

**State of Minnesota**

**District Court**

County of \_\_\_\_\_

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Assigned Judge: \_\_\_\_\_  
Case Type: **Dissolution without Children**

**In Re the Marriage of:**

\_\_\_\_\_  
Name of Petitioner (first, middle, last)

**Petition For Dissolution Of  
Marriage Without Children**

and

\_\_\_\_\_  
Name of Respondent (first, middle, last)

STATE OF MINNESOTA )  
COUNTY OF \_\_\_\_\_)SS  
(County where Petition is signed)

**1. Information about Petitioner**

Full Name: \_\_\_\_\_  
First Middle Last

Address where you live: \_\_\_\_\_  
Street Address Apt. No.

City County State Zip Code

Mailing address:  Same as above address OR

\_\_\_\_\_  
Street Address Apt. No.

City County State Zip Code

Date of Birth: \_\_\_\_\_ Petitioner is the  husband  wife.  
Month Day Year

List all of Petitioner's former or other names or write "None":

\_\_\_\_\_  
First Middle Last

\_\_\_\_\_  
First Middle Last

**2. Information about Respondent**

Full Name: \_\_\_\_\_  
First Middle Last