

STATE OF VERMONT

SUPERIOR COURT  
\_\_\_\_\_ Unit

FAMILY DIVISION  
Docket No. \_\_\_\_\_

Plaintiff

Defendant

Name	DOB	<b>v.</b>	Name	DOB
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**NOTICE OF APPEARANCE and  
INTENT TO REPRESENT MYSELF**

I intend to represent myself and hereby enter my appearance with the court. No attorney will represent me in this case unless an attorney or I notify the court otherwise.

**I understand that IT IS MY RESPONSIBILITY TO:**

- 1. Notify the Court in writing if I change my address or phone number;  
and**
- 2. Send copies of any papers I file with the court to the other party in this case.**

**All court papers may be mailed to me by first class mail at the address listed below.**

My Street Address	My Mailing Address (if different):
Town/City          State          Zip	Town/City          State          Zip
Phone Number (day)	Phone Number (day)
E Mail Address	

**ANSWER TO COMPLAINT**

I am the Defendant in this case. This is my answer to the facts in the Plaintiff's Complaint: (Please refer to the Plaintiff's Complaint and check whether you agree or disagree with the facts in each paragraph of the complaint.)

- 1. Residence**  
a) Plaintiff's residence:  Agree  Disagree    b) My residence:  Agree  Disagree
- 2. Date and Place of Marriage:**  Agree  Disagree
- 3. Grounds for Legal Separation:**  Agree  Disagree
- 4. Minor Children of the Parties:**  Agree  Disagree
- 5. Facts related to UCCJA Jurisdiction:**  Agree  Disagree

- 6. **Property, Assets and Debts:** I have listed all of the property, assets and debts that my spouse and I own either jointly or solely that are known to me, in the Financial Affidavit that I am filing with this Answer.
- 7. **Public Assistance:**  Agree  Disagree  Don't know
- 8. **Earlier Actions for Divorce, Legal Separation, or Annulment:**  Agree  Disagree
- 9. **Relief from Abuse or protective order proceedings:**  Agree  Disagree
- 10. **Military Status:**  Agree  Disagree

**If you disagree with any of the facts in Plaintiff's complaint, please write the paragraph number below and state the facts you believe to be true:**

### COUNTERCLAIM

Based on the facts stated above, I ask that the Family Court grant me: *(check each box that applies)*

- 1. Decree of Legal Separation
- 2. Parental Right and Responsibilities
  - Legal parental rights and responsibilities:
    - Shared jointly
    - Given solely to:  Myself  Plaintiff
  - Physical parental rights and responsibilities:
    - Shared jointly
    - Given solely to:  Myself  Plaintiff
- 3. Parent Child Contact for  Myself  Plaintiff
- 4. Child support, medical support and/or maintenance supplement.
- 5. Division of Property (divide our marital property, assets and debts).
- 6. Spousal Maintenance (Alimony).
- 7. Court costs.
- 8. Attorney fees.
- 9. Name change: I would like to resume my former name of:

\_\_\_\_\_.

**I hereby swear or affirm that the information above is true to the best of my knowledge and belief.**

Signature of Defendant	Date
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Signed and sworn to or affirmed before me:

Date	Signature of Notary Public	Expiration Date
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