	Aark this box if this form contains Restri	icted In	formation.		
MARYLA	% CIRCUIT COURT FOR				, MARYLAND
. X.			City/County		·
1 DICIA	Located atCourt Address		Tele	phone	
91011	Court Address		Casa	No	
			Case	110	
Plaintif	Counter-Defendant	VS.	Defendant/Co	ounter-Plaintiff	
Street A	ddress		Street Address	s	
G'. G	. 7				
City, Sta	ate, Zip Telephone		City, State, Zi	p	Telephone
E-mail			E-mail		
NOTE Inform	Tile a Notice Regarding Restricted Informations, and check the Restricted Information. Use this form to initiate a counter-claim function" box at the top of this or any other formation such as part of a social security or feed.	rmation to an ab orm you deral tax	box on this solute divorc	form. e case. Mark th	ne "Restricted or other confidential
of acco	ount/ID numbers. Visit mdcourts.gov/divor		sta	te that:	
1,	Name		, Sta	ic mat.	
1.	The plaintiff/counter-defendant and I were	re marri	ed on	Date of marriage	in
	City/County/State where married	,	Countr	y where married	
	in a □ civil □ religious ceremony.				
2.	Check all that apply:				
۷.					
	☐ I have lived in Maryland since	Mon	th/Year	············•	
	☐ My spouse has lived in Maryland sine	ce	Month/Y	 ear	
	The grounds, or legal reasons, for divorce (for a list of grounds <i>see number 13 belo</i>	e occurr			
	The grounds for divorce occurred outside of Maryland for at least six (6) months pr				
3.	I know of the following cases, or I have be cases about me, my spouse, or the child(r support, guardianship, protective order (d	en). Exa	amples includ	le cases such as	s custody, child

access), CINA, delinquency, termination of parental rights, adoption, or other cases:

				Case No	•	
<u>Court</u>	Case N	<u>0.</u>	Kind of Case	Year Filed		Status/Date of Recent Order
Attach the n	nost recent cour	t order f	or these cases		<b>-</b>	
□ We		_	of the following ch	,		
	Name	Y	ear of birth	Na	me	Year of birth
	Name	<u> </u>	ear of birth	Na	me	Year of birth
	Name	Y	ear of birth	Na	me	Year of birth
	know of the following people, who are not partic physical or legal custody, visitation (child access)  Name  Name					
***************************************						
( TI :	Name			Current Address		
6. The min	The minor child(ren) currently live(s) at		re(s) at	with		
	Name					
In the pa	The minor child(ren) has/have lived in Maryland for at least six (6) months $\square$ yes $\square$ no. In the past five (5) years, the minor child(ren) has/have lived in the following places with the following persons:					
Time	e Period		Address		Person(s) witl	rrent Address of h whom Minor en) Lived

		Case No
8.	Pai	renting Plan (Custody and Visitation Agreement) (check one):
		My spouse and I have agreed on a parenting plan(s) that we believe is/are in the best interest of the minor child(ren). <i>Attach your signed and dated parenting plan agreement.</i>
		My spouse and I have not agreed on a parenting plan(s).  See: Maryland Parenting Plan Instructions (CC-DRIN-109) and Maryland Parenting Plan Tool (CC-DR-109) or visit mdcourts.gov/parentingplans.
	It is	s in the best interest of the minor child(ren) that I have (check one selection from each line):
		$\square$ joint $\square$ primary physical custody (parenting time) of
		Name(s) of child(ren)  □ joint □ sole legal custody (decision-making authority) of
		Name(s) of child(ren)  ☐ visitation (child access or parenting time) with
9.	Chi	Name(s) of child(ren)  ild Support (check one):
		I am asking for child support and/or health insurance for the minor child(ren). If you and your spouse's combined gross monthly income (before taxes/not take-home pay) is \$30,000 or less, attach Financial Statement (Child Support Guidelines) (CC-DR-030); if the combined gross monthly income is more than \$30,000, attach Financial Statement (General) (CC-DR-031).
		Child support has been established:
		☐ in a separate court case, Case Noin
	<u>Att</u>	County and State  ach a copy of the most recent order if available.
		I am not asking for child support and/or health insurance for the minor child(ren) at this time, because
10.	□ <u>Att</u>	mony (select one):  My spouse and I have a signed and dated written agreement that covers alimony.  Each a copy of the agreement.
	It c	ean, but does not have to, include an agreement about marital property.
	H	I □ am □ am not seeking alimony, because
	If y	ou want the court to establish alimony attach a Financial Statement (General)

COCLA

and your spouse have a written agreement that covers alimony.

(Form CC-DR-031) if you want alimony. You do not need to attach a financial statement if you

11	Case No
11.	☐ My spouse and I have a signed and dated written agreement about how we will divide marital property.
	Attach a copy of the agreement. It can, but does not have to, include an agreement about alimony.
	☐ My spouse and/or I have the following property that needs to be divided by the court (check all that apply):
	<ul> <li>☐ House</li> <li>☐ Pension(s)/Retirement account(s)*</li> <li>☐ Bank account(s) and investment(s)</li> <li>☐ Motor vehicles</li> <li>☐ Other:</li> </ul>
	*NOTES:  • If you have or your spouse has a retirement or pension plan, talk to a lawyer. You may need a "domestic relations order" to transfer the marital portion of benefits from one spouse to the other. These orders are sometimes called qualified domestic relations orders (QDROs), Court Orders Acceptable for Processing (COAP), or qualifying retirement benefit court orders. If you and your spouse agree on how to divide the benefits, you can draft and file an order for the court to approve. Each plan has specific requirements that must be met for the order to be valid and accepted. A lawyer can advise you based on the plan.
	<ul> <li>Social Security benefits cannot be divided in a divorce. Contact the Social Security Administration or a lawyer for more information.</li> </ul>
12	<ul> <li>I am requesting to have use and possession of the home and/or family use personal property for the benefit of the minor child(ren) for up to three (3) years from the date of the divorce.</li> <li>I am requesting to the minor child(ren) for up to three (3) years from the date of the divorce.</li> <li>I am requesting to be restored to my former name</li> </ul>
	Full former name  If you do not request your former name at this time, you may do so later by filing a motion within 18 months after the judgment of absolute divorce was entered.)
13.	My grounds (legal reasons) for absolute divorce are (you may check more than one):
	■ Mutual Consent – My spouse and I have signed a written settlement agreement that resolves issues relating to alimony, the distribution of property (real and personal); and the care, custody, (child access/visitation), and support of minor or dependent children. Neither of us has taken any action to set aside (invalidate) the agreement.
	Attach a conv of your written, signed, and dated agreement (Form CC-DR-116, Marital

completed Child Support Guidelines Worksheet (Form CC-DR-034 for primary physical custody or CC-DR-035 for shared physical custody).

If your agreement provides for the payment of child support, you must attach a copy of the

Settlement Agreement).

	Authorize Name		
	fromName		 ne
		Address	
	Transfer of the marital share(s) of pensic submit for court approval a domestic rel Transfer of the real property jointly own	ations order to accomplish the tra	authority to draft and insfer.
			outhority to deaft and
	My share of the property or its value.  Transfer of family use personal property	,	
	To have and use the family use personal absolute divorce for the benefit of the m		s from the date of the
	To live in the family home for up to three benefit of the minor child(ren).		
(Fe	<b>operty (check all that apply):</b> (The follow form CC-DR-033) to be filed at least ten (I t able to reach a written agreement that re	(0) days before the trial date if yo esolves all property issues.)	ou and your spouse are
	alimony (attach Form CC-DR-031).		
	health insurance for the child(ren).		
	child support (attach Form CC-DR-03	0 or CC-DR-031).	
	visitation (child access or parenting time	• • •	
	joint □ sole legal custody (decision-ma		•
	joint □ primary physical custody (parer	Full former name name time) of the minor child(ren	).
	a change back to my former name,		
FOR THE	<b>SE REASONS</b> , I request <i>(check all that</i> an Absolute Divorce.	apply):	
	Irreconcilable Differences – Our marri cannot be resolved:	•	•
	Spouses who live under the same accordance with a court order are		
	of this counter-claim.	ption for six (0) months of more	before the date of fifth
	lived separate and apart, without interru	ntion for six (6) months or more l	my spouse and I have

Case No.

	Case No.
☐ A monetary award (money) based in the control of	sed on marital property.
	r written agreement into the judgment of absolute divorce.
	S
I solemnly affirm under the penalties of po- knowledge, information, and belief.	erjury that the contents of this document are true to the best of my
knowledge, information, and benefit	
Date	Signature of Defendant/Counter-Plaintiff/Attorney Attorney Number
Date	Signature of Defendant/Counter-Plaintiff/Attorney Attorney Number
	Printed Name
	Street Address
	City, State, Zip
	Telephone Number
	·
	Fax
	E-mail
	E-man
CE	ERTIFICATE OF SERVICE
I certify that on	a copy of this counter-claim and any attached documents,
were $\square$ mailed, postage prepaid, OR $\square$ h	and-delivered to:
Name	Street Address
	City, State, Zip
Attorney's Name (if applicable)	Street Address
	City State 7in
	City, State, Zip
Date	Signature of Party Serving
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