

REQUEST FOR STIPULATION & ORDER FOR CHILD SUPPORT

Case # _____

Do you receive public assistance? ___ food ___ cash assistance ___ Medicaid

Requested child support amount \$_____ per month. Arrears to waive \$_____

Children names & how many overnights they spend with payer

_____	_____
_____	_____
_____	_____
_____	_____

PLAINTIFF'S INFORMATION

Name: _____ Phone # _____

Address: _____

How many other children (under 18) do you have? _____

Financial Information

Employer Name: _____

Wage \$_____ Hours worked per week #_____ OR salary \$_____ per_____

How many exemptions do you claim on taxes? _____

How do you file taxes? ___ single ___ Head of household ___ married

Do you have mandatory retirement or union dues? ___ how much per pay \$_____

Do you have any other deductions for your work (uniforms, tools) \$_____

Child care / Day care

Do you pay for child care? ___ Yes ___ No

What is the cost per week \$_____ for child _____

Health Insurance

Cost of Insurance \$_____ per _____

How many children (under 18) on insurance _____ How many adults _____

Plaintiff's signature

Date

DEFENDANT'S INFORMATION

Name: _____ Phone # _____

Address: _____

How many other children (under 18) do you have? _____

Financial Information

Employer Name: _____

Wage \$ _____ Hours worked per week # _____ OR salary \$ _____ per _____

How many exemptions do you claim on taxes? _____

How do you file taxes? ___ single ___ Head of household ___ married

Do you have mandatory retirement or union dues? ___ how much per pay \$ _____

Do you have any other deductions for your work (uniforms, tools) \$ _____

Child care / Day care

Do you pay for child care? ___ Yes ___ No

What is the cost per week \$ _____ for child _____

Health Insurance

Cost of Insurance \$ _____ per _____

How many children (under 18) on insurance _____ How many adults _____

Defendant's signature

Date

This form must be completely filled out for the request to be processed. Both parties will be notified to come to the office to sign the prepared order. If both parties do not sign the order it will NOT be entered with the court. If there is a reason that you cannot come into the office please state the reason, and the Family Court Specialist will contact you.

Reason: _____
