

STATE OF SOUTH DAKOTA)
 :SS
 COUNTY OF _____)

IN CIRCUIT COURT
 _____ JUDICIAL CIRCUIT

<p>_____, Plaintiff,</p> <p style="text-align: center;">vs.</p> <p>_____, Defendant</p>	<p>DIV _____</p> <p style="text-align: center;">COMPLAINT (WITHOUT MINOR CHILDREN)</p>
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- 1. Plaintiff's full legal name is _____ and his/her date of birth is _____.
- 2. Plaintiff is a resident of _____ County, State of _____.
- 3. Defendant's full legal name is _____ and his/her date of birth is _____.
- 4. Defendant is a resident of _____ County, State of _____.
- 5. Plaintiff and Defendant were married on _____ (date) in _____ (city and state). If the parties are living apart, the date upon which they began to do so is _____.
- 6. Is Plaintiff an active duty member of the armed forces? Yes _____
No _____
- Is Defendant an active duty member of the armed forces? Yes _____
No _____
- 7. Irreconcilable differences have arisen between the Plaintiff and Defendant which necessitates the dissolution of the marriage. Alternatively further grounds for dissolution of marriage exist under SDCL 25-4-2, subsection:
 - ___ (1) Adultery;
 - ___ (2) Extreme cruelty;
 - ___ (3) Willful desertion;
 - ___ (4) Willful neglect;
 - ___ (5) Habitual intemperance; or
 - ___ (6) Conviction of felony.

8. We do not have any children which have been born to or adopted by the parties. Neither spouse is currently pregnant.
9. The parties have accumulated property and/or debts during the course of the marriage which must be equitably divided. Yes _____ No _____
10. Plaintiff seeks spousal support (alimony). Yes _____ No _____

WHEREFORE, Plaintiff prays for Judgment as follows:

1. For a Judgment and Decree of Divorce dissolving the marriage of the parties;
2. For an equitable division of the marital property and debts;
3. That Plaintiff's / Defendant's (*circle one*) last name be restored to:
_____. Date of birth:_____;
4. For alimony, if requested above; and
5. For such other and further relief as may be equitable and just.

Dated this _____ day of _____, 20_____.

Plaintiff's Signature

Print Plaintiff's name

Mailing Address

City/State/Zip

Phone Number

VERIFICATION

STATE OF SOUTH DAKOTA)
 : SS
COUNTY OF _____)

Plaintiff, being first duly sworn, deposes and states that he or she verifies the facts expressed within the Complaint (Without Minor Children) are true.

Dated _____, 20_____.

Plaintiff's Signature

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public/Clerk of Courts
If Notary, my commission expires:_____

(SEAL)