

# INSTRUCTIONS FOR COMPLETING THE ANSWER AND COUNTERCLAIM FOR DISSOLUTION OF MARRIAGE (With Children)

## HEADING

- Choose the county in the drop down box below the first blank. This is where your spouse filed the Complaint.
- Enter your spouse's first, middle, and last names. Your spouse is the plaintiff.
- Enter your first, middle, and last names. You are the defendant.
- The clerk of the district court gave your spouse a case number when the Complaint was filed. You must include the case number on any papers you file.

a. IN THE DISTRICT COURT OF \_\_\_\_\_ COUNTY, NEBRASKA d.

b. \_\_\_\_\_ Case No. \_\_\_\_\_

Plaintiff,

vs.

c. \_\_\_\_\_

Defendant.

**ANSWER AND COUNTERCLAIM FOR DISSOLUTION OF MARRIAGE (CHILDREN)**

## ANSWER

This paragraph does not have a number.

- Enter your full name.

a. \_\_\_\_\_ COMES NOW, \_\_\_\_\_ the defendant in the

(your full name)

The numbers below give instructions for completing the paragraphs with the same numbers in the Answer to Complaint for Dissolution of Marriage.

Paragraph 1. Enter the paragraph numbers, separated by commas, from the Complaint with which you agree.

1. Admits Paragraph(s) \_\_\_\_\_ of the Complaint. (paragraph number(s) with which you agree)

Paragraph 2. Enter the paragraph numbers, separated by commas, from the Complaint with which you do not agree.

2. Denies Paragraph(s) \_\_\_\_\_ of the Complaint. (paragraph number(s) with which you disagree)

## COUNTERCLAIM

This paragraph does not have a number.

- Enter your full name in the first paragraph.

b. I, \_\_\_\_\_, the defendant in the

(your full name)

The numbers below give instructions for completing the paragraphs with the same numbers in the Counterclaim.

Paragraph 1. Enter your complete address, including street number, city, county, and state. If you do not want your spouse to know your exact address because you are concerned about your safety, you can put only the county and state where you are living.

1. I live at \_\_\_\_\_

(your street address: if confidential under Nebraska or Federal law, enter county and state only and provide an alternative address for mailing of notice)

in \_\_\_\_\_

(city, county, and state where you live)

Paragraph 2. Enter your spouse's complete address, including street number, city, county, and state.

2. My spouse's address is \_\_\_\_\_  
(spouse's street address)  
in \_\_\_\_\_  
(city, county and state where spouse lives)

Paragraph 4. Enter the name of the county where this divorce action was filed. Either you or your spouse must be living in this county at the time of filing.

4. At the time this action was filed, either my spouse or I was living in \_\_\_\_\_ County, Nebraska.  
(county where complaint filed)

Paragraph 5. Enter the date you were married and the city and state where you were married.

5. We were lawfully married on \_\_\_\_\_, in \_\_\_\_\_  
(date of marriage)  
\_\_\_\_\_  
(city and state of marriage)

Paragraph 9. a. Enter the number of child(ren) born to you and your spouse.

9. b. Enter the first, middle, and last names of each child and each child's year of birth.

9. My spouse and I have \_\_\_\_\_ child(ren) whose custody or welfare  
(number of children)  
may be affected by this divorce.  
Their names and years of birth are:  
\_\_\_\_\_  
(name of child) \_\_\_\_\_  
(child's year of birth)

Paragraph 10. Check the appropriate box.

10.  I am  Both parents are fit and proper person(s) to have the care, custody, and control of our minor child(ren) subject to the other party's right of parenting time.

Paragraph 11. (a) To complete this paragraph, you must give information about the child(ren)'s living situation for the last 5 (five) years. For each location where the child(ren) lived, enter: (1) the dates the child(ren) lived at that location; (2) the address, including street, city, and state, where the child(ren) lived, and (3) the names and current addresses of the persons with whom the child(ren) lived. If an address is confidential under Nebraska or Federal law, enter county and state only and provide an alternative address for mailing of notice.

(a) For the last five years, the child(ren)'s addresses and the persons they have lived with are:

First line: DATES: ADDRESS:  
Second line: NAME and CURRENT ADDRESS OF PERSON(S)  
WITH WHOM THE CHILDREN HAVE LIVED:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(b) To complete this paragraph, you must check the box that applies. If you have not participated in any other court proceedings in this state or any other state concerning custody of or parenting time with the child(ren), check the first box. If you have participated in any other court proceedings in this state or any other state concerning custody of or parenting time with the child(ren), check the second box and enter the name of the court (for example, District Court of Douglas County, or Lancaster County Juvenile Court), the case number, and the date that any custody determination was made.

(b)

(b) Check the box that applies:

I have not been a party or a witness in any other proceeding concerning the custody of or parenting time with the child(ren).

OR

I have been a party or a witness in another proceeding concerning the custody of or parenting time with the child(ren), as follows:

\_\_\_\_\_

(name of court)

\_\_\_\_\_

(case number)

\_\_\_\_\_

(date of child custody determination, if any)

(c) To complete this paragraph, you must check the box that applies. If you are not aware of any court proceedings that could affect this divorce, check the first box. If you know of any other court proceedings in this state or any other state (such as lawsuits about domestic violence, protection orders, termination of parental rights, and adoptions) that could affect this divorce, check the second box and enter the name of the court (for example, District Court of Douglas County, or Lancaster County Juvenile Court), the case number, and the date that any custody determination was made.

(c)

(c) Check the box that applies:

I know of no other actions or proceedings that could affect this action. This includes actions or proceedings about domestic violence, protection orders, termination of parental rights, and adoptions.

OR

There is currently a proceeding which could affect this action.

\_\_\_\_\_

(name of court)

\_\_\_\_\_

(case number)

\_\_\_\_\_

(date of determination, if any)

(d) To complete this paragraph, you must check the box that applies. If you do not know the names of any persons other than you or your spouse who have physical custody of the child(ren) or claim to have custody or parenting time rights with the child(ren), check the first box. If you know the names of persons other than you or your spouse who have physical custody of the child(ren) or claim to have custody or parenting time rights with the child(ren) enter the name and address of each person.

(d) Check the box that applies:

I do not know the names and addresses of any person(s) other than my spouse and myself who have physical custody of the child(ren) or claim to have custody or parenting time rights with the child(ren).

OR

The following is a list of the names and addresses of persons other than my spouse and myself who have physical custody of the child(ren) or claim to have custody or parenting time rights with the child(ren).

NAME: ADDRESS:

Paragraph 12. If you are requesting custody, enter "my spouse is." If you are requesting that your spouse be awarded custody, enter "I am."

12.  able to provide support for the child(ren).  
(“I am” or “My spouse is”)

Paragraph 15. If you are requesting that your former name be restored, enter the first, middle, and last names you would like to use. If you are not requesting that your former name be restored to you, cross out this paragraph.

15. I wish my former name, ,  
(former or maiden name, including first, middle and last names)  
to be restored to me.

Paragraph 17. To complete this paragraph, you must check the box that applies. If there are no existing restraining, protection, or criminal no-contact orders, check the first box. If there are any such orders, check the second box and supply the required information.

17. Check the box that applies:

There are no existing restraining orders, protection orders, or criminal no-contact orders regarding either party.

OR

There are one or more existing restraining orders, protection orders, or criminal no-contact orders regarding one or more of the parties. Details are as follows:

In (a), check the blank beside the type of order in existence. If more than one order is in existence, check all blanks that apply.

(a) Type of order:  restraining;  protection;  
 criminal no-contact.

In (b), provide the name of the court (i.e., Lancaster County District Court), the case number, and the date the order was entered for **each** order in existence.

(b) Name of court, case number, and date of order for each order:  
\_\_\_\_\_  
(name of court, case number and date of each order)  
\_\_\_\_\_

Paragraph 18. Check the appropriate box.

18. A Parenting Plan  has  has not been developed.

Paragraph 19. Check the appropriate box.

19. Child custody, parenting time, or other access, and child support  are  are not contested.

### CLOSING PARAGRAPH

Paragraph C. If you are requesting physical custody, enter "me." If you are requesting that your spouse be awarded physical custody, enter "my spouse."

c. Award \_\_\_\_\_ custody of the children of this marriage.  
(“me” or “my spouse”)

If you are requesting that your former name be restored, in "F", enter the complete former name to be restored including first, middle, and last names. If you are not requesting that your former name be restored to you, cross out this paragraph.

F. Restore to me my former name of \_\_\_\_\_  
(former or maiden name, including first, middle and last names)

### FINAL SIGNATURE

**DO NOT SIGN THIS FORM UNTIL YOU ARE IN THE PRESENCE OF A NOTARY PUBLIC.**

- a. Wait to sign your name until it can be notarized.
- b. Print your first, middle, and last names.
- c. Enter the date
- d. Enter your mailing address.
- e. Enter the city, state, and ZIP code of your mailing address.
- f. Enter your telephone number, including the area code.
- g. Enter your email address, if any.

a. Signature: \_\_\_\_\_ Date: \_\_\_\_\_ b.  
c. Printed Name: \_\_\_\_\_ d.  
(of defendant) \_\_\_\_\_ e.  
Street Address/P.O. Box: \_\_\_\_\_  
f. City/State/ZIP Code: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ g.  
\*Email address: \_\_\_\_\_

i. [\\*Nebraska Supreme Court Rule § 2-208](#) requires individuals who are not attorneys and representing themselves to provide their email address. The court will use the email address to send notices from the court about this case **except** for items that require another type of service as directed by statute or Nebraska Supreme Court Rule.

If you no longer have email capability or if your email or other contact information changes, you must complete a [Change of Contact Information Form](#).

ii.  By checking this box, I am letting the court know that I do not have the ability to receive emails. The reason I cannot receive email is: \_\_\_\_\_

**VERIFICATION**

This form must be signed and sworn to in the presence of a notary public. You must bring a photo identification for the notary to verify your identity.

**CERTIFICATE OF SERVICE**

- a. Enter the date when you mailed the copy of the Answer and Counterclaim for Dissolution of Marriage to your spouse.
- b. Enter the full address, including the street address, city, state and ZIP code where you mailed the Answer and Counterclaim to your spouse.
- c. Sign your name.

**CERTIFICATE OF SERVICE**

a. I hereby certify that on \_\_\_\_\_, a true copy of the  
(date)  
foregoing Answer and Counterclaim for Dissolution of Marriage was sent by  
first-class mail, postage prepaid, to my spouse at \_\_\_\_\_  
(spouse's address, including street address, city, state, and ZIP code)

\_\_\_\_\_  
(your name)

b. \_\_\_\_\_

b. \_\_\_\_\_