

CHILD SUPPORT NOTICE

Establishment and modification of child support is governed by Chapter 3119 of the Ohio Revised Code.

In order to justify a modification of child support, there must be a "substantial change of circumstances." Ohio Revised Code Section 3119.79 provides that the new level of child support must be greater than 10% more or less than the current order to constitute a substantial change of circumstances.

You may represent yourself in seeking a modification of child support; the party filing the request for the modification has the burden (or responsibility) of putting forth evidence during the hearing to justify the change. You may wish to consult an attorney.

The Court will rely on the testimony of the parties and the Affidavits of Income and Expenses completed by the parties, as well as any other evidence presented by the parties.

COURT OF COMMON PLEAS JUVENILE DIVISION
GREENE COUNTY, OHIO

Complaint for Modification of Child Support

In the Matter of:

Case No. _____

I am requesting a modification of the child support order. The basis for this modification is as follows: _____

attached hereto is my Affidavit of Income and Expenses.

Signature

Printed Name

Address

City

State

Zip

Phone Number

Sworn to before me and subscribed in my presence on the _____
day of _____, 200__.

Notary Public or Deputy Clerk

Instructions for Service

Please serve the following party(ies) with a copy of this complaint and notice of the hearing by certified mail at the following address:

Printed Name

Printed Name

Address

Address

City

State

Zip

City

State

Zip

Phone Number

Phone Number

Signature of Complainant

**GREENE COUNTY JUVENILE COURT
AFFIDAVIT OF INCOME AND EXPENSES**

State of Ohio

Case No. _____

County of Greene, ss:

_____, being first duly cautioned and sworn, hereby states that the following information is true to the best of my knowledge.

Name of child(ren) for which child support is being determined: _____

Affiant's Name: _____

Address: _____ Apt.# _____ City: _____

State: _____ Zip Code: _____ Phone: _____

Employer's Name: _____

Employer's Address: _____

Hourly Wage: _____ Date Employment Commenced: _____

Annual Gross Income: _____ # of Pay Periods Per Year: _____

Attached hereto are copies of my three (3) most recent pay stubs

Amount of Overtime and Bonuses:

Last Calendar Year: _____

Two Years Ago: _____

Three Years Ago: _____

All others Sources of income (interest, dividends, unemployment compensation, workers compensation, etc.):

Source: _____ Amount: _____

Source: _____ Amount: _____

Amount of Local, City, School District Taxes, Etc.: _____

Annual Court-Ordered support paid for other children: _____

Name of Court, Case Caption, and Case Number for said Order: _____

Any non-means-tested benefits, including social security and veteran's benefits, paid to and received by a child or a person on behalf of the child due to death, disability, or retirement of the parent.

Monthly Benefit Amount _____ Source of Benefit _____

Mandatory work-related deductions such as union dues, uniform fees, etc. (Please identify)

Name and Location of Day Care: _____

Annual Cost of Day Care: _____

Name of Health Insurer: _____ Policy No. _____

Monthly Cost of Health Insurance Premiums to add child(ren) to Insurance Plan: _____

Minor Child(ren) living with me, which is/are my natural child(ren) and the child(ren) of another parent (not the child(ren) who is/are the subject of this case.)

Name of Child: _____ Age: _____

Name of Child: _____ Age: _____

Name of Child: _____ Age: _____

Annual Child Support received for said child(ren): _____

Annual Court-Ordered spousal support (alimony) paid to former spouse: _____

Name of Court, Case Caption, and Case Number for said order: _____

Self-employed individuals must attach a copy of Schedule C of IRS Form 1040.

Affiant's Signature

Sworn to and subscribed before me this _____, day of _____
20_____.

Notary Public/Deputy Clerk

**IN THE COURT OF COMMON PLEAS
JUVENILE DIVISION
GREENE COUNTY, OHIO**

**DECLARATION UNDER UNIFORM CHILD CUSTODY
JURISDICTION AND ENFORCEMENT ACT (UCCJEA)**

Case No. _____

I, (full legal name) _____, being sworn according to law, certify that these proceedings involve the custody of a child, or children and the following statements are true:

1. [] I am requesting the court to not disclose my address or that of the child(ren). My address is confidential pursuant to ORC 3127.23(0) and should be placed under seal in that the health, safety, or liberty of myself and/or the child(ren) would be jeopardized by the disclosure of the identifying information.

2. (Number): _____ **Minor Child(ren) are subject to this proceeding as follows:**
(Insert the information requested below. The residence information must be given for the **last FIVE years.**)

a. Child's name		Place of Birth	Date of Birth	Sex
Period of residence to Present	Address Confidential	Person child lived with (name and address)		Relationship
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			

a. Child's name		Place of Birth	Date of Birth	Sex
Period of residence to Present	Address Confidential	Person child lived with (name and address)		Relationship
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			

a. Child's name		Place of Birth	Date of Birth	Sex
Period of residence to Present	Address Confidential	Person child lived with (name and address)		Relationship
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			

b. Additional children are listed on an attached addendum. (Provide all information for additional children on an attachment.)

3. Participation in custody proceeding(s): (Check only one)

_____ I **HAVE NOT** participated as a party, witness, or in any capacity in any other litigation, in this or any other state, concerning the custody of or visitation (parenting time) with any child subject to this proceeding.

_____ I **HAVE** participated as a party, witness, or in any capacity in any other litigation, in this or any other state, concerning the custody of or visitation (parenting time) with any child subject to this proceeding. Explain:

- a. Name of each child _____
- b. Type of proceeding _____
- c. Court and state _____
- d. Date of court order or judgment (if any): _____

4. Information about custody proceeding(s): (Check only one)

_____ I **HAVE NO INFORMATION** of any proceedings that could affect the current proceeding, including any proceedings relating to custody, domestic violence or protection orders, dependency, neglect or abuse allegations, (or that a parent or any member of their household has been convicted of a sexually oriented offense) or adoptions concerning any child subject to this proceeding.

_____ I **HAVE THE FOLLOWING INFORMATION** concerning proceedings that could affect the current proceeding, including any proceedings relating to custody, domestic violence or protection orders, dependency, neglect or abuse allegations, (convictions of a sexually oriented offense), or adoptions concerning any child subject to this proceeding, other than set out in item 3.

Explain:

- a. Name of each child _____
- b. Type of proceeding _____
- c. Court and state _____
- d. Date of court order or judgment (if any): _____

5. Persons not a party to this proceeding: (Check only one)

_____ I **DO NOT KNOW OF ANY PERSON** not a party to this proceeding who has physical custody or claims to have custody or visitation rights with respect to any child subject to this proceeding.

_____ I **KNOW THAT THE FOLLOWING NAMED PERSON(S)** not a party to this proceeding has/have physical custody or claim(s) to have custody or visitation rights with respect to any child subject to this proceeding:
(see next page)

a. Name and address of person _____

() has physical custody () claims custodial rights () claims visitation rights

b. Name and address of person _____

() has physical custody () claims custodial rights () claims visitation rights

c. Name and address of person _____

() has physical custody () claims custodial rights () claims visitation rights

6. Knowledge of prior child support proceedings: (Check only one)

_____ The child(ren) described in this affidavit are **NOT** subject to existing child support order(s) in this or any state or territory

_____ The child(ren) described in this affidavit **ARE** subject to the following existing child support order(s):

a. Name of each child _____

b. Type of proceeding _____

c. Court and address _____

d. Date of court order or judgment (if any): _____

e. Amount of child support paid and by whom _____

7. I acknowledge that I have a continuing duty to advise this Court of any custody, visitation, child support, or guardianship proceeding (including dissolution of marriage, child neglect, or dependency) concerning the child(ren) in this state or any other state about which information is obtained during this proceeding.

I certify that a copy of this document was **(Check only one)** () mailed () faxed and mailed () hand delivered to the person(s) listed below on (date _____)

Other party or his/her attorney:

Name: _____ Address: _____

City, State, Zip: _____ Fax Number _____

I understand that I am swearing or affirming under oath to the truthfulness of the statements made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated _____

Signature of Party

Printed name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

STATE OF OHIO
COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____

Notary Public