### SIMPLE DIVORCE SERVICES

# 1451 W CYPRESS CREEK RD, SUITE 300, FORT LAUDERDALE FL 33309

www.SIMPLEDIVORCESERVICES.COM

info@simpledivorceservices.com PHONE:954-999-4610 FAX: 954-398-1283

#### UNCONTESTED DIVORCE NO CHILDREN PLEASE READ THE FOLLOWING CAREFULLY:

#### **Process**

1 - Choose One of the Options Below:

o Express \$299	o With Summons \$399	o By Publication \$399
Both parties are in agreement and will sign all documents prior to filing the case in court	The respondent is not in agreement or his disposition is unknown. Respondent will need to be served by a Sheriff or Process Server. Respondent will be expected to submit an answer in writing to the court within 20 calendar days. Once the time period has expired a court	The whereabouts of the respondent are not known or is presumed to be outside of the country. A publication is published for 30 days. The proof of publication is submitted to the judge along with a request for a hearing.
	hearing will be requested.	
Duration: 30-45 Days	Will depend on the Respondent and	60-120 Days
NO COURT HEARING	also the schedule of the judge	

Pay - Our fee or a deposit with the balance due before the documents are ready for filing.

We will complete the divorce forms and will email them to you within 24-48 hours. You will review the documents and make corrections if necessary.

**2 – Signing of the documents** – It's your choice to come to our office if you live in Miami Dade or Broward County and sign the documents or take them to a Notary Public of your choice. We will e-file the documents in the appropriate county. **IMPORTANT – Respondent must sign either the same day the Petitioner signs or after – <b>NOT BEFORE** 

IMPORTANT: I am not an attorney or paralegal. All I do is type forms approved by the Supreme Court of Florida. I cannot nor will I provide any legal advice, neither can I represent anyone in the court of law. A Disclosure from Non-lawyer will be provided which will further explain my limitations.

Rule 10-2.1(b) of the Rules Regulating The Florida Bar defines a paralegal as a person who works under the supervision of a member of The Florida Bar and who performs specifically delegated substantive legal work for which a member of The Florida Bar is responsible. Only persons who meet the definition may call themselves paralegals. Josie Olivares, informed me that he/she is not a paralegal as defined by the rule and cannot call himself/herself a paralegal.

We can only prepare documents based on your direction. For legal advice please contact an attorney.

	• • •	· ·	_	-	•
Signature			Date		
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# INFORMATION NEEDED FOR DIVORCE WITHOUT CHILDREN

MARRIAGE				
Date of Marriage	City and State w	here Wedding Took Pla	ice	
County Where You We	ere Married	Date of S	Separation	
Name		PETITIONER		
Current address				
City	County	State	Zip	
Date of Birth	Social Securit	ty Number		
Telephone	Fax (if a	applicable)		_
Email				
Are any of the parties	in the military? If yes, who			
Maiden Name (if wife	desires to have her maiden n	ame restored		
		RESPONDENT		
Name				
Current address				
City	County	State	Zip	
Date of Birth	Social Secu	rity Number		
Telephone	Fax (if	f applicable)		
Email				
Maiden Name (if wife	desires to have her maiden n	ame restored		
Notarizations:				
Please indicate how the Husband: Wife:		th another notary th another notary		

### **FINANCIAL INFORMATION:**

Please provide a financial affidavit for both parties.

The husband's financial affidavit should only include the income and expenses, assets, etc. that the husband is keeping. The same information is required for the wife in her own financial affidavit.

### Joint assets and liabilities should ONLY be listed below

Joint Assets and Liabilities (such as property, autos, loans, credit cards etc.):

Type of Asset/Liability	Who is Keeping It	Further Instructions

If a QUADRO will be needed please contact the agency handling the retirement plan for the appropriate	forms.
We will submit it to the judge for his signature.	

# **PETITIONER**

Occupa	ation:			Er	nplo	yed by:									
	ss Address:												_		
Pay ra	ite: \$ ner:	( )	every	week	( )	every	other	week	(	) twice	a	month	(	)	monthly
MONT	HLY GROSS INC	OME:													
1. \$	Monthly	gross salary	or wa	iges											
2	Monthly	bonuses, co	ommiss	sions, a	llow	ances, c	vertim	e, tips,	and	similar p	oaym	nents			
	Monthly												<u>,</u>		
	porations, and							1 /				,			
4	Monthly	disability be	nefits,	/SSI											
5	Monthly	Workers' Co	mpen	sation											
6.	Monthly	Unemploym	nent Co	ompens	atio	n									
	 Monthly	• •		•			ents								
	 Monthly	-				, , ,									
	Any othe		-		atur	e (list so	ource)								
	<del></del>			_											
11. \$_	TOTAL	MONTHLY (	GROSS	INCON	1E (A	Add line	s 1–10)								
	NT MONTHLY [														
	Monthly pendents and i				ncom	ne tax (d	orrecte	d for fi	ling s	status ar	nd al	lowable	Š		
uel		status													
	b. Number														
13.	Monthly	•													
	 Monthly														
	 Monthly														
	Monthly														
17	Monthly d for any mino	health insu r children of	rance ¡ f this re	paymei elation:	nts (i ship	ncludin	g denta	l insura	nce)	, exclud	ing p	ortion			
18		court-order	red chi	ld supp	ort a	actually	paid fo	r childr	en fr	om ano	ther				
	ationship				1		A -1 -1 -2 E		- L- \						
19	Monthly			•	tuai	ıy paid (	Add 25	a and 2	(30)						
	25a. from th 25b. from o														
20 <b>\$</b>	250. ITOIII 0 T <b>OTAL</b> 1	` '	-		FIIN	IDER SE	CTION	61 <b>2</b> 0	FI∩¤	NT2 AUIS	\T   T	FS			
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21. \$	•	IT NET MON			E (S	ubtract	line 11	from I	ine 2	20)					

### **SECTION II. AVERAGE MONTHLY EXPENSES**

Mortgage or rent \$ Telephone \$ Maintenance/Repairs \$	Property taxes Food Other:	\$ \$\$_	Utilities Meals outside home 	\$ \$
A. AUTOMOBILE Gasoline \$ Re	epairs \$ Insurance	\$		
B. INSURANCE (only we Medical/Dental \$	vhen it's not deducted from Life \$ On DRS	<b>n your payc</b> ther:	heck) \$	
TYPE OF CREDITOR	CREDITOR	MON	ITHLY PAYMENT	AMOUNT OWED
MORTGAGE				
SECOND MORTGAGE				
AUTO LOAN				
CREDIT CARD				
CREDIT CARD				
CREDIT CARD				

### **SECTION III. ASSETS AND LIABILITIES**

Use the nonmarital column only if this is a petition for dissolution of marriage and you believe an item is "nonmarital," meaning it belongs to only one of you and should not be divided. You should indicate to whom you believe the item(s) or debt belongs. (Typically, you will only use this column if property/debt was owned/owed by one spouse before the marriage.

#### A. ASSETS:

**HOUSEHOLD:** 

DESCRIPTION OF ITEM(S). List a description of each separate item owned by you (and/or your spouse, if this is a petition for dissolution of marriage). LIST ONLY LAST 4 DIGITS OF ACCOUNT NUMBERS. Check the line next to any asset(s) which you are requesting the judge award	Current Fair Market	Non-marital (check correc column)		
to you.	Value			
		husband	wife	
Cash (on hand)	\$			
Cash (in banks or credit unions)				
Stocks, Bonds, Notes				
Real estate: (Home)				
(Other)				
Automobiles				
Other personal property				
Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)				
Other				
Total Assets (add next column)	\$			

# RESPONDENT

Occupation: Employed by:
Business Address:
Pay rate: \$ ( ) every week ( ) every other week ( ) twice a month ( ) monthl ( ) other:
MONTHLY GROSS INCOME:
22. \$ Monthly gross salary or wages
23 Monthly bonuses, commissions, allowances, overtime, tips, and similar payments
24Monthly business income from sources such as self-employment, partnerships, close
corporations, and/or independent contracts
25Monthly disability benefits/SSI
26Monthly Workers' Compensation
27. Monthly Unemployment Compensation
28Monthly pension, retirement, or annuity payments
29. Monthly Social Security benefits
30. Any other income of a recurring nature (list source)
31
32. \$ TOTAL MONTHLY GROSS INCOME (Add lines 1–10)
<u> </u>
PRESENT MONTHLY DEDUCTIONS:
33. \$Monthly federal, state, and local income tax (corrected for filing status and allowable
dependents and income tax liabilities)
c. Filing Status
d. Number of dependents claimed
34 Monthly FICA or self-employment taxes 35 Monthly Medicare payments
36 Monthly mandatory union dues
37 Monthly mandatory retirement payments
38 Monthly health insurance payments (including dental insurance), excluding portion paid for any minor children of this relationship
39 Monthly court-ordered child support actually paid for children from another
relationship
40Monthly court-ordered alimony actually paid (Add 25a and 25b)
25a. from this case: \$
25b. from other case(s):\$ 41. \$ TOTAL DEDUCTIONS ALLOWABLE UNDER SECTION 61.30, FLORIDA STATUTES
41. \$ TOTAL DEDUCTIONS ALLOWABLE UNDER SECTION 61.30, FLORIDA STATUTES  (Add lines 12 through 19).
42. \$ PRESENT NET MONTHLY INCOME (Subtract line 11 from line 20)

SECTION II. AVERAGE MONTHLY EXPENSES

C. HOUSEHOLD: Mortgage or rent Telephone Maintenance/Repairs	\$ \$ \$	Property taxes Food Other:	\$ \$	Utilities Meals outside	home	\$ \$
<b>D. AUTOMOBILE</b> Gasoline \$	Repairs \$	Insurance	\$			
E. INSURANCE (only Medical/Dental		ot deducted fron e \$ Ot		eck)		
DAY/A 4 EN ITO TO ADED!						

#### **PAYMENTS TO CREDITORS**

	<del>-</del>		
TYPE OF CREDITOR	CREDITOR	MONTHLY PAYMENT	AMOUNT OWED
MORTGAGE			
SECOND MORTGAGE			
AUTO LOAN			
CREDIT CARD			
CREDIT CARD			
CREDIT CARD			

### **SECTION III. ASSETS AND LIABILITIES**

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#### B. ASSETS:

DESCRIPTION OF ITEM(S). List a description of each separate item owned by you (and/or your spouse, if this is a petition for dissolution of marriage). LIST ONLY LAST 4 DIGITS OF ACCOUNT NUMBERS. Check the line next to any asset(s) which you are requesting the judge award		Non-marital (check correct column)		
to you.	Market Value			
		husband	wife	
Cash (on hand)	\$			
Cash (in banks or credit unions)				
Stocks, Bonds, Notes				
Real estate: (Home)				
(Other)				
Automobiles				
Other personal property				
Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)				
Other				
Total Assets (add next column)	\$			