

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): JODEANE BARLOW FARRELL, ESQ. SBN: 68655 LAW OFFICES OF JODEANE BARLOW FARRELL 1632 MCGAW AVENUE, SUITE 100 IRVINE, CALIFORNIA 92614		FOR COURT USE ONLY FILED LOS ANGELES SUPERIOR COURT JUL 30 2010 JOHNIA CLARKE, CLERK BY ANDRE WILLIAMS, DEPUTY
TELEPHONE NO.: 949-922-8866 E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): HEIDI MONTAG	FAX NO. (Optional):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 1725 MAIN STREET MAILING ADDRESS: 1725 MAIN STREET CITY AND ZIP CODE: SANTA MONICA, CALIFORNIA 90401 BRANCH NAME: WEST JUDICIAL DISTRICT		
MARRIAGE OF PETITIONER: HEIDI MONTAG RESPONDENT: SPENCER PRATT		
PETITION FOR <input checked="" type="checkbox"/> Dissolution of Marriage <input type="checkbox"/> Legal Separation <input type="checkbox"/> Nullity of Marriage		CASE NUMBER: SI028564
<input checked="" type="checkbox"/> AMENDED		

1. RESIDENCE (Dissolution only) ☒ Petitioner ☐ Respondent has been a resident of this state for at least six months and of this county for at least three months immediately preceding the filing of this *Petition for Dissolution of Marriage*.

2. STATISTICAL FACTS

a. Date of marriage: 5/25/09

c. Time from date of marriage to date of separation (specify):

b. Date of separation: 5/25/10

Years: 1

Months: 0

3. DECLARATION REGARDING MINOR CHILDREN (include children of this relationship born prior to or during the marriage or adopted during the marriage):

a. ☒ There are no minor children.

b. ☐ The minor children are:

Child's name

Birthdate

Age

Sex

☐ Continued on Attachment 3b.

c. If there are minor children of the Petitioner and Respondent, a completed *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105) must be attached.

d. ☐ A completed voluntary declaration of paternity regarding minor children born to the Petitioner and Respondent prior to the marriage is attached.

4. SEPARATE PROPERTY

Petitioner requests that the assets and debts listed ☐ in *Property Declaration* (form FL-160) ☐ in Attachment 4

☒ below be confirmed as separate property.

Item

Confirm to

THE FULL NATURE AND EXTENT OF PETITIONER'S SEPARATE PROPERTY ESTATE IS UNKNOWN AT THIS TIME AND SHE SHALL SUBMIT A SEPARATE PROPERTY DECLARATION WHEN ALL SUCH PROPERTY IS ASCERTAINED. KNOWLEDGE OF SEPARATE PROPERTY HOWEVER, CONSISTS OF PERSONAL EFFECTS AND POST-SEPARATION EARNINGS.

NOTICE: You may redact (black out) social security numbers from any written material filed with the court in this case other than a form used to collect child or spousal support.

MARRIAGE OF (last name, first name of parties):
IN RE MARRIAGE OF MONTAGE/PRATT

CASE NUMBER:
SD028564

5. DECLARATION REGARDING COMMUNITY AND QUASI-COMMUNITY ASSETS AND DEBTS AS CURRENTLY KNOWN

- a. ☐ There are no such assets or debts subject to disposition by the court in this proceeding.
b. ☒ All such assets and debts are listed ☐ in Property Declaration (form FL-160) ☐ in Attachment 5b.
☒ below (specify):

THE FULL NATURE AND EXTENT OF THE COMMUNITY ESTATE IS UNKNOWN TO PETITIONER AT THIS TIME AND SHE SHALL FILE A COMMUNITY PROPERTY DECLARATION WHEN SAME BECOMES ASCERTAINED.

6. Petitioner requests

- a. ☒ dissolution of the marriage based on
(1) ☒ irreconcilable differences. (Fam. Code, § 2310(a).)
(2) ☐ incurable insanity. (Fam. Code, § 2310(b).)
b. ☐ legal separation of the parties based on
(1) ☐ irreconcilable differences. (Fam. Code, § 2310(a).)
(2) ☐ incurable insanity. (Fam. Code, § 2310(b).)
c. ☐ nullity of void marriage based on
(1) ☐ incestuous marriage. (Fam. Code, § 2200.)
(2) ☐ bigamous marriage. (Fam. Code, § 2201.)
d. ☐ nullity of voidable marriage based on
(1) ☐ petitioner's age at time of marriage. (Fam. Code, § 2210(a).)
(2) ☐ prior existing marriage. (Fam. Code, § 2210(b).)
(3) ☐ unsound mind. (Fam. Code, § 2210(c).)
(4) ☐ fraud. (Fam. Code, § 2210(d).)
(5) ☐ force. (Fam. Code, § 2210(e).)
(6) ☐ physical incapacity. (Fam. Code, § 2210(f).)

7. Petitioner requests that the court grant the above relief and make injunctive (including restraining) and other orders as follows:

- | | Petitioner | Respondent | Joint | Other |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Legal custody of children to | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Physical custody of children to | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Child visitation be granted to | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- As requested in form: ☐ FL-311 ☐ FL-312 ☐ FL-341(C) ☐ FL-341(D) ☐ FL-341(E) ☐ Attachment 7c.
- d. ☐ Determination of parentage of any children born to the Petitioner and Respondent prior to the marriage.
e. Attorney fees and costs payable by ☐ ☐
f. Spousal support payable to (earnings assignment will be issued) ☐ ☐
g. ☒ Terminate the court's jurisdiction (ability) to award spousal support to Respondent.
h. ☒ Property rights be determined.
i. ☒ Petitioner's former name be restored to (specify): MONTAG
j. ☐ Other (specify):

☐ Continued on Attachment 7j.

8. Child support—If there are minor children born to or adopted by the Petitioner and Respondent before or during this marriage, the court will make orders for the support of the children upon request and submission of financial forms by the requesting party. An earnings assignment may be issued without further notice. Any party required to pay support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent.

9. I HAVE READ THE RESTRAINING ORDERS ON THE BACK OF THE SUMMONS, AND I UNDERSTAND THAT THEY APPLY TO ME WHEN THIS PETITION IS FILED.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

HEIDI MONTAG 7/30/10
(TYPE OR PRINT NAME)

Date:

JODEANE B. FARRELL, ESO.
(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

(SIGNATURE OF ATTORNEY FOR PETITIONER)

NOTICE: Dissolution or legal separation may automatically cancel the rights of a spouse under the other spouse's will, trust, retirement plan, power of attorney, pay on death bank account, survivorship rights to any property owned in joint tenancy, and any other similar thing. It does not automatically cancel the right of a spouse as beneficiary of the other spouse's life insurance policy. You should review these matters, as well as any credit cards, other credit accounts, insurance policies, retirement plans, and credit reports to determine whether they should be changed or whether you should take any other actions. However, some changes may require the agreement of your spouse or a court order (see Family Code sections 231–235).

MC-050

ATTORNEY OF PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): JODEANE BARLOW FARRELL, ESQ. SBN: 68655 LAW OFFICES OF JODEANE BARLOW FARRELL 1632 MCGAW AVENUE, SUITE 100 IRVINE, CALIFORNIA 92614 TELEPHONE NO.: 949-922-8866 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): HEIDI MONTAG SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 1725 MAIN STREET MAILING ADDRESS: 1725 MAIN STREET CITY AND ZIP CODE: SANTA MONICA, CALIFORNIA 90401 BRANCH NAME: WEST JUDICIAL DISTRICT CASE NAME: IN RE MARRIAGE OF MONTAG/PRATT		FOR COURT USE ONLY FILED LOS ANGELES SUPERIOR COURT JUL 30 2010 JOHN A. CLARKE, CLERK <i>Andre Williams</i> BY ANDRE WILLIAMS, DEPUTY
SUBSTITUTION OF ATTORNEY—CIVIL (Without Court Order)		
CASE NUMBER: SD028564		

THE COURT AND ALL PARTIES ARE NOTIFIED THAT (name): HEIDI MONTAG

makes the following substitution:

1. Former legal representative ☒ Party represented self ☐ Attorney (name):
2. New legal representative ☐ Party is representing self* ☒ Attorney
- a. Name: JODEANE BARLOW FARRELL b. State Bar No. (if applicable): 68655
- c. Address (number, street, city, ZIP, and law firm name, if applicable): 1632 MCGAW AVENUE, SUITE 100, IRVINE, CALIFORNIA 92614
- d. Telephone No. (include area code): 949-922-8866
3. The party making this substitution is a ☐ plaintiff ☐ defendant ☒ petitioner ☐ respondent ☐ other (specify):

*NOTICE TO PARTIES APPLYING TO REPRESENT THEMSELVES

- Guardian
- Personal Representative
- Guardian ad litem
- Conservator
- Probate fiduciary
- Unincorporated association
- Trustee
- Corporation

If you are applying as one of the parties on this list, you may NOT act as your own attorney in most cases. Use this form to substitute one attorney for another attorney. SEEK LEGAL ADVICE BEFORE APPLYING TO REPRESENT YOURSELF.

NOTICE TO PARTIES WITHOUT ATTORNEYS

A party representing himself or herself may wish to seek legal assistance. Failure to take timely and appropriate action in this case may result in serious legal consequences.

4. I consent to this substitution.

Date: 7/30/10

HEIDI MONTAG

(TYPE OR PRINT NAME)

▶ *Heidi Montag*
 (SIGNATURE OF PARTY)

5. ☒ I consent to this substitution.

Date: 7/30/10

HEIDI MONTAG

(TYPE OR PRINT NAME)

▶ *Heidi Montag*
 (SIGNATURE OF FORMER ATTORNEY)

6. ☒ I consent to this substitution.

Date: 7/30/10

JODEANE B. FARRELL, ESQ.

(TYPE OR PRINT NAME)

▶ *Jodeane Farrell*
 (SIGNATURE OF NEW ATTORNEY)

(See reverse for proof of service by mail)

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MC-050

CASE NAME: IN RE MARRIAGE OF MONTAG/PRATT

CASE NUMBER:

SD028564

PROOF OF SERVICE BY MAIL
Substitution of Attorney—Civil

Instructions: After having all parties served by mail with the Substitution of Attorney—Civil, have the person who mailed the document complete this Proof of Service by Mail. An unsigned copy of the Proof of Service by Mail should be completed and served with the document. Give the Substitution of Attorney—Civil and the completed Proof of Service by Mail to the clerk for filing. If you are representing yourself, someone else must mail these papers and sign the Proof of Service by Mail.

1. I am over the age of 18 and not a party to this cause. I am a resident of or employed in the county where the mailing occurred. My residence or business address is (specify): 1632 McGAW AVE., SUITE 100, IRVINE, CA 92614
2. I served the Substitution of Attorney—Civil by enclosing a true copy in a sealed envelope addressed to each person whose name and address is shown below and depositing the envelope in the United States mail with the postage fully prepaid.

(1) Date of mailing: 7/30/10

(2) Place of mailing (city and state): IRVINE, CA

3. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: 7/30/10

BEKKI W. PRATHER

(TYPE OR PRINT NAME)

(SIGNATURE)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

4. a. Name of person served: SPENCER PRATT
- b. Address (number, street, city, and ZIP): 333 LOMBARD AVE., PACIFIC PALMSADES, CA 90272
- c. Name of person served:
- d. Address (number, street, city, and ZIP):
- e. Name of person served:
- f. Address (number, street, city, and ZIP):
- g. Name of person served:
- h. Address (number, street, city, and ZIP):
- i. Name of person served:
- j. Address (number, street, city, and ZIP):

☐ List of names and addresses continued in attachment.