

RESPONSE TO PETITION AND SUMMONS

Date: _____

Please print and fill out form. You may return by fax or mail.

Phone: (360)525-7866 – Email: franklinparalegals@gmail.com

Mail: FPS • P.O. Box 814 • Coupeville • WA 98239

For Office Use Only - Date _____

- ☐ DS With Children
- ☐ DS Without Children

Fees: _____

Appointment _____

1. STATISTICAL INFORMATION :**CLIENT :**

Client Name: _____

Client's Maiden Name: _____

Address: _____

County: _____

Date of Birth: _____

Place of Birth: _____

Social Security Number: _____

Drivers License number and state issued: _____

Race: _____

Occupation: _____

Number of Previous Marriages: _____

How were marriages terminated? _____

Current Military Service? If yes which branch _____

Education: (Highest level completed) _____

2 . Do You Join in this Petition? _____

Is the other Party seeking Maintenance/Spousal Support? _____

3 . PERSONAL PROPERTY: Please list all of the valuable items of personal property that will be, or may be in dispute, the value of each, and who should receive the property.

Property Value Who receives?

4. EMPLOYMENT:CLIENT

Employer: _____

Address &Telephone _____

Job Title: _____

Employed Since _____

Nature of Job _____

Base (monthly) _____

Gross monthly _____

Net Monthly _____

Deductions (monthly):

FICA _____

State _____

Federal _____

Other _____

5. FINANCIAL/BANKING ACCOUNTS:

Name of account: _____

Owner of account: _____

2. Type of account: _____

Name of account: _____

Owner of account: _____

2. Type of account: _____

6. PETITION STATEMENT

You will need a copy of the Petition you were served for this next section. Please check the appropriate box for each section. For all those that are denied, please list the reasons why each allegation is denied.

The allegations of the petition in this matter are **admitted** or **denied** as follows (check only one for each paragraph):

Paragraph of the Petition

1.1	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.2	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.3	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.4	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.5	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.6	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.7	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.8	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.9	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.10	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.11	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.12	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.13	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.14	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.15	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information
1.16	<input type="checkbox"/>	Admitted	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Lacks Information

List all allegations denied and why. For those that lack information, please provide the information.

Anything else the court should know? _____

[illegible]

Acknowledgement

A paralegal shall be aware of and abide by all legal authority governing confidential information in the jurisdiction in which the paralegal practices.

A paralegal may reveal confidential information only after full disclosure and with the client's written consent; or, when required by law or court order; or, when necessary to prevent the client from committing an act that could result in death or serious bodily harm.

Unless otherwise expressly authorized by the Discloser a Recipient shall retain the Confidential Information in confidence, shall not disclose the Confidential Information to any third party and shall not use or reproduce the Confidential Information for any reason other than the Stated Purpose.

Services Not Performed by FPS

Although, FPS may comment upon Client's legal documents, financial statements or other documentation in the course of performing the services hereunder, Client acknowledges that FPS is not an attorney, nor is FPS providing legal advice. Client further acknowledges that Client should consult with its own legal advisors regarding any matters requiring legal advice.

Initial and sign below

_____I the Client, understand that preparation of the actual legal documents/forms will not begin until payment is received.

_____I understand and agree that I will provide all information needed to complete forms. I understand that changes to forms and additional forms will be subject to additional charges

_____I understand that there may additional court costs and filing fees that are not associated with FPS-- Including but not limited to; mailing fees, process server and notary fees. (according to your case) Fees vary from county to county.

_____I further understand that FPS is not responsible for the outcome of my case. And that FPS is not qualified to give any legal advice, representation or counsel on my behalf in any way and agree to indemnify and hold harmless FPS staff and heirs.

Signature

Date