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- I selected this document for myself and I completed it without paid assistance.
- I paid or will pay money to _____ for assistance in preparing this form.

DATED this _____ day of _____, 20_____.

 Petitioner Respondent, Signature

ORDER

- Allowed.
- Denied.

DATED this _____ day of _____, 20_____.

Circuit Court Judge

Print Name

Submitted by:

 Petitioner, Respondent Print Name Address or Contact Address

City, State, Zip Telephone or Contact Telephone