(PETITIONER)	NO:	DIV
	JUD	ICIAL DISTRICT COURT
VERSUS		PARISH
		F LOUISIANA
(DEFENDANT)		
PETITION FOR	* * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * *
	WITHOUT MINOR CHIL	
The petition of	(prin	t your name), a major domiciled in
(Parish w	here you permanently resid	e) Parish with respect represents:
	1.	
Made defendant is	, (print ye	our spouse's name) a major currently
domiciled in	Parish/County, State of	(Parish/State
where your spouse permanently resid	les).	
	2	
The parties were married of	on the day of	, (date of marriage) in
Parish/County, State	of	(location of marriage). The parties last
lived together inPar	ish/County, State of	(where you last lived
together as husband and wife).		
	3.	
Petitioner and defendant phy	sically separated on the	day of, (date you
and your spouse separated) and have	e continued to live separate	and apart with the intent to divorce since
that time.		
	4.	
No children were born, adop not pregnant at this time.	ted, or legitimated during the	he marriage of the parties and the wife is
	5.	
The defendant is not an activ	e member of the United Sta	tes armed forces.
	6.	
The parties did not contract a	covenant marriage.	

Petitioner requests and is entitled to a divorce under the provisions of Louisiana Civil Code Article 103(1), based on the parties having lived separate and apart for more than one hundred eighty days without reconciliation.

8.

Petitioner / Defendant [circle one] requests to keep the maiden name / married name [circle one]

of _____ [maiden name/married name].

(Note: The wife must request or agree to any name change.)

WHEREFORE, petitioner prays that after all legal delays and due proceedings, there be

judgment granting petitioner a divorce in accordance with the provisions of Louisiana Civil Code Article 103.

PETITIONER FURTHER PRAYS that:

_____Petitioner be allowed to proceed In Forma Pauperis

_____Petitioner be cast with the costs of these proceedings.

_____Defendant be cast with the costs of these proceedings.

_____ The parties share the costs of these proceedings in equal amounts.

Respectfully submitted,

(SIGNATURE)

(PRINTED FULL NAME)

(STREET ADDRESS)

(CITY/STATE/ZIP CODE)

(TELEPHONE NUMBER)

CLERK OF COURT:

DEFENDANT TO ACCEPT SERVICE (AND SIGN "ACCEPTANCE OF SERVICE")

OR

_____ PLEASE SERVE:

(DEFENDANT'S FULL NAME)

(STREET ADDRESS)

(CITY/STATE/ZIP CODE)

(TELEPHONE NUMBER)