

STATE OF NORTH DAKOTA

IN DISTRICT COURT

COUNTY OF _____

_____ JUDICIAL DISTRICT

_____,)
)
 Plaintiff,)
)
 vs.)
)
 _____,)
)
 Defendant.)

Civil No: _____

**RULE 8.3, N.D.R.CT.,
PRETRIAL CONFERENCE
STATEMENT**

1. PERSONAL INFORMATION

Full Name _____

Present Mailing Address _____

Employer _____

Street Address _____

City, State, Zip Code _____

Present Age _____

Marriage Date _____

Separation Date (Different Residences) _____

Date(s) of Temporary Order(s), if any _____

Minor children born to this marriage or who will be affected by this legal action:

NAME	BIRTHDATE	AGE	LIVING WITH
_____	<u>xx/xx/</u> _____	_____	_____
_____	<u>xx/xx/</u> _____	_____	_____
_____	<u>xx/xx/</u> _____	_____	_____
_____	<u>xx/xx/</u> _____	_____	_____

Is the wife pregnant? _____ Yes _____ No If yes, the due date is _____ Is parenting responsibility of any child contested? _____ Yes _____ No If yes, attach a proposal for parenting responsibility and parenting time for each child for whom parenting responsibility is contested.

2. EMPLOYMENT/INCOME

Provide the following information for each employer.

	HUSBAND	WIFE
A) Name of Employer	_____	_____
Length of Employment	_____	_____
Income Per Month:		
(1) Gross income	_____	_____
Guideline deductions:		
Federal Income Tax	_____	_____
State Income Tax	_____	_____
FICA/Medicare	_____	_____
Health Insurance For Children	_____	_____
Union Dues	_____	_____
Mandatory Retirement	_____	_____
(2) Subtotal of Guideline Deductions	_____	_____
(3) Net Income (Line 1 – Line 2)	_____	_____
Other Guideline Considerations Specify:	_____	_____
(4) Subtotal of Other Deductions	_____	_____
(5) NET TAKE HOME PAY (Line 3 – Line 4)	_____	_____
Tax withholding figures above are based upon Married or Single taxpayer with # of exemptions: (Example M-4 or S-2)		
	_____	_____
B) Employment benefits: Identify all benefits in addition to wages including bonuses paid or due, automobile or travel expense reimbursement, other per		

diem compensation, memberships paid by the employer or in kind benefits.

	_____	_____
C) Other Income:		
(1) Public Assistance Per Month (AFDC/GA)	_____	_____
(2) Social Security, Including Child Benefits, Per Month	_____	_____
(3) Unemployment/Worker's Compensation Per Month	_____	_____
(4) Interest Income Per Month	_____	_____
(5) Dividend Income Per Month	_____	_____
(6) Other Income Per Month	_____	_____
(7) Last Year's Tax Refunds	Federal _____ State _____	Federal _____ State _____

3. CHILD SUPPORT/SPOUSAL SUPPORT

A) Child or spousal support established in separate proceeding:

- (1) Is either party entitled to child or spousal support from a separate proceeding?
Yes _____ No _____. If yes, for each party entitled to child or spousal support, specify the amount: \$_____.
- (2) Is either party required to pay child or spousal support from a separate proceeding?
Yes _____ No _____. If yes, for each party required to pay child or spousal support, specify the amount: \$_____.

B) Child or spousal support established by temporary order in this proceeding:

- (1) Is either party required to pay child or spousal support under a temporary order in this proceeding?
Yes _____ No _____. If yes, specify the amount: Child Support

\$ _____, Spousal Support \$ _____.

- (2) Is any arrearage claimed under an existing temporary order?
Yes _____ No _____. If yes, specify the amount: Child Support
\$ _____, Spousal Support \$ _____.

4. LIVING EXPENSES

Specify the amount of your total monthly expenses \$ _____; and attach an itemized list of your monthly expenses.

5. REAL PROPERTY (For Each Parcel of Property)

- A) Description of Property _____
(1) In Possession of _____
(2) Date Acquired _____
(3) Purchase Price _____
(4) Present FMV (Date of Valuation) _____
(5) First Mortgage Balance _____
(6) Second Mortgage Balance or Home
Improvement Loan _____
(7) Net Value _____
(8) Monthly Payment _____
(9) Income from Property _____

6. BUSINESS/FARM ASSETS (For Each Asset)

- A) Description of Asset _____
(1) In Possession of _____
(2) Date Acquired/Age _____
(3) Purchase Price _____
(4) Present FMV (Date of Valuation) _____
(5) Debt Balance _____
(6) Net Value _____
(7) Monthly Payment _____
(9) Income from Property _____

7. FINANCIAL ASSETS (For Each Asset)

- A) Description of Asset _____
(1) In Possession of _____
(2) Date Acquired/Age _____
(3) Purchase Price _____
(4) Present FMV (Date of Valuation) _____
(5) Debt Balance _____

(6) Net Value _____

8. LIFE INSURANCE (For Each Policy)

- A) Description of Policy
- (1) Name of Company _____
 - (2) Policy Number _____
 - (3) Type of Insurance _____
 - (4) Face Amount _____
 - (5) Cash Value _____
 - (6) Loans _____
 - (7) Insured _____
 - (8) Beneficiary _____
 - (9) Owner _____

9. PENSION PLAN AND/OR PROFIT SHARING PLAN

- | | HUSBAND | WIFE |
|---|--------------------|--------------------|
| A) Through employment: (1) Value | _____ | _____ |
| B) Private Plans (IRA, Keogh, SEP)
Value | _____ | _____ |
| C) Deferred Compensation Value | _____ | _____ |
| D) Military Pension or Disability | Yes _____ No _____ | Yes _____ No _____ |

10. PERSONAL PROPERTY (For Each Asset)

- | | | |
|--|--|-------|
| A) Household Items in Husband's Possession | | Value |
| Description of Item | | |
| (1) _____ | | _____ |
| (2) _____ | | _____ |
| B) Household Items in Wife's Possession | | Value |
| Description of Item | | |
| (1) _____ | | _____ |
| (2) _____ | | _____ |
| C) Household Items in Joint Possession | | Value |
| Description of Item | | |
| (1) _____ | | _____ |
| (2) _____ | | _____ |

- D) Motor Vehicles (For Each Asset)
- (1) Year, Make, Model _____
 - (a) In Possession of _____
 - (b) Market Value _____
 - (c) Encumbrances _____
 - (d) Net Value _____
 - (e) Monthly Payments _____

- E) Boats, Campers, Snowmobiles, Trailers (For Each Asset)
- (1) Year, Make, Model _____
 - (a) In Possession of _____
 - (b) Market Value _____
 - (c) Encumbrances _____
 - (d) Net Value _____
 - (e) Monthly Payments _____

- F) Other Personal Property (For Each Asset)
- (1) Description of Item _____
 - (a) In Possession of _____
 - (b) Market Value _____
 - (c) Encumbrances _____
 - (d) Net Value _____
 - (e) Monthly Payments _____

11. DEBTS (Not Listed Previously)

- A) Secured Debts: _____
- (1) Secured Debts: _____
 - (a) Creditor _____
 - (b) Total Amount Owing (As of What Date) \$ _____
 - (c) Monthly Payments \$ _____
 - (d) When Incurred _____
 - (e) Party Obligated _____
 - (f) Collateral _____
 - (g) Date of Final Payment _____

- B) (1) Unsecured Debts: (Include Attorney's Fees And Costs)
- (a) Creditor _____
 - (b) Total Amount Owing (As of What Date) \$ _____
 - (c) Monthly Payments \$ _____
 - (d) When Incurred _____
 - (e) Party Obligated _____

(f) Collateral _____
(g) Date of Final Payment _____

TOTALS: Husband _____ Wife _____ Joint _____

I hereby represent that the above is a complete disclosure of all property interests and liabilities, and that the values set forth are the best estimates of the property's market value.

_____, (Plaintiff) (Defendant)

By _____
Name of Attorney
Address
Telephone
ND License No. _____
ATTORNEYS FOR _____