

<p><b>ATTORNEY OR PARTY WITHOUT ATTORNEY</b> (Name, State Bar number, and address): _____</p> <p>TELEPHONE NO: _____ FAX NO: _____ (Optional): _____</p> <p>E-MAIL ADDRESS (Optional): _____</p> <p>ATTORNEY FOR (Name): _____</p>	<p><b>FOR COURT USE ONLY</b></p>
<p><b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> _____</p> <p>STREET ADDRESS: _____</p> <p>MAILING ADDRESS: _____</p> <p>CITY AND ZIP CODE: _____</p> <p>BRANCH NAME: _____</p>	
<p><b>MARRIAGE OF</b></p> <p>PETITIONER: _____</p> <p>RESPONDENT: _____</p>	
<p><b>PETITION FOR</b></p> <p><input type="checkbox"/> Dissolution of Marriage</p>	

1. **RESIDENCE** (Dissolution only)  Petitioner  Respondent has been a resident of this state for at least six months and of this county for at least three months immediately preceding the filing of this *Petition for Dissolution of Marriage*.

**2. STATISTICAL FACTS**