notarized before your documents will be approved for filing.

Neither the Clerk of the Superior Court, nor any Deputy Clerk, nor the Judges, or any other Court personnel, is allowed to answer any questions for you concerning the preparation of these forms. State Law O.C.G.A. §15-19-51 forbids court personnel to give legal advice. Different situations may require special procedures and courthouse personnel cannot advise you on how to proceed or what forms may be necessary in specific situations. Divorce can be very complicated. The only person allowed to help you in the preparation of these forms is a licensed attorney hired to represent you. Please consult an attorney if you have questions about the procedure or what action is best for you to take.

YOU MAY NEED AN ATTORNEY IF:

- The case is contested and your spouse has a lawyer.
- You cannot locate your spouse to serve him or her with your papers.
- You or your spouse has a house, pension, or large amount of property or income.
- You might lose custody of your children.
- You think you will have difficulty getting documents from your spouse about retirement funds, income, etc.
- Even if it is a friendly divorce, you should talk to a lawyer before you sign any settlement papers or file anything in court.

Remember, you must fully complete the forms before the Judge will be able to grant you a decree of divorce. Incomplete forms, as well as forms that are improperly filled out, may delay the grant of your divorce. Make sure that you take time to read over all the forms, and understand what is being asked of you in each situation. An accompanying instruction packet is available to help you as you complete these forms.

CONTESTED WITH NO MINOR CHILDREN:

___ COMPLAINT/PETITION FOR DIVORCE

(THIS WILL INCLUDE: COMPLAINT/PETITION, VERIFICATION, & SUMMONS)

___ CONSENT TO TRIAL AFTER 31 DAYS & WAIVER OF RIGHT BY JURY TRIAL

(THIS MUST BE SIGNED BY PLAINTIFF)

___ ACKNOWLEDGMENT OF SERVICE & SUMMONS (BLANK)

___ DEFENDANT'S ACKNOWLEDGMENT OF SERVICE AFFIDAVIT OF WAIVER OF VENUE & PERSONAL JURISDICTION (BLANK)

___ DOMESTIC RELATIONS FINANCIAL AFFIDAVIT:

(**MANDATORY:** MUST BE COMPLETED BY PLAINTIFF-BLANK COPY TO BE PROVIDED TO DEFENDANT)

___ SETTLEMENT AGREEMENT

(MUST BE COMPLETED- BREAKS DOWN PROPERTY & DEBT)

___ NOTICE OF HEARING

(TO BE COMPLETED BY CLERKS-45 DAYS AFTER DATE OF FILING ASSIGN COURT DATE)

___ CASE FILING INFORMATION FORM

___ FINAL JUDGMENT & DECREE

(NEEDS TO BE COMPLETED AT TIME OF FILING-JUDGES/CLERKS DO NOT EDIT ANY FORMS-MUST INDICATE WHAT THE PARTIES ARE ASKING FOR: NAME CHANGE, PROPERTY, ETC.)

___ REPORT OF DIVORCE

(GETS MAILED TO DEPARTMENT OF PUBLIC RECORDS: COMPLETE ALL BUT TOP LINE AT TIME OF FILING)

___ PARTY INFORMATION SHEET

(MUST BE COMPLETED-THIS IS FOR CONTACT PURPOSES)

___ SHERIFFS ENTRY OF SERVICE

(MUST BE COMPLETED AT TIME OF FILING-**MUST BE EFFINGHAM COUNTY RESIDENT!**)

___ ADDITIONAL COPY FOR SERVICE

Plaintiff Signature

Date

(Deputy) Clerk Signature

Date

IF DEFENDANT IS NOT A RESIDENT OF EFFINGHAM COUNTY, MUST FILE WHERE DEFENDANT LIVES. IF NO CONTACT INFORMATION, MUST ATTEMPT AT LAST KNOWN EFFINGHAM COUNTY ADDRESS, THEN PROCEED WITH SERVICE BY PUBLICATION/PROCESS SERVER-THIS REQUIRES ORDER FROM JUDGE-WILL BE ORDERED AT FIRST HEARING APPEARANCE.

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____,)
Plaintiff,)
)
v.) Civil Action No. _____
)
_____,)
Defendant.)

COMPLAINT FOR DIVORCE

Plaintiff, _____, comes before this
Court and shows this Court as follows:

1.

Subject Matter Jurisdiction (Check a or b)

- a) Plaintiff is a resident of _____ County, Georgia, and has been a resident of Georgia for at least six months prior to the filing of this action.
- b) Plaintiff is not a resident of the State of Georgia, but Plaintiff's spouse has been a resident of the state of Georgia and the county of _____ for at least six (6) months prior to my filing this action.

2.

Venue (Check a, b, c, d, e, or f)

- a) Defendant is a resident of _____ County, Georgia, and has acknowledged service of the Complaint and Summons and has waived further service of process.

b) Defendant is a resident of _____ County, _____
(State) and has signed an ACKNOWLEDGEMENT OF SERVICE AFFIDAVIT OF
WAIVER OF VENUE AND PERSONAL JURISDICTION.

c) Defendant is a resident of _____ County, Georgia and
may be served at his/her residence/work address of:

d) The Defendant is a resident of _____ County,
Georgia but Defendant and I lived together in _____ County at the
time we separated, Defendant has only moved from _____
County within the past six months from the date of this filing, and I am a resident of
_____ County. Defendant shall be served by second original at
his/her home/work address of

e) The Defendant is a resident of Georgia, but his/her whereabouts are
unknown to me as shown by my Affidavit of Due Diligence attached hereto and
incorporated by reference, marked Exhibit A. The Defendant shall be served by
publication as is provided by law in the case of those who cannot be found within the
State pursuant to O.C.G.A. § 9-11-4(f)(1). The clerk shall mail a copy of the Notice,
Order for Service by Publication, and Petition for Divorce to the last known address of
Defendant, which is

within 15 days of the filing of the Order for Service by Publication.

f) Defendant is not a resident of the State of Georgia, but I am a resident of _____ County Georgia and (Check 1 or 2)

1. The Defendant was formerly a resident of the State of Georgia and presently is a resident of the State of _____.

Defendant may be served by a second original pursuant to the Long Arm Statute, O.C.G.A. § 9-10-91(5). Defendant may be served at the following address: _____.

2. The Defendant's whereabouts are unknown to me as shown by my Affidavit of Due Diligence, attached hereto and incorporated by reference, marked Exhibit A. The Respondent shall be served by publication as is provided by law in the case of those who cannot be found within the State pursuant to O.C.G.A. § 9-10-91(5). The clerk shall mail a copy of the Notice, Order for Service

3.

Date of Marriage (Check a or b)

a) Plaintiff and Defendant were lawfully married on _____
_____ in _____ County,
_____ (State).

b) Plaintiff and Defendant are common law married, having entered into a common law marriage before January 1 1997 as of
_____ in _____
County, _____ (State).

Note: Common law marriage was abolished in Georgia on January 1, 1997.

4.

Date of Separation

The Defendant and I separated on _____ and have remained in a bona fide state of separation since that date.

5.

Grounds for Divorce (Check one or more grounds that you can prove)

Plaintiff is entitled to a divorce from the Defendant upon the statutory grounds that:

The marriage is **irretrievably broken** and there is no hope of reconciliation, under O.C.G.A. § 19-5-3(13). [*This is the no-fault divorce provision.*]

Cruel Treatment. My spouse committed the following acts of cruel treatment to me such that I am afraid he/she will hurt me in the future:

Adultery. My spouse has had sexual intercourse outside the marriage.

Desertion. On or about _____ (date), my spouse, without just cause or reason, intentionally abandoned and deserted me for a period of at least one year as follows:

Intermarriage. My spouse and I are related as follows:

Mental incapacity. I did not have the mental capacity to enter into a marriage when we married because

Impotency. My spouse was impotent at the time of our marriage, and I was not aware of this.

Force, menace, duress, fraud in obtaining the marriage. I entered this marriage against my will as a result of

Pregnancy of the wife at the time of the marriage unknown to the husband. I did not know that my spouse was pregnant by another man when we got married.

Conviction of party for an offense involving moral turpitude. On or about _____, my spouse was sentenced to serve at least two years in the penitentiary for the following:

Habitual intoxication. My spouse is repeatedly intoxicated.

My spouse has been adjudged mentally ill by a court of competent jurisdiction. My spouse has been confined in an institution for the mentally ill for a period of at least two years immediately preceding this action. My spouse's mental illness has been determined to be incurable by competent examiners, and I have attached

a certified statement that it is this person's opinion that my spouse is hopelessly and incurably mentally ill.

Habitual Drug Addiction. My spouse is addicted to drugs as follows:

6.

Alimony (Check a, b or c)

a) I am seeking temporary alimony which will last until the date of the final decree of divorce. I did not engage in adultery, desertion, cruel treatment, or other fault grounds for divorce.

b) I am seeking temporary and permanent alimony which will last until I remarry or until my former spouse or I should die. I did not engage in adultery, desertion, cruel treatment, or other fault grounds for divorce.

c) I hereby expressly waive alimony for the past, present, and future.

7.

Marital Property (Check a, b or c)

a) Defendant and I have no marital property.

b) Defendant and I have already divided our marital property to our mutual satisfaction.

c) Defendant and I have the following marital property that I have checked, and I am seeking an equitable division of this property.

A house located at

A notice of Lis Pendens is attached hereto as Exhibit "_____."

Pension(s): Mine _____ My spouse's _____.

Motor vehicles (list make, model & year):

Furniture (list or attach list):

Bank accounts and investments (list or attach list)

Other:

8.

Joint Debts (Check a or b)

a) Defendant and I have no joint outstanding debts.

b) Defendant and I have the following debts. I have indicated which party should be responsible for each debt. The responsible party will indemnify and hold harmless the non-responsible party for any collection on these obligations.

Creditor	Amount	Responsible Party

9.

Name Restoration

My former name is _____, and I request that it be restored to me.

10.

Minor Children

There are no minor children born of the marriage and the wife is not now pregnant.

WHEREFORE, Plaintiff respectfully requests:

- a) That the parties herein be totally divorced;
- b) That the Court grant Plaintiff ownership of the above-requested items of property;
- c) That the Plaintiff have such other and further relief as this Court deems equitable and just.

Respectfully submitted, this _____ day of _____, 20____.

Plaintiff *pro se*

Address & telephone number

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____,
Plaintiff,)
)
)
)
v.) Civil Action No. _____
)
_____,)
Defendant.)

VERIFICATION

Personally appeared before me the undersigned who on oath states that the facts set forth in this Complaint are true and correct to the best of his or her knowledge and belief.

_____,
Plaintiff *pro se*

Sworn and subscribed before me
This ____ day of _____, 20____.

Notary Public, State of Georgia

My Commission Expires _____.

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____,)
Plaintiff,)
)
v.) Civil Action No. _____
)
_____,)
Defendant.)

ACKNOWLEDGEMENT OF SERVICE AND SUMMONS

The undersigned Defendant hereby acknowledges service of the above Summons and Complaint for Divorce and states that (s)he has received a copy of said Complaint, and Defendant hereby waives any further service of process.

This the _____ day of _____, 20_____.

Defendant *pro se*

Sworn to and subscribed before me

This _____ day of _____, 20_____.

Notary Public, State of Georgia

My Commission Expires _____.

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____,)
Plaintiff,)
)
v.) Civil Action No. _____
)
_____,)
Defendant.)

**DEFENDANT'S ACKNOWLEDGEMENT OF SERVICE
AFFIDAVIT OF WAIVER OF VENUE AND PERSONAL JURISDICTION**

I, _____, the named Defendant in the above-styled case, after being duly sworn do hereby depose and say that I am a resident of _____ County, _____ (State), and that the Plaintiff in the above-styled case is a resident of _____ County, Georgia. I affirm that I have received a copy of said Petition/Complaint, and I hereby waive any and all further notice, service, and issuance of process.

After being duly informed that I have a constitutional right to a trial by Judge or jury on the above matter in the county of my residence, and with that knowledge, I hereby expressly waive my right to venue in the county of my residence, and consent to venue and personal jurisdiction in the county of this superior court.

This ____ day of _____, 20____.

Affiant

Notary Public

Sworn to and subscribed before me
this ____ day of _____, 20____.

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____, §
Plaintiff, §
v. § Civil Action
_____ § File No. _____
_____, §
Defendant. §

SUMMONS

To the above-named defendant:

You are hereby summoned and required to file with the Clerk of said Court and serve upon _____, the pro se plaintiff, whose address is _____ an answer to the complaint which is herewith served upon you, within 30 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint.

This _____ day of _____, 20_____.

Clerk of Superior Court, _____ County

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____, §
Plaintiff, §
v. § Civil Action
§ File No. _____
_____, §
Defendant. §

SETTLEMENT AGREEMENT

This is an agreement by and between _____ (hereinafter referred to as "Wife") and _____ (hereinafter referred to as "Husband").

WHEREAS, the parties are married but are currently living in a bona fide state of separation;

WHEREAS, the parties desire to settle between themselves all questions of division of property, alimony, and all other rights and obligations arising out of their marital relationship;

NOW THEREFORE, in consideration of the mutual covenants hereinafter contained, the parties agree as follows:

1.

Separation

The parties shall continue to live separate and apart and each shall be free from interference, molestation, authority and control, direct or indirect, by the other as fully as if sole and unmarried, and each may reside at such place or places as he or she may select.

2.

Alimony (Choose only one: a or b)

a) The Husband/ Wife shall pay to the Husband/ Wife as alimony the sum of \$ _____ per week/month, to be paid beginning on _____ [Date] and to continue thereafter until the Husband/ Wife remarries or dies.

b) The parties hereby expressly waive alimony for the past, present and future.

3.

Division of Property (Choose only one: a, b or c)

- a) The parties have no marital property subject to equitable division.
- b) The parties have previously divided their marital property to their mutual satisfaction.
- c) The parties acknowledge that they possess various items of jointly owned property, which shall be divided as follows:

1) To the Wife:

2) To the Husband:

4.

Division of Debts (Choose only one: a or b)

- a) The parties acknowledge that they have no outstanding joint debts.
- b) The parties agree to the division of debts as indicated below:

Creditor	Amount	Responsible Party

The responsible party indemnifies and holds harmless the non-responsible party for any collection on these obligations.

5.

Name Restoration

The parties request that the wife's name be restored to _____ [former name].

6.

Binding Agreement

The parties acknowledge that they have entered into this Agreement freely and voluntarily and that it is not the result of any duress or any undue influence. This Agreement constitutes the entire understanding of the parties. There are no representations, warranties, covenants, or undertakings other than those expressly set forth herein.

7.

Agreement enforceable with or without divorce

It is expressly understood that this Agreement does not obligate the parties to continue to live in a state of separation or to proceed with an action for divorce. However, in the event that either party shall bring or maintain an action for dissolution of the marital relationship, this Agreement shall be presented to the court and incorporated by reference into any judgment or decree concerning the matters provided herein. Notwithstanding such incorporation, this Agreement shall survive and be enforceable independently of the judgment or decree.

This Agreement is entered into this the _____ day of _____, 20_____.

Plaintiff *pro se*

Sworn to and subscribed before me
This _____ day of _____, 20_____.

Notary Public, State of Georgia
My Commission Expires _____.

Defendant *pro se*

Sworn to and subscribed before me
This _____ day of _____, 20_____.

Notary Public, State of Georgia
My Commission Expires _____.

In the Superior Court of _____ County, Georgia

_____ , Plaintiff)	
)	
vs.)	Civil Action No. _____
)	
_____ , Defendant)	
)	

DOMESTIC RELATIONS FINANCIAL AFFIDAVIT OF WIFE

1. AFFIANT'S NAME: _____ Age _____

Spouse's Name: _____ Age _____

Date of Marriage: _____ Date of Separation _____

Names and birth dates of children for whom support is to be determined in this action:

Name	Date of Birth	Resides with
_____	_____	_____
_____	_____	_____
_____	_____	_____

Names and birth dates of affiant's other children:

Name	Date of Birth	<u>Resides with</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. SUMMARY OF AFFIANT'S INCOME AND NEEDS

(a) Gross monthly income (from item 3A) \$ _____

(b) Net monthly income (from item 3C) _____

(c) Average monthly expenses (item 5A) \$ _____

Monthly payments to creditors + _____

Total monthly expenses and payments to creditors (item 5C) _____

(subsections (d) & (e) deleted)

3. A. AFFIANT'S GROSS MONTHLY INCOME (complete this section or attach Child Support Schedule A)

(All income must be entered based on monthly average regardless of date of receipt.)

Salary or Wages \$ _____
ATTACH COPIES OF 2 MOST RECENT WAGE STATEMENTS

Commissions, Fees, Tips \$ _____

Income from self-employment, partnership, close corporations, and independent contracts (gross receipts minus ordinary and necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Rental Income (gross receipts minus ordinary and necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Bonuses \$ _____

Overtime Payments \$ _____

Severance Pay \$ _____

Recurring Income from Pensions or Retirement Plans \$ _____

Interest and Dividends \$ _____

Trust Income \$ _____

Income from Annuities \$ _____

Capital Gains \$ _____

Social Security Disability or Retirement Benefits \$ _____

Workers' Compensation Benefits \$ _____

Unemployment Benefits \$ _____

Judgments from Personal Injury or Other Civil Cases \$ _____

Gifts (cash or other gifts that can be converted to cash) \$ _____

Prizes/Lottery Winnings \$ _____

Alimony and maintenance from persons not in this case \$ _____

Assets which are used for support of family \$ _____

Fringe Benefits (if significantly reduce living expenses) \$ _____

Any other income (do NOT include means-tested Public assistance, such as TANF or food stamps) \$ _____

GROSS MONTHLY INCOME \$ _____
(prior section B deleted)

C. Affiant's Net Monthly Income from employment (deducting only state and federal taxes and FICA) \$ _____

Affiant's pay period (i.e., weekly, monthly, etc.) _____

Number of exemptions claimed _____

4. ASSETS

(If you claim or agree that all or part of an asset is non-marital, indicate the non-marital portion under the appropriate spouse's column and state the amount and the basis: pre-marital, gift, inheritance, source of funds, etc.).

Description	Value	Separate Asset of the Husband	Separate Asset of the Wife	<u>Basis of the Claim</u>
Cash	\$ _____	_____	_____	_____
Stocks, bonds	\$ _____	_____	_____	_____
CD's/Money Market Accounts	\$ _____	_____	_____	_____
Bank Accounts (list each account):				
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
<u>Retirement Pensions, 401K, IRA, or Profit Sharing</u>	\$ _____	_____	_____	_____
Money owed you:	\$ _____	_____	_____	_____
<u>Tax Refund owed you:</u>	\$ _____	_____	_____	_____

Real Estate:

home: \$ _____

debt owed: \$ _____

other: \$ _____

debt owed: \$ _____

Automobiles/Vehicles:

Vehicle 1: \$ _____

debt owed: \$ _____

Vehicle 2: \$ _____

debt owed: \$ _____

Life Insurance

(net cash value): \$ _____

Furniture/furnishings: \$ _____

Jewelry: \$ _____

Collectibles: \$ _____

Other Assets: \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Assets: \$ _____

5. A. AVERAGE MONTHLY EXPENSES

HOUSEHOLD

Mortgage or rent payments \$ _____ Cable TV \$ _____

Property taxes \$ _____ Misc. household and grocery items \$ _____

Homeowner/Renter Insurance \$ _____ Meals outside the home \$ _____

Electricity \$ _____ Other \$ _____

Water \$ _____ **AUTOMOBILE**

Garbage and Sewer \$ _____ Gasoline and oil \$ _____

Telephone:		Repairs	\$ _____
<u>residential line:</u>	\$ _____	Auto tags and license	\$ _____
<u>cellular telephone:</u>	\$ _____	Insurance	\$ _____
Gas	\$ _____	<u>OTHER VEHICLES</u>	
		<u>(boats, trailers, RVs, etc.)</u>	
Repairs and maintenance:	\$ _____	Gasoline and oil	\$ _____
Lawn Care	\$ _____	Repairs	\$ _____
Pest Control	\$ _____	Tags and license	\$ _____
		Insurance	\$ _____

CHILDREN'S EXPENSES

AFFIANT'S OTHER EXPENSES

Child care <u>(total monthly cost)</u>	\$ _____	Dry cleaning/laundry	\$ _____
School tuition	\$ _____	Clothing	\$ _____
Tutoring	\$ _____	Medical, dental, <u>prescription</u> <u>(out of pocket/uncovered expenses)</u>	\$ _____
Private lessons (e.g., music, dance)	\$ _____	Affiant's gifts (special holidays)	\$ _____
School supplies/expenses	\$ _____	Entertainment	\$ _____
Lunch Money	\$ _____	<u>Recreational Expenses (e.g.,</u> <u>fitness)</u>	\$ _____
<u>Other Educational Expenses (list)</u>		Vacations	\$ _____
_____	\$ _____	Travel Expenses for Visitation	\$ _____
_____	\$ _____	Publications	\$ _____
Allowance	\$ _____	Dues, clubs	\$ _____
Clothing	\$ _____	Religious and charities	\$ _____
Diapers	\$ _____	<u>Pet expenses</u>	\$ _____
Medical, dental, prescription <u>(out of pocket/uncovered expenses)</u>	\$ _____	Alimony paid to former spouse	\$ _____
Grooming, hygiene	\$ _____	Child support paid <u>for other</u> <u>children</u>	\$ _____
Gifts <u>from children to others</u>	\$ _____	<u>Date of initial order:</u>	_____

Entertainment \$ _____ Other (attach sheet) \$ _____

Activities (including extra-curricular, school, religious, cultural, etc.) \$ _____

Summer Camps \$ _____

OTHER INSURANCE

Health \$ _____
 Child(ren)'s portion: \$ _____

Dental \$ _____
 Child(ren)'s portion: \$ _____

Vision \$ _____
 Child(ren)'s portion: \$ _____

Life \$ _____
 Relationship of Beneficiary: _____

Disability \$ _____

Other(specify): \$ _____

TOTAL ABOVE EXPENSES \$ _____

B. PAYMENTS TO CREDITORS

(please check one)

To Whom:	Balance Due	Monthly Payment	Joint	Plaintiff	Defendant

TOTAL MONTHLY PAYMENTS TO CREDITORS: \$ _____

D. TOTAL MONTHLY EXPENSES: \$ _____

This _____ day of _____, 20_____.

Affiant
[Sign in the presence of a Notary Public]

Sworn to and subscribed before me

This _____ day of _____, 20_____.

Notary Public, State of Georgia
My Commission Expires: _____

In the Superior Court of _____ County, Georgia

_____, Plaintiff)
vs.) Civil Action No. _____
_____, Defendant)

DOMESTIC RELATIONS FINANCIAL AFFIDAVIT OF HUSBAND

1. AFFIANT'S NAME: _____ Age _____

Spouse's Name: _____ Age _____

Date of Marriage: _____ Date of Separation _____

Names and birth dates of children for whom support is to be determined in this action:

Name	Date of Birth	Resides with
_____	_____	_____
_____	_____	_____
_____	_____	_____

Names and birth dates of affiant's other children:

Name	Date of Birth	<u>Resides with</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. SUMMARY OF AFFIANT'S INCOME AND NEEDS

(a) Gross monthly income (from item 3A) \$ _____

(b) Net monthly income (from item 3C) _____

(c) Average monthly expenses (item 5A) \$ _____

Monthly payments to creditors + _____

Total monthly expenses and payments
to creditors (item 5C) _____

(subsections (d) & (e) deleted)

3. A. AFFIANT'S GROSS MONTHLY INCOME (complete this section or attach Child Support Schedule A)

(All income must be entered based on monthly average regardless of date of receipt.)

Salary or Wages \$ _____
ATTACH COPIES OF 2 MOST RECENT WAGE STATEMENTS

Commissions, Fees, Tips \$ _____

Income from self-employment, partnership, close corporations, and independent contracts (gross receipts minus ordinary and necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Rental Income (gross receipts minus ordinary and necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Bonuses \$ _____

Overtime Payments \$ _____

Severance Pay \$ _____

Recurring Income from Pensions or Retirement Plans \$ _____

Interest and Dividends \$ _____

Trust Income \$ _____

Income from Annuities \$ _____

Capital Gains \$ _____

Social Security Disability or Retirement Benefits \$ _____

Workers' Compensation Benefits \$ _____

Unemployment Benefits \$ _____

Judgments from Personal Injury or Other Civil Cases \$ _____

Gifts (cash or other gifts that can be converted to cash) \$ _____

Prizes/Lottery Winnings \$ _____

Alimony and maintenance from persons not in this case \$ _____

Assets which are used for support of family \$ _____

Fringe Benefits (if significantly reduce living expenses) \$ _____

Any other income (do NOT include means-tested Public assistance, such as TANF or food stamps) \$ _____

GROSS MONTHLY INCOME \$ _____
(prior section B deleted)

B. Affiant's Net Monthly Income from employment (deducting only state and federal taxes and FICA) \$ _____

Affiant's pay period (i.e., weekly, monthly, etc.) _____

Number of exemptions claimed _____

4. ASSETS

(If you claim or agree that all or part of an asset is non-marital, indicate the non-marital portion under the appropriate spouse's column and state the amount and the basis: pre-marital, gift, inheritance, source of funds, etc..)

Description	Value	Separate Asset of the Husband	Separate Asset of the Wife	<u>Basis of the Claim</u>
Cash	\$ _____	_____	_____	_____
Stocks, bonds	\$ _____	_____	_____	_____
CD's/Money Market Accounts	\$ _____	_____	_____	_____
Bank Accounts (list each account):				
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
<u>Retirement Pensions, 401K, IRA, or Profit Sharing</u>	\$ _____	_____	_____	_____
Money owed you:	\$ _____	_____	_____	_____
<u>Tax Refund owed you:</u>	\$ _____	_____	_____	_____

Real Estate:

home: \$ _____

debt owed: \$ _____

other: \$ _____

debt owed: \$ _____

Automobiles/Vehicles:

Vehicle 1: \$ _____

debt owed: \$ _____

Vehicle 2: \$ _____

debt owed: \$ _____

Life Insurance
(net cash value):

\$ _____

Furniture/furnishings:

\$ _____

Jewelry:

\$ _____

Collectibles:

\$ _____

Other Assets:

\$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Assets: \$ _____

5. A. AVERAGE MONTHLY EXPENSES

HOUSEHOLD

Mortgage or rent payments \$ _____ Cable TV \$ _____

Property taxes \$ _____ Misc. household and grocery
Items \$ _____

Homeowner/Renter Insurance \$ _____ Meals outside the home \$ _____

Electricity \$ _____ Other \$ _____

Water \$ _____ **AUTOMOBILE**
Gasoline and oil \$ _____

Garbage and Sewer \$ _____

		Repairs	\$ _____
Telephone:			
residential line:	\$ _____	Auto tags and license	\$ _____
cellular telephone:	\$ _____	Insurance	\$ _____
Gas	\$ _____	OTHER VEHICLES (boats, trailers, RVs, etc.)	
		<u>Gasoline and oil</u>	\$ _____
Repairs and maintenance:	\$ _____	<u>Repairs</u>	\$ _____
Lawn Care	\$ _____	<u>Tags and license</u>	\$ _____
Pest Control	\$ _____	<u>Insurance</u>	\$ _____

CHILDREN'S EXPENSES

AFFIANT'S OTHER EXPENSES

Child care (<u>total monthly cost</u>)	\$ _____	Dry cleaning/laundry	\$ _____
School tuition	\$ _____	Clothing	\$ _____
Tutoring	\$ _____	Medical, dental, <u>prescription</u> (out of pocket/uncovered expenses)	\$ _____
Private lessons (e.g., music, dance)	\$ _____	Affiant's gifts (special holidays)	\$ _____
School supplies/expenses	\$ _____	Entertainment	\$ _____
Lunch Money	\$ _____	<u>Recreational Expenses (e.g., fitness)</u>	\$ _____
<u>Other Educational Expenses (list)</u>		Vacations	\$ _____
_____	\$ _____	Travel Expenses for Visitation	\$ _____
_____	\$ _____	Publications	\$ _____
Allowance	\$ _____	Dues, clubs	\$ _____
Clothing	\$ _____	Religious and charities	\$ _____
Diapers	\$ _____	Pet expenses	\$ _____
Medical, dental, prescription (out of pocket/uncovered expenses)	\$ _____	Alimony paid to former spouse	\$ _____
Grooming, hygiene	\$ _____	Child support paid for <u>other</u> <u>children</u>	\$ _____
Gifts <u>from children to others</u>	\$ _____	<u>Date of initial order:</u>	_____

Entertainment \$ _____ Other (attach sheet) \$ _____

Activities (including extra-curricular, school, religious, cultural, etc.) \$ _____

Summer Camps \$ _____

OTHER INSURANCE

Health \$ _____
Child(ren)'s portion: \$ _____

Dental \$ _____
Child(ren)'s portion: \$ _____

Vision \$ _____
Child(ren)'s portion: \$ _____

Life \$ _____
Relationship of Beneficiary: _____

Disability \$ _____

Other(specify): \$ _____

TOTAL ABOVE EXPENSES \$ _____

B. PAYMENTS TO CREDITORS

(please check one)

To Whom:	Balance Due	Monthly Payment	Joint	Plaintiff	Defendant

TOTAL MONTHLY PAYMENTS TO CREDITORS: \$ _____

C. TOTAL MONTHLY EXPENSES: \$ _____

This _____ day of _____, 20_____.

Affiant
[Sign in the presence of a Notary Public]

Sworn to and subscribed before me

This _____ day of _____, 20_____.

Notary Public, State of Georgia
My Commission Expires: _____

IN THE SUPERIOR COURT OF EFFINGHAM COUNTY
STATE OF GEORGIA

)	
)	
PLAINTIFF(S))	
)	
vs.)	Civil Action No. _____
)	
)	
)	
DEFENDANT(S))	

NOTICE OF HEARING

Notice is hereby given to the above-named parties that a hearing will be held before the Honorable _____, on _____, 20__ at ___:___ AM/PM in the Effingham County Judicial Complex on the third floor in the _____ Courtroom.

Parties are directed and required to be and appear before the court at said date, time and place ready for said hearing.

This _____ day of _____, 20__.

Clerk/Deputy Clerk Superior Court
Effingham County

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____)	
Plaintiff,)	
)	
v.)	Civil Action No. _____
)	
_____)	
Defendant.)	

FINAL JUDGMENT AND DECREE

Upon consideration of this case, upon evidence submitted as provided by law, it is the judgment of the Court that a total divorce be granted, that is to say, a divorce *a vinculo matrimonii*, between the parties to the above stated case upon legal principles.

It is considered, ordered and decreed by the Court that the marriage contract heretofore entered into between the parties to this case, from and after this date, be and is set aside and dissolved as fully and effectually as if no such contract had ever been made or entered into.

Petitioner and Respondent in the future shall be held and considered as separate and distinct persons altogether unconnected by any nuptial union or civil contract whatsoever and both shall have the right to remarry.

The Court restores to _____ her prior or maiden name, to wit: _____; Date of Birth: _____.

The Court fixes alimony as follows: _____.

The Court grants to Plaintiff the following items property: _____

The Court divides up the parties debts as follows:

Creditor	Amount	Responsible Party

The responsible party will hold harmless the non-responsible party for any collection on these obligations.

Each party is hereby restrained and enjoined from molesting or harassing the other party.

SO ORDERED this _____ day of _____, 20_____.

JUDGE, Superior Courts



REPORT OF DIVORCE, ANNULMENT OR DISSOLUTION OF MARRIAGE · FORM 3907
(REVISED 12/2016)

PLEASE PRINT OR TYPE ALL INFORMATION LEGIBLY AND CORRECTLY BELOW.

REQUIRED INFORMATION			
CIVIL ACTION NUMBER		DATE DECREE GRANTED (MONTH, DAY, YEAR)	COUNTY DECREE GRANTED
FIRST NAME OF PARTY 1	MIDDLE NAME	LAST NAME	LAST NAME AT BIRTH
DATE OF BIRTH (MONTH, DAY, YEAR)	COUNTY OF RESIDENCE	NUMBER OF THIS MARRIAGE (FIRST, SECOND, ETC.)	
FIRST NAME OF PARTY 2	MIDDLE NAME	LAST NAME	LAST NAME AT BIRTH
DATE OF BIRTH (MONTH, DAY, YEAR)	COUNTY OF RESIDENCE	NUMBER OF THIS MARRIAGE (FIRST, SECOND, ETC.)	
SPECIFY GROUNDS FOR DIVORCE (19-5-3, OCGA)		NUMBER OF CHILDREN LESS THAN 18 AFFECTED BY THIS DECREE	

This above Report may be reproduced by use of a computer. However, the finished Report must be a close reproduction of the original, and prior review and approval must be obtained from the State Registrar before use. (31-10-7, O.C.G.A.)

31-10-22. Record of divorce, dissolutions, and annulments.

(a) A record of each divorce, dissolution of marriage, or annulment granted by any court of competent jurisdiction in this state shall be filed by the clerk of the court with the department and shall be registered if it has been completed and filed in accordance with this Code section. The record shall be prepared by the petitioner or the petitioner's legal representative on a form prescribed and furnished by the state registrar and shall be presented to the clerk of the court with the petition. In all cases, the completed record shall be a prerequisite to the granting of the final decree.

(b) The clerk of the superior court shall complete and forward to the department on or before the tenth day of each calendar month the records of each divorce, dissolution of marriage, or annulment decree granted during the preceding calendar month.

IN THE SUPERIOR COURT OF EFFINGHAM COUNTY, GEORGIA
SHERIFF'S RETURN OF SERVICE

Civil Action No. _____

____ Superior Court ____ Juvenile Court

Date Filed _____

____ State Court

Attorney's Address

Georgia, _____ EFFINGHAM _____ County

PLAINTIFF

Vs.

Name and Address of Party to be served

DEFENDANT

GARNISHEE

SHERIFF'S ENTRY OF SERVICE

____ I have this day served the defendant _____ personally with a copy of the within action and summons.

____ I have this day served the defendant _____ by leaving a copy of the action and summons at his most notorious place of abode in this County.

Delivered same into hands of _____ described as follows: age, about ____ years; weight, about ____ pounds; height, about ____ feet and ____ inches, domiciled at the residence of defendant.

____ Served the defendant, _____ a corporation, by leaving a copy of the within action and summons with _____ in charge of the office and place of doing business of said Corporation in this County.

____ I have this day served the above styled affidavit and summons on the defendant(s) by posting a copy of the same to the door of the premises designated in said affidavit, and on the same day of such posting by depositing a true copy of same in the United States Mail, First Class in an envelope properly addressed to the defendant(s) at the address shown in said summons, with adequate postage affixed thereon containing notice to the defendant(s) to answer said summons at the place stated in the summons.

____ Diligent search made and defendant _____ not to be found in the jurisdiction of this Court.

This ____ day of _____, _____

DEPUTY

SUPERIOR COURT OF EFFINGHAM
PARTIES INFORMATION SHEET
TO BE FILED WITH COMPLAINT/PETITION

Plaintiff's Contact Information:

Plaintiff's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Defendant's Contact Information:

Defendant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

Cell Phone Number: _____

Email Address: _____

General Civil and Domestic Relations Case Filing Information Form

Superior or State Court of _____ County

For Clerk Use Only

Date Filed _____ Case Number _____
MM-DD-YYYY

Plaintiff(s)

Defendant(s)

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Plaintiff's Attorney _____ Bar Number _____ Self-Represented

Check One Case Type in One Box

General Civil Cases

- Automobile Tort
- Civil Appeal
- Contract
- Garnishment
- General Tort
- Habeas Corpus
- Injunction/Mandamus/Other Writ
- Landlord/Tenant
- Medical Malpractice Tort
- Product Liability Tort
- Real Property
- Restraining Petition
- Other General Civil

Domestic Relations Cases

- Adoption
- Dissolution/Divorce/Separate Maintenance
- Family Violence Petition
- Paternity/Legitimation
- Support – IV-D
- Support – Private (non-IV-D)
- Other Domestic Relations

Post-Judgment – Check One Case Type

- Contempt
 - Non-payment of child support, medical support, or alimony
- Modification
- Other/Administrative

Check if the action is related to another action(s) pending or previously pending in this court involving some or all of the same parties, subject matter, or factual issues. If so, provide a case number for each.

Case Number

Case Number

I hereby certify that the documents in this filing, including attachments and exhibits, satisfy the requirements for redaction of personal or confidential information in O.C.G.A. § 9-11-7.1.

Is an interpreter needed in this case? If so, provide the language(s) required. _____
Language(s) Required

Do you or your client need any disability accommodations? If so, please describe the accommodation request.

General Civil and Domestic Relations Case Disposition Information Form

Superior or State Court of _____ County

For Clerk Use Only

Date Disposed _____ Case Number _____
MM-DD-YYYY

Case Style _____

Plaintiff(s)

Defendant(s)

Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix

Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix
Last	First	Middle I.	Suffix	Prefix

Reporting Party _____

Plaintiff's Attorney _____

Bar Number _____

Self-Represented

Defendant's Attorney _____

Bar Number _____

Self-Represented

Manner of Disposition
Check Only One

Jury Trial

Bench/Non-Jury Trial

Non-Trial Disposition

Alternative Dispute Resolution

- Check if any party was self-represented at any point during the life of the case.
- Check if the court ordered an interpreter for any party, witness, or other involved individual.
- Was the case referred/ordered to a court-annexed alternative dispute resolution (ADR) process?