CUSTODY REGISTRATION AND MODIFICATION PACKET

IMPORTANT NOTE ABOUT THIS PACKET

"Plaintiff": The first and last name of the person who is filing this action

"Defendant": The other party's first and last name

"Case Number": Leave this field blank if you are preparing to file a new case

You need a certified copy of the custody order. Georgia can modify an order from another state under the following circumstances:

- 1. The Court that issued the order has released its jurisdiction over custody; or
- 2. Neither of parents live in the state that issued the last order; and
 - a) The child has been a resident of Georgia for the past six months or longer.

OPTIONAL FORM:

If you are unable to afford the filing fees, you may ask the Court to waive the fees by completing the <u>Affidavit of Indigence and Eligibility to Proceed in Forma Pauperis (Pauper's Packet)</u> and submit along with your other completed forms to the Clerk of Superior Court.

General Civil and Domestic Relations Case Filing Information Form

| | | ☐ Superior or | r 🗆 Stat | te Court | of | | County | | |
|--------|---|---|------------|--------------|----------------|--|--|-------------------------------|---------------|
| | For Clerk Use O Date Filed | • | _ | | Case Numbe | er | | | |
| Plaint | iff(s) | | | | Defendant | t(s) | | | |
| Last | First | Middle I. | Suffix | Prefix | Last | First | Middle I. | Suffix | Prefix |
| Last | First | Middle I. | Suffix | Prefix | Last | First | Middle I. | Suffix | Prefix |
| Last | First | Middle I. | Suffix | Prefix | Last | First | Middle I. | Suffix | Prefix |
| Last | First | Middle I. | Suffix | Prefix | Last | First | Middle I. | Suffix | Prefix |
| Plaint | iff's Attorney | | | | Bar Nun | nber | Self- | Represe | nted 🗆 |
| | | | Chec | k One C | Case Type in (| One Box | | | |
| | Civil Ap Contrac Garnish General Habeas Injuncti Landlor Medical Product Real Pro | obile Tort peal t ment Tort Corpus on/Mandamus/ d/Tenant Malpractice To | | Writ | | Maintenar Family Vio Paternity/ Support – Support – Other Don -Judgment – G Contempt Non-paym medical su Modificatio | n/Divorce/Sepa nce lence Petition Legitimation IV-D Private (non-IV nestic Relations Check One Case nent of child su | /-D) s e Type pport, | |
| | Check if the action of the same part | ies, subject matt | | | | vide a case nur | ling in this cour | t involvin | g some or all |
| | I hereby certify t | | nts in th | is filina. i | | | exhibits, satisfy t | the requi | rements for |
| | redaction of pers | | | _ | • | | ,y · | | , |
| | Is an interpreter | needed in this c | ase? If s | o, provid | le the languag | ge(s) required. | | | |
| | | | | | | | Language(s) F | Required | |
| | Do you or your o | client need any o | disability | accomn | nodations? If | so, please desc | cribe the accom | modatior | request. |

IN THE SUPERIOR COURT OF GWINNETT COUNTY

STATE OF GEORGIA

| | | CIVIL ACTION NUMBER: |
|-------------------------------|--|---|
| | PLAINTIFF | |
| | VS. | |
| | | |
| | DEFENDANT | |
| | | SUMMONS |
| ТО ТНЕ АВО | VE NAMED DEFENDANT: | |
| You are her and address is | | e Clerk of said court and serve upon the Plaintiff's attorney, whose name |
| | | |
| | | n you, within 30 days after service of this summons upon you, exclusive of llt will be taken against you for the relief demanded in the complaint. |
| This | day of | |
| | | Richard T. Alexander, Jr., Clerk of Superior Court |
| | | By Deputy Clerk |
| INSTRUCTIO | NS: Attach addendum sheet for additional | parties if needed, make notation on this sheet if addendum sheet is used. |

SC-1 Rev. 2011

| Plaintiff/Petitioner | | |
|----------------------|-----------------|----------|
| v. | | |
| | Civil Action No | <u> </u> |
| Defendant/Respondent | | |

STANDING ORDER: CHILD SUPPORT AND PERMANENT PARENTING PLANS

This Order applies to all domestic actions involving child support and/or custody of a minor child or minor children. These domestic actions include, but are not limited to: divorce, modification of child support, modification of custody, separate maintenance cases that involve children, legitimations and paternity cases.

CHILD SUPPORT COMPUTATION REQUIREMENTS AND PROCEDURES:

- 1. As of January 1, 2007, Child Support Computation REQUIRES the use of the internet *and/or* the use of an electronic worksheet downloaded to a computer.
- 2. Parties and/or their lawyers should go to http://www.georgiacourts.org/csc/ to find the proper electronic worksheet. Parents should use The Guided Electronic Worksheet. Lawyers, Mediators, and other Professionals should use The Practitioner's Electronic Worksheet. Anyone can use The Downloadable Electronic Worksheet. Alternatively, go to https://www.services.georgia.gov/dhr/cspp/do/public/SupportCalc to find your proper electronic worksheet.
- 3. Uniform Superior Court Rule 24 has been amended and compliance therewith is required. See http://www.georgiacourts.org/courts/superior/rules/rule 24.html
- 4. Completion of the form CHILD SUPPORT ADDENDUM, available from the Clerk of Court, is REQUIRED anytime a child support Order is requested.

 http://www.gwinnettcourts.com/documents/Filing//child%20support%20addendum.pdf
- 5. All final judgments involving child support and agreements furnished to the Court for approval and/or entry must comply with the drafting mandates of O.C.G.A. §19-6-12 & 19-6-15. A completed child support worksheet shall also be filed with the Clerk of Court, or submitted to the Court in accordance with the provisions of O.C.G.A. § 19-6-15(m)(1) to be attached and/or incorporated into any final judgment or order. The following form is available from the Clerk of Court for use: FINAL JUDGMENT AND DECREE OF DIVORCE http://www.gwinnettcourts.com/documents/Filing//fjd%20with%20children.pdf
- 6. Pursuant to O.C.G.A. § 19-6-31, 32, & 33, the recipient of child support has the express right, without notice to the other party, at the time any child support order is entered or at any time thereafter, to submit a separate Income Deduction Order for Award of Child Support to the Court for immediate entry.

PERMANENT PARENTING PLANS

Pursuant to O.C.G.A. § 19-9-1, and U.S.C.R 24.10, in all cases in which the custody of any child is at issue between the parents, each parent shall prepare a parenting plan or the parties may jointly submit a parenting plan. The final decree in any legal action involving the custody of a child, including modification actions, shall incorporate a permanent parenting plan or written settlement agreement containing such permanent parenting plan. This requirement may also be satisfied by completion of the form PERMANENT PARENTING PLAN, available from the Clerk of Court. See, http://www.gwinnettcourts.com/documents/filing/PermanentParentingPlanOrder.pdf

The terms and conditions hereof may be modified or amended by subsequent order of any judge of this Court or any judge sitting by designation in this Court in any individual case.

SO ORDERED,

| MELODIE SNELL CONNER, Chief Judge | DEBRA K. TURNER, Judge |
|-----------------------------------|----------------------------|
| R. TIMOTHY HAMIL, Judge | RONNIEY BATCHELOR, Judge |
| TOM DAVIS, Judge | WARREN DAVIS, Judge |
| Jalen E. BEYERS, Judge | KATHRYN M. SCHRADER, Judge |
| GEORGE HUTCHINSON, III. Judge | RANDOLPH G. RICH, Judge |

| Plaint | ntiff/Petitioner | Civil Action No. |
|--------|--|--|
| ٧. | | |
| Defer | endant/Respondent | |
| | | • |
| | NAVIGATING FAMILY CHANC | BE PARENTING SEMINAR |
| nartie | Order applies to all domestic actions involving a chies are involved in a separate maintenance, paterniterce and any other domestic action, excluding domestic | y action, change of custody, visitation, legitimation, |
| ORD | DERED that: | |
| 1. | All parties successfully complete a parenting wo Office of the Courts. | orkshop sponsored by the circuit's Administrative |
| 2. | The program shall be successfully completed wupon the original defendant. | vithin 31 days of service of the original complaint |
| 3. | Appropriate action, including but not limited to c successfully complete the workshop pursuant to | contempt, may be taken upon a party's failure to o this Order. |
| 4. | For good cause shown, the requirement of comindividual cases. | npletion of this workshop may be waived in |
| M | Albu Sull Ouur MELODIE SNELL CONNER, Chief Judge | DEBRA K. TURNER, Judge |
| | Barrie | ROWNER BATCHELOR, Judge |
| < | R. TIMOTHY HAMIL, Judge | RONNIE K. BATCHELOR, Judge |
| | TOM DAVIS, Judge | WARREN DAVIS, Judge |
| G | KARENE, BEYERS, Judge | KATHRYNY SCHRADER, Judge |
| | minter | |
| | GEORGE F. HUTCHINSON, III, Judge | RANDOLPH G. RICH, Judge |
| | 11 | 1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |

| Petitioner, v. | Civil Action File No.: |
|---|---|
| Respondent. | |
| | OR REGISTRATION AND ON OF CUSTODY ORDER |
| My name is this petition. In support of my case, I s | and I am representing myself in state the following: |
| 1. Jurisdiction and Venue: [Check only one of the following | ng, either (a) or (b).] |
| ☐ (a) The Respondent is a resident the jurisdiction of this Co | dent of Gwinnett County, Georgia and is subject to ourt. |
| but I live in Gwinnett Cou | lent of County, Georgia, unty. The Respondent has acknowledged service to the jurisdiction and venue of this Court. |
| 2. Service of Process: The Responsation 11-4, following manner: [Check only one of the following t | ondent shall be served as provided under OCGA §9- ng, either (a) or (b).] |
| <u>-</u> | owledged service of process. I am filing the vice (which has been signed by the Respondent) |
| \Box (b) The Respondent may be so Respondent's \Box home \Box | served by the Sheriff's Department at the work address, which is: |

| The Respondent retherefore be served 10-72. Service sha | [Check only if the Respondent resides outside of Gwinnett Count The Respondent resides outside of Gwinnett County, and shall therefore be served by second original, as provided under OCGA 10-72. Service shall be made by the Sheriff's Department in the county where the Respondent resides. | | | | |
|---|--|--------------------|-------------------|--|--|
| Minor Children: | - | | | | |
| The Respondent and I are the pa | arents of | minor childre | en, listed below: | | |
| Name of Child | | Male / Female | Year of Birth | | |
| <u> </u> | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Children's Current Residence | e: | | | | |
| Child(ren's current address: | | | | | |
| City, State ZIP | | | | | |
| County: | | | | | |
| The child(ren) has/have lived a approximately (month and year | | ss since | | | |
| Children's Past Residences: | | | | | |
| During the past five years, the raddresses: | ninor childre | en have lived at t | he following | | |

| During the past f | |
|--|--|
| | five years, the children have lived with the following adults: |
| Name of Person | Person's Current Address |
| | |
| | |
| | |
| | |
| | |
| D | |
| Another state ent | Determination: tered a prior order concerning child custody. The information order is as follows: |
| Another state ent | tered a prior order concerning child custody. The information |
| Another state ent concerning that of | tered a prior order concerning child custody. The information order is as follows: |
| Another state ent concerning that of Order: | tered a prior order concerning child custody. The information order is as follows: |
| Another state ent concerning that of Date of Order: State: | tered a prior order concerning child custody. The information order is as follows: |

| | Proceedings That Could Affect Custody of Visitation in This Case: ek only one, either (a) or (b).] |
|--------|---|
| □ (a) | I do not have any information of any proceeding that could affect this case, including proceedings for enforcement and proceedings relating to family violence, protective orders, termination of parental rights, and adoptions in this or any other state. |
| □ (b) | I have information about a proceeding that could affect this case, including proceedings for enforcement and proceedings relating to family violence, protective orders, termination of parental rights, or adoptions in this or another state. The court, the case number and the nature of the proceeding are as follows: |
| | rs Claiming Custody or Visitation: ck only one of these, either (a) or (b).] |
| □ (a) | I do not know of any person who is not a party to this case, who has physical custody of the minor children or who claims to have custody or visitation rights with respect to the children. |
| □ (b) | I know of someone who is not a party to this case who has physical custody of the minor children or who claims to have custody or visitation right with respect to the children. The names and present addresses of the person(s) are: |
| | · |
| circur | the date of the prior custody determination, there has been a change in instances which materially affects the welfare of the minor children. ** ** ** ** ** ** ** ** ** ** ** ** ** |
| □ (a) | The Respondent has consented to the modification of custody. I am filing |

| | the <i>Consent</i> (which has been signed by the Respondent) with this Petition. |
|-------------|--|
| □ (b) | The minor children want to live to me and have signed an <i>Affidavit of Custody Election</i> . I am filing the <i>Affidavit</i> with this petition. |
| □ (c) | The Respondent was awarded physical custody of the minor children in the prior custody determination, but the minor children have been living with me since |
| □ (d) | The Respondent is unable to care for the children because: |
| | |
| | · |
| set fo | I Custody and Visitation: I believe that custody and visitation arrangement orth in the attached Permanent Parenting Plan is in the best interests of the (ren). Custody and visitation should be ordered as set forth in the attached ating Plan. |
| [Che | Support: ck only one of these, either (a), (b), (c) or (d) if you are requesting a fication of child support.] |
| □ (a) | |
| □ (b) | The Respondent has income or is capable of earning sufficient money to support the minor child(ren). |
| | · · · · · · · · · · · · · · · · · · · |
| □ (c) | support the minor child(ren). I have income or I am capable of earning sufficient money to support the minor child(ren). |
| □ (c) □ (d) | support the minor child(ren). I have income or I am capable of earning sufficient money to support the minor child(ren). I am not asking the Court to address this issue in this case. |

11.

□ 12.

| | ck all that apply.] | ing. | |
|--------|--|--|--|
| □ (a) | That the attached Custody C | rder be registered and filed as a foreign judgment; | |
| □ (b) | | upon the Respondent and provide him/her with an alidity of the registered order; | |
| □ (c) | That a Rule Nisi be schedul | ed to decide on the relief I have requested: | |
| □ (d) | That the custody and visitar Paragraph 11; | on for the child(ren) be ordered according to | |
| □ (e) | That the prior child support order be modified if the prior child custody determination is modified; | | |
| □ (f) | That the Court order the parties to participate in mediation to try to resolve this matter; | | |
| □ (g) | That the Respondent be req | tired to pay all costs of this action; and | |
| □ (h) | That the Court order any a | d all other relief that the Court finds appropriate. | |
| | | | |
| | | | |
| Dated: | : | | |
| | | Petitioner <i>Pro se</i> [signature] | |
| | Nai | e: | |
| | Ado | ress: | |
| | | | |
| | ~- | City, State ZIP | |
| | Pho | e: | |
| | Em | 1: | |

| Petitioner, v. | Civil Action File No.: |
|---|--|
| | |
| Respondent. | |
| VERIFI | ICATION |
| I am the Petitioner filing this action. | I swear or affirm that I have read the <i>Petition</i> |
| for Registration and Modification of Custod | y and that the facts contained within my |
| Complaint are true and correct. | |
| | Petitioner [signature] |
| | 1 Cittioner [signature] |
| | |
| SWORN AND AFFIRMED before me this | |
| day of20 | <u>_</u> . |
| | |
| | |
| NOTARY PUBLIC | |

SELECT AND COMPLETE A PARENTING PLAN

The parenting plan includes required language and provisions required by Georgia law.

Options:

1. Blank parenting plan

Select your own provisions based on your family's special circumstances.

2. **Standard parenting plan**

Includes provisions such as joint legal custody, alternating weekends, alternating holidays and two weeks of summer vacation. You may customize provisions as necessary.

3. Long distance parenting plan

Includes provisions for situations where the non-custodial parent lives out of state.

4. <u>Sole custody to petitioner</u>

This plan is intended for the following situations:

- ➤ The non-custodial parent cannot be located
- > The non-custodial parent is incarcerated
- ➤ The Defendant is not the biological father of the child(ren) born since you married.
 - o If your spouse is the biological/adoptive parent of any of the other children, you will need to select a 2nd Parenting Plan from the options above.
- 5. **Joint legal and joint physical (50/50) custody.** Attorney consultation is recommended.

Visit the Parenting Plan page located at:

http://gwinnettflc.atlantalegalaid.org/child-custody/parenting-plans/

| Defendant. DOMESTIC RELATIONS FINANCIAL AFFIDAVIT 1. I swear and affirm under oath that the following financial information is true and complete: My Name: Other Party's Name: Date of Marriage: Names and birth dates of children for whom support is to be determined in this action: Name Year of Birth Resides with Names and ages of my other children (under the age of 18): Name Age Resides with | | |
|---|-------------------------------------|---|
| 1. I swear and affirm under oath that the following financial information is true and complete: My Name: My Age: Other Party's Name: Other Party's Age Date of Marriage: Date of Separation: Names and birth dates of children for whom support is to be determined in this action: Name Year of Birth Resides with Names and ages of my other children (under the age of 18): | • | |
| My Name: Other Party's Name: Date of Marriage: Names and birth dates of children for whom support is to be determined in this action: Name Year of Birth Resides with Names and ages of my other children (under the age of 18): | | TIC RELATIONS FINANCIAL AFFIDAVIT |
| Other Party's Name: Date of Marriage: Names and birth dates of children for whom support is to be determined in this action: Name Year of Birth Resides with Names and ages of my other children (under the age of 18): | | ath that the following financial information is true and |
| Other Party's Name: Date of Marriage: Names and birth dates of children for whom support is to be determined in this action: Name Year of Birth Resides with Names and ages of my other children (under the age of 18): | My Name: | My Age: |
| Date of Marriage: Names and birth dates of children for whom support is to be determined in this action: Name Year of Birth Resides with Names and ages of my other children (under the age of 18): | | |
| Names and birth dates of children for whom support is to be determined in this action: Name Year of Birth Resides with Names and ages of my other children (under the age of 18): | D ((M : | D 1 10 " |
| | | |
| | Nama | Voor of Birth Booides with |
| | Name Names and ages of my other of | Year of Birth Resides with Children (under the age of 18): |
| | Name Names and ages of my other of | Year of Birth Resides with Children (under the age of 18): |

| 2. | SUMMARY OF MY INCOME AND NEEDS (complete this section last) |
|------|--|
| (a) | |
| (b) | Net monthly income (from item 3B) |
| (c) | |
| (d) | |
| ` ′ | tal monthly expenses and payments to creditors (item 5C) |
| 3. | A. MY GROSS MONTHLY INCOME (complete this section or attach Child Support Schedule A) |
| (Al | I income must be entered based on monthly average regardless of date of receipt.) |
| ΑT | lary or Wages TACH COPIES OF 2 MOST RECENT WAGE STATEMENTS |
| and | come from self-employment, partnership, close corporations, d independent contracts (gross receipts minus ordinary d necessary expenses required to produce income) TACH SHEET ITEMIZING YOUR CALCULATIONS |
| Re | ntal Income (gross receipts minus ordinary and |
| | cessary expenses required to produce income) |
| | TACH SHEET ITEMIZING YOUR CALCULATIONS |
| | nuses |
| | ertime Payments |
| | verance Pay |
| Re | curring Income from Pensions or Retirement Plans |
| Inte | erest and Dividends |
| Tru | ust Income |
| Inc | ome from Annuities |

| Capital Gains | | | | |
|---|-----------------------|---|--------------|-------|
| Social Security Disabil | ity or Retirement B | enefits | | |
| Workers' Compensation | n Benefits | | | |
| Unemployment Benefi | ts | | | |
| Judgments from Perso | onal Injury or Other | Civil Cases | | |
| Gifts (cash or other gif | ts that can be conv | erted to cash) | | |
| Prizes/Lottery Winning | S | | | |
| Child support from per | sons not in this cas | se | | |
| Assets which are used | for support of fam | ily | | |
| Fringe Benefits (if sign | ificantly reduce livi | ng expenses) | | |
| Any other income (do TANF or food stamps) | NOT include mean | s-tested public assistar | nce, such as | |
| GROSS MONTHLY IN | COME | | | |
| B. Affiant's | _ | me from employment es and FICA) | | |
| Affiant's pay period (i.e | e., weekly, monthly, | , etc | | |
| Number of Exemptions | s Claimed | | | |
| 4. ASSETS | | | | |
| | spouse's column a | n asset is non-marital, in nd state the amount ar Plaintiff's Separate Asset | | |
| | | Separate Asset | Asset | Ciaim |
| Cash | | | | |
| Investment accounts | | | | |
| Certificates (stocks/bonds) | | | | |
| Bank Accounts (list each account): | | | | |

| Description | Value | Plaintiff's Separate Asset | Defendant's Separate Asset | Basis of the Claim |
|--|-----------|-------------------------------|-------------------------------|--------------------|
| | | | - | |
| | | | | |
| Pensions, 401K, IRA, or Profit Sharing | | | | |
| Money owed you: | | | | |
| Tax Refund owed you: | | | | |
| Real Estate: Home: | | | | |
| : Other: | Debt owed | | | |
| Automobiles/Vehicles: Vehicle 1: | Debt owed | | | |
| | Debt owed | | | |
| Vehicle 2: | | | | |
| Life Insurance (net cash value): | Debt owed | | | |
| Furniture/furnishings: | | | | |
| Jewelry: | | | | |
| Collectibles: | | | | |
| Other Assets: | | | | |
| Total Assets: | | | | |

5. AVERAGE MONTHLY EXPENSES FOR MY HOUSEHOLD

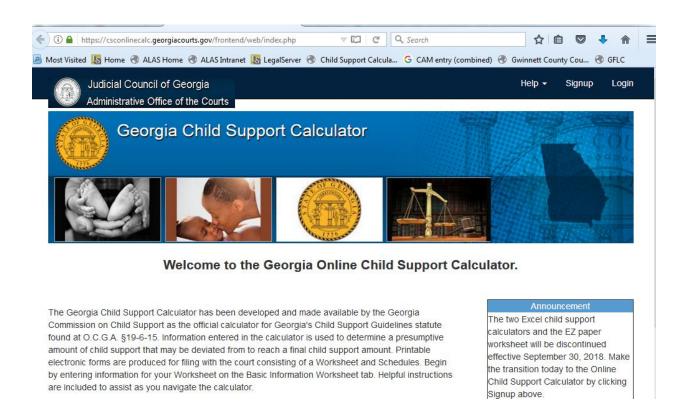
HOUSEHOLD EXPENSES Mortgage or Rent payments Gas Property taxes Repairs & Maintenance Homeowner's/Renter's Insurance Lawn care Electricity Pest control Water Cable TV/Internet Garbage & sewer Misc. household & Grocery items Telephone Meals Outside Home **Residential Lines** Other (Specify) Cellular Telephones **Total Household Expenses** 9 **VEHICLE/AUTOMOTIVE** Gasoline & Oil Auto tags/Registration & License Repairs & Maintenance Insurance **Public Transportation Total Transportation Expenses** \$ OTHER VEHICLES (boats, trailers, RVs, etc.) Tags/Registration/License Gasoline & Oil Repairs & Maintenance Insurance **Total Other Vehicles Expenses** \$ **CHILDREN'S EXPENSES** Child Care (total monthly cost) Allowances School tuition Clothing **Tutoring** Diapers Private lessons (e.g., music, Medical/Dental/Prescriptions dance) School Supplies/Expenses Grooming, Hygiene

| Lunch money | Gifts from children to others |
|--|---------------------------------------|
| Other Educational Expenses (list type & amount): | Entertainment |
| Activities (including extra- curricular, school, religious, cultural, etc.) | Summer Camps |
| Total Children's Expenses \$ | |
| IN: | SURANCE |
| Health | Child(ran)'s partian health |
| | Child(ren)'s portion-health |
| Dental | Child(ren)'s portion – dental |
| Vision | Child(ren)'s portion – vision |
| Life Insurance | Beneficiary – Life |
| Disability | Other Insurance (specify) |
| | ; |
| Total Insurance Expenses \$ | Total Child(ren)'s Portion \$ |
| ОТНІ | ER EXPENSES |
| Dry cleaning & laundry | Publications |
| Clothing | Dues, Clubs |
| Medical/Dental/Prescription (out of pocket uncovered expenses) | Religious & Charities |
| Your Gifts (special holidays) | Pet expenses |
| Entertainment | Alimony paid to former spouse |
| Recreational Expenses (e.g. fitness) | Child support paid for other children |
| Vacations | Date of initial CS order: |
| Travel expenses for visitation | Other (attach sheet to list) |
| Total Other Expenses \$ | |
| 5(A) TOTAL MONTHLY EXPENSES (add household, transportation, children's, insurance, and other expenses) B. PAYMENTS TO CREDITORS | \$ (please check one) |
| | (picase oriect orie) |

| To Whom: | Balance Due | Monthly Payment | Plaintiff | Defendant |
|---------------------------------------|----------------|--------------------|---------------------------------|--|
| | | | | |
| | | | | |
| | | | | |
| | | 1 | | |
| | | 1 | | |
| | | | | |
| 5(B) TOTAL MONTHLY PAYMI | ENTS TO CRE | DITORS: | \$ | |
| 5(C) TOTAL MONTHLY EXPERTO CREDITORS: | NSES AND PA | YMENTS = | \$ | |
| This day | of | | , 20 | <u>_</u> . |
| | | (signatur | e) | |
| | | under oatl | ☐ Defendant son that the inform | signs and affirms ation contained in complete true and |
| NOTARY PUBLIC | | | | |

Child Support Worksheet

Create an account and create your child support worksheet by visiting: https://csconlinecalc.georgiacourts.gov/frontend/web/index.php



For additional help, please review the Child Support Worksheet slideshow at: http://gwinnettflc.atlantalegalaid.org/wp-content/uploads/2015/12/Child-Support-Slideshow.pdf

| | | : |
|-------|---|--|
| V. | Plaintiff, | Civil Action File No.: |
| | Defendant. | : : : : |
| | CHILD SUPP | PORT ADDENDUM |
| and r | Pursuant to O.C.G.A. § 19-6-15(c) required findings: | (2), the Court makes the following applicable |
| 1. | This addendum is issued as: | |
| | \Box a final; \Box a temporary; \Box an initial action; \Box a mo | |
| 2. | The Gross Income of the Father is 19-6-15(c)(2)(C). | \$ per month. O.C.G.A. § |
| | The Gross Income of the Mother is 19-6-15(c)(2)(C). | s \$ per month. O.C.G.A. § |
| | | HEET(S) OF Mother Father Court, INCORPORATED BY § 19-6-15(m)(1). |
| 3. | Is health insurance for the child(rer reasonable cost to either parent? | n) involved reasonably available at a |
| | • • | (b) mother, OR (c) both parents, shall trance for the child(ren) for as long as child 6-15(c)(2)(D). |

| 4. | Mother shall pay% and Father shall pay% of all expenses incurred for the children's health care (including medical, dental, mental health, | | | | | | |
|----|---|--|--|--|--|--|--|
| | hospital and vision care) that are not covered by insurance. The party who | | | | | | |
| | incurs such expense shall provide documentation thereof to the other party within | | | | | | |
| | fourteen days of said expenditure with a short note explaining the details, the | | | | | | |
| | reasons, et cetera, of said expenditure. The other party shall reimburse the | | | | | | |
| | incurring party (or pay the health care provider directly) for the appropriate | | | | | | |
| | percentage of the expense, within fourteen days after receiving the verification of | | | | | | |
| | a particular health care expense. O.C.G.A. § 19-6-15(c)(2)(G). | | | | | | |
| 5. | Pursuant to the visitation schedule, the noncustodial parent's parenting time is | | | | | | |
| | percent annually. (Standard Visitation with alternating weekends, | | | | | | |
| | holidays plus 2 weeks during the summer represents 20.8% parenting time for | | | | | | |
| | the noncustodial parent. With three weeks of summer vacation, the noncustodial parent's parenting time is 22.8% and with four weeks of summer vacation, the | | | | | | |
| | noncustodial parent's parenting time is 24.7%.). O.C.G.A. § 19-6-15(c)(2)(F). | | | | | | |
| | 11011043104141 parent 3 parenting time 13 24.7 70.7. 0.0.0.7t. § 13 0 10(0)(2)(1). | | | | | | |
| 6. | The presumptive amount of child support as indicated by the Child Support | | | | | | |
| | Worksheet (#9 on Page 1 thereon) is \$ per month for Mother and | | | | | | |
| | \$ per month for Father. O.C.G.A. § 19-6-15(c)(2)(A) and (B). | | | | | | |
| 7. | Deviation(s) | | | | | | |
| | a. \square No Deviation. (If NO deviation, please skip the remaining items in | | | | | | |
| | item 7 and continue to item 8 to complete this form.) | | | | | | |
| | b. Deviation. If DEVIATION, you MUST complete EITHER item 7(b)(i) | | | | | | |
| | OR item 7(b)(ii) | | | | | | |
| | ii. It has been determined that one or more of the Deviations | | | | | | |
| | allowed under O.C.G.A. §19-6-15 applies in this case. Schedule E of the Child | | | | | | |
| | Support Worksheet, docketed separately but simultaneously herewith, explains | | | | | | |
| | the reasons for the deviation, how the application of the guidelines would be | | | | | | |
| | unjust or inappropriate considering the relative ability of each parent to provide | | | | | | |
| | support, and how the best interest of the children who are subject to this child | | | | | | |
| | support determination is served by deviation from the presumptive amount of | | | | | | |
| | child support. | | | | | | |

OR

| | The reasons for deviation are: |
|------|--|
| | |
| | |
| | Would the presumption amount be unjust or inappropriate? |
| Exp | olain |
| | |
| | |
| | Would deviation serve the best interests of the children for who |
| sup | oport is being determined? Explain |
| | |
| | |
| | Would deviation seriously impair the ability of the CUSTODIAL |
| NO | N-CUSTODIAL PARENT to maintain adequate housing, food ar |
| clot | thing for the children being supported by the order and to provide |
| oth | er basic necessities. Explain |
| | |
| | |

| Taking into consideration all | of the applicable data from the Child Support |
|--|--|
| Worksheet, the award of chi | ld support which \square Mother / \square Father shall pay to |
| ☐ Mother / ☐ Father for s | upport of the child(ren) is \$dollars pe |
| month. Said amount shall be | e payable \square monthly \square weekly \square bi-weekly \square |
| semi-monthly OR \square (c) oth | er period: in the amount of |
| \$ beginni | ng on, and payable |
| thereafter on payable \Box mo | onthly \square weekly \square bi-weekly \square semi-monthly |
| OR \square (c) other period: | until the child becomes 18 years |
| becomes 18 years of age whe full-time basis, then such suppresentations becomes 18 years of age when such suppressions are suppressed to the suppression of the suppr | erwise becomes emancipated, except that if the child nile enrolled in and attending secondary school on a poort shall continue until the child completes hat such support shall not be required after the child C.G.A. § 19-6-15(c)(2)(A) and (B). |
| So found, this day o | f, 20 |
| | Judge, Superior Court Gwinnett Judicial Circui [] by designation. |
| Consented to by: | |
| Plaintiff | Defendant |
| Date | Date |

General Civil and Domestic Relations Case Disposition Information Form

| \square Superior or \square State | | | | | Court of County | | | | |
|---------------------------------------|---|------------------|------------|-----------|-------------------------|--------------------|------------------|-----------|-----------|
| | For Clerk Use O | nly | | | | | | | |
| | Date Disposed | | | | Case Numb | er | | | _ |
| | | MM-DD-Y | /YYY | | Case Style ₋ | | | | _ |
| Plaintiff | (s) | | | | Defendar | nt(s) | | | |
| Last | First | Middle I. | Suffix | Prefix | Last | First | Middle I. | Suffix | Prefix |
| Last | First | Middle I. | Suffix | Prefix | Last | First | Middle I. | Suffix | Prefix |
| Last | First | Middle I. | Suffix | Prefix | Last | First | Middle I. | Suffix | Prefix |
| Last | First | Middle I. | Suffix | Prefix | Last | First | Middle I. | Suffix | Prefix |
| Reportir | ng Party | | | | | | | | |
| Plaintiff | s Attorney | | | | _ Bar I | Number | Se | elf-Repre | sented 🗆 |
| Defenda | nnt's Attorney _ | | | | Bar l | Number | Se | elf-Repre | esented 🗆 |
| Check O Jur Ber No | y Trial nch/Non-Jury T n-Trial Disposit | tion | | | | | | | |
| <u> </u> | Alternative Dis | pute Resolutio | on | | | | | | |
| | Check if any par | ty was self-repr | esented a | at any po | int during th | ne life of the cas | se. | | |
| | Check if the cou | rt ordered an ir | nterpreter | for any | oarty, witnes | ss, or other invo | lved individual. | | |
| | Was the case ref | ferred/ordered | to a cour | t-annexe | d alternative | dispute resolut | tion (ADR) proc | ess? | |

SERVICE ON THE OTHER PARENT/LEGAL GUARDIAN

| Uncontes | sted: You and the other parent agree to the <i>Parenting</i> |
|-----------------|---|
| Plan and | both believe it is in the best interests of your child(ren) |
| that your | request for modification is granted. |
| | |
| | Complete the Consent and Acknowledgment of Service |
| | forms on the following pages |
| | |
| ~ | 1 m |
| | d: The other parent will not agree to your request, will |
| not initial | and sign the <i>Parenting Plan</i> , or <i>Acknowledgment of</i> |
| Service. | |
| | |
| | Complete the <i>Sheriff Entry of Service</i> form. This |
| | form is a 3-part carbon copy which is available at the |
| | Gwinnett Justice and Administration Center. |
| | |
| | If the other parent lives outside of Gwinnett |
| | County, you will have to arrange for service in the |
| | county where he or she lives. See <u>Instructions for sheriff</u> |
| | service outside of Gwinnett located in the "list of every |
| | form" page at http://gwinnettfamilylawclinic.org . |
| | |
| N | 10 41 1 4 1 37 4 1 |
| - | guardian cannot be located: You must document your |
| | forts and request permission from the Court to publish |
| notice of | your <i>Petition</i> through the local newspaper. |
| | Complete the Publication Packet |