

Penobscot Indian Nation
Judicial System



12 Wabanaki Way
Indian Island, Maine
04468

PENOBSCOT NATION

Indian Island,ss

Docket No. _____

_____, Plaintiff

v.

_____, Defendant

**DIVORCE COMPLAINT
(with children)**

Title to Real Estate is Involved
19-A M.R.S. § 901, 1652, 1653, 1851
M.R. Civ. P. 10(a)

1. Plaintiff was lawfully married to defendant in (town) _____,
(county) _____, (state) _____, on _____ (mo/date/yr.)
2. Plaintiff now resides in (town) _____, (county) _____, (state) _____.
If either party wishes to keep his/her address confidential, that party may complete an Affidavit for Confidential Address (FM-057). This form is available at the Clerk's Office.
3. Defendant now resides in (town) _____, (county) _____, (state) _____.
OR Residence of the Defendant is unknown to the Plaintiff has used reasonable efforts and cannot locate Defendant.
4. The court has jurisdiction because (check all statements that apply).
 Plaintiff resided in Maine in good faith for six months before filing this complaint;
 Plaintiff is a resident of Maine and the parties were married in Maine;
 Plaintiff is a resident of Maine and the parties resided in Maine when the grounds for divorce arose; and/or
 Defendant is a resident of Maine Plaintiff Defendant is a member of the Penobscot Nation
5. Neither party has filed for divorce or annulment from the other before this complaint; **OR**
 A complaint for divorce or annulment was filed before in _____
Docket No. _____ (name of court)
That case: was dismissed on (date) _____
 is still pending.
6. The parties have personal property; **AND**
 Either or both parties has an interest in real estate, (file and exchange form FM-056)
 Neither party has an interest in real estate.
7. Plaintiff lists the following grounds for divorce:
 Irreconcilable marital differences exist between the parties.
 Other: _____
8. Plaintiff and defendant are the parents of the following child(ren), 19-A M.R.S. § 1844 (2) (A):
Name Date of Birth Present Address

List below where and with whom the child(ren) have lived within the past **5 years**.

Name and present address of person child(ren) lived with	Dates child(ren) lived with that person	Town and State where child(ren) lived with that person
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 9.** Plaintiff has not been involved in any way in, and has no information about, another court case in Maine or in any state concerning the custody of the child(ren) except as follows:
- Protection from Abuse, (provide docket number): _____
 - Probate matter, (provide docket number): _____
 - Other (describe what kind of other case) _____

10. No one other than the parties has physical custody of the child(ren), or claims to have custody, or visitation rights with respect to the child(ren), except as follows: _____

11. (Check all boxes that apply)

- No public assistance benefits have ever been received for the child(ren). **OR**
 - Public assistance benefits have been, are now, or will be received for the child(ren), **AND** Plaintiff has sent a copy of this complaint to the Department of Human Services at the following address: *Support Enforcement Division, Central Office Supervisor, State House Station 11, Augusta, ME 04333-0011. (A copy must be sent when the child(ren) have been, are now or will be receiving public assistance benefits.)*
 - The Department of Human Services **has** issued a child support order regarding the child(ren). (If such an order has issued, a copy of the order must be attached to this Complaint).
 - The Department of Human Services **has** been contacted to set up, review, change or enforce a child support order regarding the child(ren).

PLAINTIFF REQUESTS that a divorce be granted and that the court: (*check all boxes that apply*)

- Determine parental rights and responsibilities regarding minor child(ren), including child support (file and exchange form FM-050);
- Set apart the non-marital property to each party and divide the marital property;
- Order that spousal support be paid to Plaintiff by Defendant (file and exchange form FM-043);
- Award reasonable attorney's fees to Plaintiff's attorney (file and exchange form FM-043); and
- Change Plaintiff's name to: _____

Date: _____	_____
	<i>Plaintiff's Signature</i>
Plaintiff Attorney: _____	Plaintiff: _____
Address: _____	Address: _____
_____	_____
Telephone: _____	Telephone: _____

STATE OF MAINE

_____, County
 Personally appeared the above named Plaintiff, _____, and made Oath that the foregoing statements are true.

Before me,
 Date: _____

 Attorney at Law, Notary Public, Deputy Clerk

Defendant has 20 days after being served with this complaint (being given a copy), to file an answer with the Court and must provide copies of all filings to other party.