

STATE OF INDIANA )  
 )  
COUNTY OF ELKHART )

IN THE ELKHART SUPERIOR COURT 6

CASE NO: \_\_\_\_\_

IN RE THE MARRIAGE OF:

\_\_\_\_\_  
Name of Filing Spouse  
Select One:  Husband  Wife

And

\_\_\_\_\_  
Name of Responding Spouse  
Select One:  Husband  Wife

**APPEARANCE BY UNREPRESENTED PERSON IN CIVIL CASE**

*This Appearance Form must be filed on behalf of every party in a civil case.*

1. My name is \_\_\_\_\_ and I am:

Initiating (filing)

Responding (answering)

in this case and I am not represented by an attorney.

2. My contact information for receiving legal service of documents and case information as required by Court Rules is:

Address:

Email address: \_\_\_\_\_

*I will accept service at the above email address.*

Phone: \_\_\_\_\_

3. This is a DC (with children) DN (without children) case type as defined in Indiana Administrative Rule 8(B)(3).

4. There are related cases:

Yes  No

If yes, please indicate the following for related cases:

Case No.: \_\_\_\_\_ Parties: \_\_\_\_\_

Case No.: \_\_\_\_\_ Parties: \_\_\_\_\_

Case No.: \_\_\_\_\_ Parties: \_\_\_\_\_

Case No.: \_\_\_\_\_ Parties: \_\_\_\_\_

/s/ \_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

### CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this Appearance to the other person's attorney, or to the other person if they are not represented by an attorney, via:

- Registered mail at this address: \_\_\_\_\_
- Certified mail at this address: \_\_\_\_\_
- Sheriff for \$28.00
- E-Service per Trial Rule 86 at this email address: \_\_\_\_\_
- Hand delivery at this address: \_\_\_\_\_
- Other: \_\_\_\_\_

/s/ \_\_\_\_\_  
Signature

\_\_\_\_\_  
Date