DISSOLUTION ANSWER

JD-FM-160 Rev. 6-14
P.B. § 25-9

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov

COURT USE ONLY
ANSWER

Instructions

Fill out the form below and file it with the Court Clerk. If you are the defendant, you must also file an Appearance form (JD-CL-12). You may also file a Dissolution of Marriage Cross-Complaint (JD-FM-159) or Dissolution of Civil Union Cross-Complaint (JD-FM-159A) to tell the Court what you want the judge to order.

- ☐ Answer to Divorce (Dissolution of Marriage) Complaint
- ☐ Answer to Dissolution of Civil Union Complaint
- ☐ Answer to Divorce (Dissolution of Marriage) Cross-Complaint
- ☐ Answer to Dissolution of Civil Union Cross-Complaint

Judicial District of	At *(Town)*	Return date *(Month, day, year)*

Plaintiff's name *(Last, first, middle initial)*	Defendant's name *(Last, first, middle initial)*	Docket number

Number each line in the chart below to match the numbered paragraphs in the Complaint or Cross-Complaint *(example: 1, 2, 3, 4, 5a, 5b)*. Use as many lines as you need. For each paragraph, mark an "X" for Agree, Disagree, or Do Not Know.

Paragraph number	Agree	Disagree	Do not know
	☐	☐	☐
	☐	☐	☐
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I certify that a copy of this document was mailed or delivered electronically or non-electronically to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties receiving electronic delivery on:

Date mailed or delivered	Signed *(Attorney or self-represented party)*	Printed Name
	▶	

Address *(Number, street, town or city, zip code)*

Name and address of each party and attorney that copy was mailed or delivered to*

**If necessary, attach additional sheet or sheets with name and address which the copy was mailed or delivered to.*

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at *www.jud.ct.gov/ADA.*

Print Form Reset Form