

# Boots on the Ground UIFSA

23<sup>rd</sup> Annual AB 1058 Child Support  
Training Conference  
August 27-30, 2019

## Presenters:

Leah Boucek, Facilitator  
San Diego County Family Law Facilitator's Office

Shannon Richards, Attorney  
California Department of Child Support Services

## Citations & Resources

### **Federal**

Full Faith and Credit (FFCSOA)	28 USC 1738B
UIFSA (2008) and Hague Child Support Convention Articles 1-10	Public law 113-183
Child Support Regulations	45 CFR 301, et. seq 45 CFR 302.70

### **State**

California Family Code Sections:

5600-5602

5700.101, et seq.

5700.201

5700.205

5700.207

5700.211

5700.311-312

5700.316-318

5700.601-615

5700.701

5700.705-708

17212

*Kulko v. Superior Court* (1978) 466 U.S. 84

## Resources

### **UIFSA**

<https://www.acf.hhs.gov/css/resource/uifsa-intergovernmental-child-support-enforcement-forms>

<http://www.acf.hhs.gov/programs/css/irg-state-map>

### **Hague**

OCSE Resources on Convention

<http://www.acf.hhs.gov/css/partners/international>

<http://www.acf.hhs.gov/css/resource/hague-child-support-convention-forms>

DCL-16-21 (Dear Colleague Letter) provides guidance and information about forms.

### Country Profiles

<http://hcch.cloudapp.net/smartlets/sfjsp?interviewID=hcchcp2012>

### Foreign Reciprocating Countries

<http://www.gpo.gov/fdsys/pkg/FR2014-08-20/pdf/2014-1979.pdf>

### Text of Hauge Convention

Explanatory Report on the Convention

Practical Handbook for Case Workers

Hague Child Support Convention Judicial Guide

<https://www.acf.hhs.gov/css/partners/international>

All under “Essential Resources”

### **Judicial Council Forms**

<http://www.courts.ca.gov/forms.htm>

Family Law – Interstate Actions

Family Law – Governmental Child Support



## UIFSA Conversion Chart (California Statutes)

Prior Family Code	Current Family Code	Title
<b>Article I – General Provisions</b>		
4900	5700.101	Short Title
4901	5700.102	Definitions
4902	5700.103	State Tribunal and Support Enforcement Agency
4903	5700.104	Remedies Cumulative
n/a	5700.105	Application of UIFSA to Resident of Foreign Country and Foreign Support Proceeding
<b>Article II – Jurisdiction</b>		
4905	5700.201	Bases for Jurisdiction over Nonresident
4906	5700.202	Duration of Personal Jurisdiction
4907	5700.203	Initiating and Responding Tribunal of State
4908	5700.204	Simultaneous Proceedings
4909	5700.205	Continuing, Exclusive Jurisdiction to Modify Child Support Order
4910	5700.206	Continuing, Exclusive Jurisdiction to Enforce Child Support Order
4911	5700.207	Determination of Controlling Child Support Order
4912	5700.208	Child Support Orders for Two or More Obligees
4913	5700.209	Credit for Payments
4913.5*	5700.210	Application of UIFSA to Nonresident Subject to Personal Jurisdiction
4914*	5700.211	Continuing, Exclusive Jurisdiction to Modify Spousal Support Order
<b>Article III – Civil Provisions of General Application</b>		
4915	5700.301	Proceedings under UIFSA
4916	5700.302	Proceedings by Minor Parent
4917	5700.303	Application of Law of State
4918	5700.304	Duties of Initiating Tribunal
4919	5700.305	Duties and Powers of Responding Tribunal
4920	5700.306	Inappropriate Tribunal
4921	5700.307	Duties of Support Enforcement Agency
4922	5700.308	Duty of Attorney General
4923	5700.309	Private Counsel
4924	5700.310	Duties of State Information Agency
4925	5700.311	Pleadings and Accompanying Documents
4926	5700.312	Nondisclosure of Information in Exceptional Circumstances
4927	5700.313	Costs and Fees
4928	5700.314	Limited Immunity of Petitioner

**CHILD SUPPORT ENFORCEMENT TRANSMITTAL #1 - INITIAL REQUEST**

The information on this form may be disclosed as authorized by law.

If you are not the intended recipient, you are hereby notified that any use, disclosure, distribution, or copying of this form or its contents is strictly prohibited.

**Child Support Agency Confidential Information Form must be attached.**

**Petitioner: Legal Name** (first, middle, last, suffix) **IV-D Case:**  TANF  
 IV-E Foster Care  
 Medicaid Only  
 Former Assistance  
 Never Assistance

**Tribal Affiliation** (if applicable)

**Respondent: Legal Name** (first, middle, last, suffix)

**Tribal Affiliation** (if applicable)

**To:** (Agency Name and Address)

**Responding Locator Code:** \_\_\_\_\_ State \_\_\_\_\_  
**Responding IV-D Case Identifier:** \_\_\_\_\_  
**Responding Tribunal Number:** \_\_\_\_\_

**From:** (Agency Name and Address)

**Initiating Locator Code:** \_\_\_\_\_ State \_\_\_\_\_  
**Initiating IV-D Case Identifier:** \_\_\_\_\_  
**Initiating Tribunal Number:** \_\_\_\_\_

**Send Payments To:** (If different from above)

**Payment Locator Code:** \_\_\_\_\_ State \_\_\_\_\_

File Stamp

**NOTE:**

- Nondisclosure Finding/Affidavit attached
- This form sent through EDE
- This request or information sent through CSENet

**Section I. Action:** The responding jurisdiction should open an intergovernmental case with the initiating jurisdiction and provide all appropriate services, including: **(Please return the acknowledgment form.)**

- 1.  Establish parentage
- 2.  Establish and enforce order, and forward payment to the initiating jurisdiction's SDU for:
  - A.  Current child support, including medical support
  - B.  Retroactive child support
  - C.  Medical support only
- 3.  Take the following action(s) on the responding tribunal's order and forward payment to the initiating jurisdiction's SDU:
  - A.  Enforce
  - B.  Modify and enforce
  - C.  Modify then close the intergovernmental IV-D case
  - D.  Enforce arrears only
  - E.  Change person/entity entitled to receive funds and enforce
- 4.  Take the following action on a support order of another jurisdiction and forward payment to the initiating jurisdiction's SDU:
  - A.  Register and enforce
  - B.  Register, modify, and enforce
  - C.  Register, modify, then close the intergovernmental IV-D case
  - D.  Register and enforce arrears only
- 5.  Other \_\_\_\_\_

**Section II. Case Summary:** (Background of this matter: court/administrative actions)

Date of support order      State and county, tribe, or foreign country issuing order      Tribunal number

Support amount/frequency      Date of last payment      Total amount of arrears      Period of computation

\$      \$      \_\_\_\_\_ through \_\_\_\_\_

Current Support     Arrears Only

**CHILD SUPPORT ENFORCEMENT TRANSMITTAL #1 - INITIAL REQUEST, PAGE 2**

**Section II. Case Summary (Continued):**

Date of support order \_\_\_\_\_ State and county, tribe, or foreign country issuing order \_\_\_\_\_ Tribunal number \_\_\_\_\_

Support amount/frequency \_\_\_\_\_ Date of last payment \_\_\_\_\_ Total amount of arrears \_\_\_\_\_ Period of computation \_\_\_\_\_  
\$ \_\_\_\_\_ \$ \_\_\_\_\_ thru \_\_\_\_\_

Current Support  Arrears Only

Additional orders or information attached.

**Section III. Obligee Information:**  Parent  Caretaker

Obligee legal name (first, middle, last, suffix) \_\_\_\_\_

If caretaker: relationship to child(ren) \_\_\_\_\_  Has legal custody/guardianship of the child(ren)

**Section IV. Obligor Information:** Obligor legal name (first, middle, last, suffix) \_\_\_\_\_

**Section V. Dependent Child(ren) Information:**

Legal Name (first, middle, last, suffix) \_\_\_\_\_

**VI. Other Pertinent Information:**

Continued on attached sheet(s), incorporated by reference.

**VII. Attachments:**

(Supporting Documentation)

- |   |  |
|---|--|
| <input type="checkbox"/> Child Support Agency Confidential Information Form for IV-D Use Only | <input type="checkbox"/> Uniform Support Petition        |
| <input type="checkbox"/> Declaration in Support of Establishing Parentage                     | <input type="checkbox"/> General Testimony               |
| <input type="checkbox"/> Personal Information Form for UIFSA § 311                            | <input type="checkbox"/> Support order(s)                |
| <input type="checkbox"/> Letter of Transmittal Requesting Registration                        | <input type="checkbox"/> Acknowledgment of parentage     |
| <input type="checkbox"/> Payment history  | <input type="checkbox"/> Birth certificate/birth record  |
| <input type="checkbox"/> Arrears balance and/or accrued interest (affidavit of arrears)       | <input type="checkbox"/> Nondisclosure finding/affidavit |
| <input type="checkbox"/> Arrears calculation (month by month)                                 | <input type="checkbox"/> Other attachments               |

**VIII. Contact Information:**

\_\_\_\_\_ Date \_\_\_\_\_ Initiating contact person (first, middle, last, suffix) \_\_\_\_\_ ( ) \_\_\_\_\_ Direct telephone number and extension

Fax: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

**Encryption Requirements:**

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

# INSTRUCTIONS FOR CHILD SUPPORT ENFORCEMENT TRANSMITTAL #1 INITIAL REQUEST

## PURPOSE OF THE FORM:

The CSE Transmittal #1-Initial Request form is required for initiating an intergovernmental case to any responding state's central registry. It contains basic case information and space for indicating which services are requested. The form can be used to request a number of different actions, including establishment of parentage and/or a support obligation, modification, and/or enforcement. It does not take the place of, and therefore must be accompanied by, the appropriate standard intergovernmental forms (e.g., Uniform Support Petition, Personal Information Form for UIFSA §311, General Testimony, Declaration in Support of Establishing Parentage, Letter of Transmittal Requesting Registration) and supporting documentation. Whenever possible, a Transmittal #1 request should be sent electronically using the appropriate CSENet transaction. However, some states also require a paper Transmittal #1.

The information on this form may be filed with the tribunal and may be disclosed to the parties in the case, unless accompanied by a nondisclosure finding/affidavit.

If you are not the intended recipient, you are hereby notified that any use, disclosure, distribution, or copying of this form or its contents is strictly prohibited.

*Italicized text that appears within a "box" refers to policy or provides additional information.*

*For an address outside the United States, be sure to include the foreign country and postal code.*

*Tribal IV-D programs may choose to use the federal Intergovernmental forms. However, they are not required to use or accept such forms. If you have any questions, contact the tribal IV-D agency directly using the contact information on the OCSE website.*

*If this is a tribal IV-D case, note that tribal locator codes uniquely identify tribal cases with "9" in the first position, 0 (zero) in the second position, and then a 3-character tribal code defined by the Bureau of Indian Affairs (BIA).*

**The Child Support Agency Confidential Information Form must be attached.**

## HEADING/CAPTION:

- The initiating jurisdiction determines the heading.
- Identify the **petitioner** and **respondent** by full legal name (first, middle, last, suffix) and, if applicable, include the name of the tribe with which the petitioner or respondent is affiliated.
- Check the appropriate box to identify the type of IV-D case: TANF, IV-E foster care, Medicaid only, former assistance, or never assistance.

*TANF means the obligee's family is currently receiving IV-A cash payments. A Medicaid only case is a case in which the obligee's family receives Medicaid but does not receive TANF.*

- In the space marked "To:", list the name and address (street, PO Box, city, state, and zip code) of the agency to which you are sending the CSE Transmittal #1.

*Once an initial referral in a IV-D case has been made to the responding state's central registry (using a CSE Transmittal #1), subsequent communication should occur with the agency/court/jurisdiction that is actually working the case (using a CSE Transmittal #2).*

- In the appropriate spaces, enter the responding jurisdiction's locator code, state, and, if applicable and known, IV-D case identifier and tribunal number.



*The responding jurisdiction is the jurisdiction that is working the case at the request of the initiating jurisdiction. Under "IV-D case identifier", enter the number/identifier identical to the one submitted on the Federal Case Registry, which is a left-justified up to 15-character alphanumeric field, allowing all characters except asterisk and backslash, and with all characters in uppercase. Under "tribunal number", you may enter the docket number, cause number, or any other appropriate reference number that the responding tribunal may use to identify the case, if known.*

- In the space marked "From:" list the initiating agency's name and address (street, PO Box, city, state, and zip code).
- In the appropriate spaces, enter the initiating jurisdiction's locator code, state, IV-D case identifier, and, if applicable, tribunal number.

*The initiating jurisdiction is the jurisdiction that referred the case to the responding jurisdiction for services. Under "IV-D case identifier", enter the number/identifier identical to the one submitted on the Federal Case Registry, which is a left-justified up to 15-character alphanumeric field, allowing all characters except asterisk and backslash, and with all characters in uppercase. Under "tribunal number", you may enter the docket number, cause number, or any other appropriate reference number that the initiating tribunal has assigned to the case.*

- In the space marked "Send Payments To:", list the name and address (street, PO Box, city, state, and zip code) of your agency's support disbursement unit (SDU) if it is not the same information as listed in "To:" above.
- In the appropriate spaces, enter the locator code and state where payments should be sent.

In the "NOTE:" section, check any of the following that apply:

- **Nondisclosure Finding/Affidavit attached** – If there is a finding prohibiting disclosure of a party's or child(ren)'s address/identifying information or an affidavit alleging that disclosure of such information would result in risk of harm, check the box for "Nondisclosure Finding/Affidavit" and attach a copy of the finding/affidavit in accordance with section 312 of UIFSA. If there is a finding/affidavit prohibiting disclosure, you may provide the address of the IV-D agency as a substitute address for the protected party.

*UIFSA requires that the petition or accompanying documents include certain identifying information regarding the parties and child(ren) (e.g., residential address, social security number) unless a party alleges in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child would be jeopardized by disclosure of such information. In that event, the information must be sealed.*

*If a jurisdiction has reason to believe that information should not be released because of safety concerns, it should ensure that there is a nondisclosure finding or an allegation in an affidavit or the pleading that disclosure of identifying information would result in a risk or harm, as provided under section 312 of UIFSA. In addition to identifying information included on this form, it may be appropriate to submit certain financial information under seal.*

- **This form sent through EDE** – Check if this form was sent through the Electronic Document Exchange (EDE).
- **This request or information sent through CSENet** – Check if this request or information was sent through CSENet.

*The following options are available for making IV-D requests and sending information on IV-D cases:*

1. *CSENet transactions are the recommended method for making requests or sending information to another state. If CSENet is not listed as an option on the form, then it cannot be used to convey any of the requests for information or IV-D requests provided on the form. Supporting documentation should be sent through EDE, whenever possible. If certified copies are needed, hard copies should also be sent by mail. Mail or fax may also be used for all documents when EDE is not available.*
2. *If CSENet transactions are not available in your state, EDE is the next preferred method for transmitting your request or information. Both your state and the receiving state must be using the EDE application to use this communication method.*
3. *If the EDE application is not available in your state or the receiving state, then mail or fax must be used to communicate your request.*

## Section I. Action:

Check the appropriate box(es) to indicate which actions are requested. Multiple actions may be requested, as appropriate.

- Check **item 1** “Establish parentage” when parentage has not been legally determined. Be sure to attach a separate “Declaration in Support of Establishing Parentage” for each child whose parentage is at issue.
- Check **item 2** “Establish and enforce order, and forward payment to the initiating jurisdiction’s SDU for” to request the establishment of an order. Indicate the type of order by checking the appropriate box(es).
  - Check **item 2A** “Current child support, including medical support” to request the initial establishment of a new child support order.
  - Check **item 2B** “Retroactive child support” to request support for a prior period.

*States may establish child support awards covering a prior period, but such awards must be based on the responding state’s child support guidelines. The award of retroactive support is not required under federal rules, but may be appropriate in accordance with state law. Not all states have authority to establish support orders for prior periods. The law of the responding state governs the extent to which retroactive support is available. A medical support provision must be included in any new or modified order in a IV-D case.*

- Check **item 2C** “Medical support only” in a Medicaid case in which a child support order does not exist and is not sought. If seeking to add medical support to an existing child support order, check either item 3.B or 4.B (modify and enforce) depending on whether the order being modified was issued by the responding tribunal or is being registered for modification in the responding jurisdiction.
- Check **item 3** “Take the following action(s) on the responding tribunal’s order and forward payment to the initiating jurisdiction’s SDU:” when the responding tribunal has already issued a support order. More than one action can be chosen.
  - Check **item 3A** “Enforce” to enforce the support order.
  - Check **item 3B** “Modify and enforce” to modify and enforce the support order.

*You may ask a responding state to modify its order if either the obligor, the individual obligee or the child(ren) reside in the responding state and the individual parties have not filed a consent in a record in the responding tribunal for another state to assume jurisdiction to modify. You may ask a responding state to modify its order, even if it is not the residence of the obligor, individual obligee, or the child so long as the parties have consented in a record or in open court that the tribunal may continue to exercise jurisdiction to modify its order. You may also ask a responding state to modify its order if one party resides in another state and the other party resides outside the United States.*

- Check **item 3C** “Modify then close the intergovernmental IV-D case” to modify the support order and then close the IV-D case because additional services are not needed. Do not check this box if you want the responding jurisdiction to also enforce the modified order.
- Check **item 3D** “Enforce arrears only” to enforce the collection of arrears only. Do not check this if you are also requesting enforcement of current support.
- Check **item 3E** “Change person/entity entitled to receive funds and enforce” to change the person or agency entitled to receive child support payments.

*This action is used when the initiating agency asserts that the person/entity entitled to receive child support payments has changed from the person/entity designated in the existing support order due to a change in custody or foster care status. Some IV-D agencies have administrative authority to make the change; in other jurisdictions, a court action is required. The initiating agency should confer with the responding IV-D agency to determine what documentation or pleading is required for the responding jurisdiction to consider the requested action.*

- Check **item 4** “Take the following action on a support order of another jurisdiction and forward payment to the initiating jurisdiction’s SDU:” when the responding jurisdiction has not issued the support order that you are seeking to modify and/or enforce.
  - Check **item 4A** “Register and enforce” to register and enforce the support order.

*Under section 507(b) of UIFSA, the support enforcement agency, without initially seeking to register the order under Article 6, shall consider and, if appropriate, use any administrative procedure authorized by the law in the responding state to enforce a support order or an income withholding order, or both.*

- Check **item 4B** “Register, modify, and enforce” to register, modify, and enforce the support order. Once the responding jurisdiction modifies the registered order, the responding jurisdiction’s order controls and must be enforced.

*Do not ask a responding state to modify the order of another state unless the following facts exist:*

- *Neither the obligor, the individual obligee, nor the child(ren) resides in the state that issued the order; AND*
- *The individual seeking to register the order for modification does not reside in the responding state; AND*
- *The responding state has or may obtain personal jurisdiction over the non-registering party;*  
OR
- *The responding state is the residence of the child, or the responding state has or may obtain personal jurisdiction over an individual party; AND*  
*All of the individual parties have filed consents in a record in the tribunal that issued the order for the tribunal in the responding state to modify the support order and assume continuing, exclusive jurisdiction.*  
OR
- *All of the individual parties reside in the responding state and the child does not reside in the state that issued the order.*

- Check **item 4C** to “Register, modify, and close the intergovernmental IV-D case” to register, modify, and then close the IV-D case because additional services are not needed. Do not check this box if you want the responding jurisdiction to also enforce the order.
- Check **item 4D** to “Register and enforce arrears only” to enforce the collection of arrears only. Do not check this if you are also requesting enforcement of current support.

*Federal regulations allow case closure when the initiating agency has notified the responding agency that its intergovernmental services are no longer needed. An initiating agency must instruct the responding agency to close its interstate case and to stop any withholding order or notice before the initiating state transmits a withholding order or notice, with respect to the same case, to the same or another employer unless the two states reach an alternative agreement on how to proceed.*

- Check **item 5** “Other” for an action that is not listed and describe the action requested.

## Section II. Case Summary:

- **NOTE:** This is a summary document. Refer to the order for additional information.
- Enter:
  - Date of support order
  - State and county, tribe, or foreign country issuing order
  - Tribunal number
  - Support amount/frequency
  - Date of last payment
  - Total amount of arrears
  - Period of computation - enter the month, day, and year for both the beginning and ending dates.
- **NOTE:** For a breakdown of “Total amount of arrears,” refer to the order and, if applicable, the Letter of Transmittal Requesting Registration.
- Check whether the order is for current support or arrears only.
- Check “Additional orders or information attached” if you are sending more than two orders or additional information to the responding jurisdiction.

*This section allows a IV-D agency to include information about more than one order for current support. For example, there may be separate orders for different children involving the same obligor and obligee. The rarer situation will be multiple current support orders that may have been improperly entered. The initiating jurisdiction may use this section to provide information about the multiple orders. It should then check item 6 “Other” under Section I Action and request that the responding jurisdiction determine the validity of the orders.*

*This section allows a IV-D agency to include information about an arrears only order. For example, in some states, administrative orders for current child support are later superseded by a judicial order in the same state, such as a divorce decree, that does not recognize, incorporate, or modify the administrative order. While under state law the judicial order controls current support, arrears accrued under the superseded administrative order and not included in the judicial order remain collectible under the administrative order. This section also allows the IV-D agency to provide information about the enforceable arrears under the administrative order. It also allows a IV-D agency to provide information about a money judgment for arrears or an order that only addresses support for a prior period.*

*Attach two copies of the order(s), including one certified copy, which you are asking the responding jurisdiction to enforce. Refer to the order for additional information such as effective dates, arrears payment amount, and frequency of payments.*

### **Section III. Obligee Information:**

This section provides basic information about the obligee. Check the appropriate box to indicate if the obligee is the parent or caretaker. Provide the obligee's full legal name (first, middle, last, suffix). If the obligee is the caretaker, indicate the caretaker's relationship to the child(ren) (e.g., grandmother, cousin). Check "Has legal custody/guardianship of child(ren)" if the caretaker has legal custody/guardianship of the child(ren). Provide all other identifying information about the obligee on the Child Support Agency Confidential Information Form.

### **Section IV. Obligor Information:**

This section provides basic information about the obligor. Provide the obligor's full legal name (first, middle, last, suffix). Provide all other identifying information about the obligor on the Child Support Agency Confidential Information Form.

### **Section V. Dependent Child(ren) Information:**

List all child(ren) for whom support is owed or being sought. For each child, provide the child's full legal name (first, middle, last, suffix). Provide all other identifying information about the child(ren) on the Child Support Agency Confidential Information Form.

### **Section VI. Other Pertinent Information:**

In this section, provide additional information that may be useful to the responding jurisdiction. If the information is related to a previous section, identify the section and item number. If additional space is needed, check "Continued on attached sheet(s), incorporated by reference."

### **Section VII. Attachments:**

Check the appropriate box(es) to indicate all documents attached. For attachments other than those listed, check "Other attachments".

### **Section VIII. Contact Information:**

At the bottom of page 2, provide a specific contact person's name, a direct telephone number (with extension if necessary), a fax number, and an e-mail address to expedite communication between jurisdictions.

### **Encryption Requirements:**

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

### **The Paperwork Reduction Act of 1995**

Public reporting burden for this collection of information is estimated to average 0.17 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

**UNIFORM SUPPORT PETITION**

If you are not the intended recipient, you are hereby notified that any use, disclosure, distribution, or copying of this form or its contents is strictly prohibited.

**Personal Information Form for UIFSA § 311 must be attached.**

**Petitioner: Legal Name** (first, middle, last, suffix)

Obligee  Obligor

**Tribal Affiliation** (if applicable)

**IV-D Case:**  TANF

IV-E Foster Care

Medicaid Only

Former Assistance

Never Assistance

**Respondent: Legal Name** (first, middle, last, suffix)

**Non-IV-D Case:**

Obligee  Obligor

**Tribal Affiliation** (if applicable)

**Responding IV-D Case Identifier:** \_\_\_\_\_

**Responding Tribunal Number:** \_\_\_\_\_

**Note:**

Nondisclosure Finding/Affidavit attached

**Initiating IV-D Case Identifier:** \_\_\_\_\_

This form sent through EDE

**Initiating Tribunal Number:** \_\_\_\_\_

File Stamp

The respondent in this action and/or the respondent's property is subject to the jurisdiction of the responding tribunal.

The legal name(s) of the child(ren) (first, middle, last, suffix) involved in this action is (are):

**Section I. Action:**

The petitioner in this action files this petition to request (check all that apply):

Establishment of parentage

Establishment of an order for:

Current child support, including medical support

Retroactive child support since \_\_\_\_\_ (date)

Medical support only

Spousal support (Non-IV-D only)

Costs and fees

Modification of a support order

Other remedy sought: \_\_\_\_\_

**Section II. Grounds Supporting the Remedy Sought in Section I:**

Parentage of the child(ren) named in this petition has not been established. (Attach a Declaration in Support of Establishing Parentage for each child.)

The parents have a duty to support the child(ren) named in this petition. (If retroactive support is sought, check the applicable box below.)

Respondent has not provided support since: \_\_\_\_\_ (date).

Petitioner has not provided support since: \_\_\_\_\_ (date).

It has been 3 years (or the time frame permitted by the laws of the responding jurisdiction) since the last review or modification.

There has been a change in circumstances since the order was entered. (Explain.): \_\_\_\_\_

Additional grounds: \_\_\_\_\_

**UNIFORM SUPPORT PETITION, PAGE 2**

---

**Section III. Servicemembers Civil Relief Act:**

As of the current date: (Check one of the following.)

- The respondent is in military service.
- The respondent is not in military service.
- I am unable to determine whether the respondent is in military service.

The following facts support the statement regarding whether or not the respondent is in military service: (Be specific.)

\_\_\_\_\_

\_\_\_\_\_

Did you use the [Servicemembers Civil Relief Act](#) website to determine the respondent's military status?  Yes  No (If yes, attach the results.)

---

**Section IV. Other Pertinent Information:**

The following documents are attached to and incorporated in this Petition:

- Petitioner's General Testimony
  - Declaration in Support of Establishing Parentage
  - Acknowledgment of parentage
  - Birth certificate/record of the child
  - Documentation regarding military service
  - Other: \_\_\_\_\_
- 

**Section V. Declaration:**

Under penalty of perjury, all information and facts stated in this Uniform Support Petition are true to the best of my knowledge and belief.

Date	Printed name	<input type="checkbox"/> Signature of petitioner <input type="checkbox"/> Signature of IV-D representative/title
Date	Printed name of petitioner's private attorney and attorney/bar number (if applicable)	Signature of petitioner's private attorney

**Encryption Requirements:**

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

## INSTRUCTIONS FOR UNIFORM SUPPORT PETITION

### PURPOSE OF THE FORM:

The Uniform Support Petition is a legal pleading needed to initiate an action in the responding tribunal. Its purposes are to assert that the tribunal has jurisdiction, to show enough facts to notify the respondent of the claim being made, and to provide the petitioner with a means to request specific action or relief. The petitioner can provide additional information in the accompanying affidavits and other attachments.

If you are not the intended recipient, you are hereby notified that any use, disclosure, distribution, or copying of this form or its contents is strictly prohibited.

**The Personal Information Form for UIFSA § 311 must be attached.**

*Italicized text that appears within a “box” refers to policy or provides additional information.*

*For an address outside the United States, be sure to include the foreign country and postal code.*

### HEADING/CAPTION:

- Identify the **petitioner** and **respondent** by full legal name (first, middle, last, suffix) and, if applicable, include the name of the tribe with which the petitioner or respondent is affiliated.
- Identify if the petitioner is the obligee or the obligor. This will clarify who is submitting the petition.
- Note that a Personal Information Form for UIFSA § 311 must be attached.
- Check the appropriate box to identify the type of case: TANF, IV-E foster care, Medicaid only, former assistance, never assistance, or non-IV-D.

*TANF means the obligee’s family is currently receiving IV-A cash payments. A Medicaid only case is a case in which the obligee’s family receives Medicaid but does not receive TANF. A former assistance case might be a case for state arrears only or for a family that previously received TANF, but is not doing so at this time.*

- In the appropriate spaces, if applicable and known, enter the responding jurisdiction’s IV-D case identifier and tribunal number.

*Tribal IV-D programs may choose to use the federal Intergovernmental forms. However, they are not required to use or accept such forms. If you have any questions, contact the tribal IV-D agency directly using the contact information on the OCSE website.*

*Where forms request a locator code, note that tribal locator codes uniquely identify tribal cases with “9” in the first position, 0 (zero) in the second position, and then a 3-character tribal code defined by the Bureau of Indian Affairs (BIA).*

*The responding jurisdiction is the jurisdiction that is working the case at the request of the initiating jurisdiction. Under “IV-D case identifier,” enter the number/identifier identical to the one submitted on the Federal Case Registry, which is a left-justified up to 15-character alphanumeric field, allowing all characters except asterisk and backslash, and with all characters in uppercase. Under “tribunal number,” you may enter the docket number, cause number, or any other appropriate reference number that the responding tribunal may use to identify the case, if known.*

- In the appropriate spaces, enter the initiating jurisdiction’s IV-D case identifier, and, if applicable, tribunal number.

*The initiating jurisdiction is the jurisdiction that referred the case to the responding jurisdiction for services. Under “IV-D case identifier,” enter the number/identifier identical to the one submitted on the Federal Case Registry, which is a left-justified up to 15-character alphanumeric field, allowing all characters except asterisk and backslash, and with all characters in uppercase. Under “tribunal number,” you may enter the docket number, cause number, or any other appropriate reference number that the initiating tribunal has assigned to the case.*

In the “NOTE:” section, check any of the following that apply:

- **Nondisclosure Finding/Affidavit attached** - If there is a finding prohibiting disclosure of a party’s or child(ren)’s address/identifying information or an affidavit alleging that disclosure of such information would result in risk of harm, check the box for “Nondisclosure Finding/Affidavit attached” and attach a copy of the finding/affidavit in accordance with section 312 of UIFSA. If there is a finding/affidavit prohibiting disclosure, the information must be sealed and may not be disclosed to the other party or the public. You may provide the address of the IV-D agency as a substitute address for the protected party.

*UIFSA requires that the petition or accompanying documents include certain identifying information regarding the parties and child(ren) (e.g., residential address, social security number) unless a party alleges in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child would be jeopardized by disclosure of such information. In that event, the information must be sealed.*

*If a jurisdiction has reason to believe that information should not be released because of safety concerns, it should ensure that there is a nondisclosure finding or an allegation in an affidavit or the pleading that disclosure of identifying information would result in a risk of harm, as provided under section 312 of UIFSA. In addition to identifying information included on this form, it may be appropriate to submit certain financial information under seal.*

- **This form sent through EDE** - Check if this form was sent through the Electronic Document Exchange (EDE).

*The following options are available for making IV-D requests and sending information on IV-D cases:*

1. *CSENet transactions are the recommended method for making requests or sending information to another state. If CSENet is not listed as an option on the form, then it cannot be used to convey any of the requests for information or IV-D requests provided on the form. Supporting documentation should be sent through EDE, whenever possible. If certified copies are needed, hard copies should also be sent by mail. Mail or fax may also be used for all documents when EDE is not available.*
2. *If CSENet transactions are not available in your state, EDE is the next preferred method for transmitting your request or information. Both your state and the receiving state must be using the EDE application to use this communication method.*
3. *If the EDE application is not available in your state or the receiving state, then mail or fax must be used to communicate your request.*

### Body of the Form:

By signing the petition, the petitioner asserts that the respondent in this action and/or the respondent’s property is subject to the jurisdiction of the responding tribunal.

List the child(ren) on whose behalf the action in the petition is sought. Include each child’s full legal name (first, middle, last, suffix). Additional identifying information is provided in the Personal Information Form for UIFSA § 311.

### Section I. Action:

- Check the appropriate box(es) to indicate the action(s) requested. Multiple actions may be requested, as appropriate.
- Check “**Establishment of parentage**” to request that parentage be established. Attach a “Declaration in Support of Establishing Parentage” for each child whose parentage is at issue.
- Check “**Establishment of an order for**” to request that an order be established. Indicate the type of order by checking the appropriate box(es). The options are:
  - Check “**Current child support, including medical support**” to request the establishment of a new child support order.
  - Check “**Retroactive child support**” to request support for a prior period. Provide the time period from which retroactive support is sought.

*Jurisdictions may establish child support awards covering a prior period, but such awards must be based on the responding jurisdiction’s child support guideline and take into consideration either the current earnings and income at the time the order is set, or the obligor’s earnings and income during the prior period. The award of retroactive support is not required under federal rules, but may be appropriate in accordance with the responding jurisdiction’s law. The time period for any award of retroactive support will also be based on the responding jurisdiction’s law. Not all jurisdictions have authority to establish support orders for prior periods. A medical support provision must be included in any new or modified order in a IV-D case.*

- Check “**Medical support only**” in a Medicaid case to request medical support where a child support order does not exist and is not sought. If seeking to add medical support to an existing child support order, check “Modification of a support order.”



- Check “**Spousal support**” to request establishment of a spousal support order. **NOTE:** Do not check this item in a IV-D case. Establishment of spousal support is not a IV-D child support agency function, and a IV-D child support agency will not assist.
- Check “**Costs and fees**” to request an order for expenses, such as location costs and genetic testing fees. Complete the General Testimony to detail the type and amount of these costs and fees.
- Check “**Modification of a support order**” to request modification of an existing order.
- Check “**Other remedy sought**” to request an action not listed in section I. Specify in the space provided the remedy the petitioner is requesting.

## Section II. Grounds Supporting the Remedy Sought in Section I:

- Check “**Parentage of the child(ren) named in this petition has not been established. (Attach a Declaration in Support of Establishing Parentage for each child.)**” when the parentage of the child(ren) has not been established. Attach the Declaration in Support of Establishing Parentage form for each child.
- Check “**The parents have a duty to support the child(ren) named in this petition**” when parentage is not an issue.
  - If you are requesting retroactive support, check the applicable box. Check “**[ ] Respondent has not provided support since: \_\_\_\_\_(date)**” if the respondent has not provided support and identify the last time support was provided. Check “**[ ] Petitioner has not provided support since: \_\_\_\_\_(date)**” if the petitioner has not provided support and identify the last time support was provided. **NOTE:** The petitioner can be the obligor.
- Check “**It has been 3 years (or the time frame permitted by the laws of the responding jurisdiction) since the last review or modification**” when the petitioner seeks modification of the existing support order based on the passage of time permitted under the laws of the responding jurisdiction.
- Check “**There has been a change in circumstances since the order was entered. (Explain.): \_\_\_\_\_**” when the petitioner seeks modification of the existing support order based on a change of circumstances since entry of the most recent order. Explain the change in the space provided.
- Check “**Additional grounds**” when the basis for the remedy sought is not listed on the form. Provide information about the basis for the remedy sought.

## Section III. Servicemembers Civil Relief Act:

In any civil action or proceeding, including any child support proceeding, in which the respondent does not make an appearance, the tribunal, before entering judgment for the petitioner, must require the petitioner to file with the tribunal an affidavit (A) stating whether or not the respondent is in military service and showing necessary facts to support the affidavit; or (B) if the petitioner is unable to determine whether or not the respondent is in military service, stating that the petitioner is unable to determine whether or not the respondent is in military service. 50 U.S.C. 3931(b)(1).

The term “military service” includes the following: active duty service as a member of the United States Army, Navy, Air Force, Marine Corps, or Coast Guard; service as a member of the National Guard under a call to active service authorized by the President or the Secretary of Defense for a period of more than 30 consecutive days for purposes of responding to a national emergency; active service as a commissioned officer of the Public Health Service or of the National Oceanic and Atmospheric Administration; any period of service during which a servicemember is absent from duty on account of sickness, wounds, leave, or other lawful cause. 50 U.S.C. 3911(2).

As of the date the petition is signed, check the appropriate box to indicate the respondent’s military service.

- Check “**The respondent is in military service.**” if the respondent is currently in military service.
- Check “**The respondent is not in military service.**” if the respondent is currently not in military service.
- Check “**I am unable to determine whether the respondent is in military service.**” if you are unable to determine if the respondent is currently in military service.

In the space provided, detail facts to support the checked statement that the respondent is or is not in military service.

Check “yes” or “no” to indicate whether you used the Servicemembers Civil Relief Act website (<https://www.dmdc.osd.mil/appj/scra/>) to determine the respondent’s military status. If “yes” then attach the results to this form. The Servicemembers Civil Relief Act website is maintained by the Department of Defense (DoD). The website allows one to check the active duty status of a servicemember based on a specific date, called the “Date of Interest.” If DoD security certificates are not installed on your computer, you may experience security alerts from your internet browser when you attempt to access the website.

**Section IV. Other Pertinent Information:**

Check the appropriate box(es) to indicate the documents being sent with the petition. The attached documents are incorporated into the petition. If you are sending forms or other documents with the petition that are not specifically identified in this section, mark the "Other" box and list the additional forms or documents in the space provided.

**Section V. Declaration:**

The Uniform Support Petition must be signed. Check the appropriate box to indicate who has signed this form. In a IV-D case, the petitioner or a IV-D representative may sign the Uniform Support Petition. If the person filing the petition is represented by a private attorney, then the person's attorney may sign and date the form. The attorney should provide the applicable bar number.

**Encryption Requirements:**

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

**The Paperwork Reduction Act of 1995**

Public reporting burden for this collection of information is estimated to average 0.05 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

**GENERAL TESTIMONY**

(Instructions should be provided to the petitioner as part of the form.)

**THIS FORM CONTAINS SENSITIVE INFORMATION – DO NOT FILE THIS FORM IN A PUBLIC ACCESS FILE**

The information on this form may be filed with the petition or pleading and may be disclosed to the parties in the case unless accompanied by a nondisclosure finding/affidavit.

If you are not the intended recipient, you are hereby notified that any use, disclosure, distribution, or copying of this form or its contents is strictly prohibited.

**Personal Information Form for UIFSA § 311 must be attached.**

File Stamp

**Petitioner: Legal Name** (first, middle, last, suffix) **IV-D Case:**  TANF  
 IV-E Foster Care  
 Medicaid Only  
 Former Assistance  
 Never Assistance  
 **Obligee**  **Obligor**  
**Tribal Affiliation** (if applicable)

**Respondent: Legal Name** (first, middle, last, suffix) **Non-IV-D Case:**

**Obligee**  **Obligor** **Responding IV-D Case Identifier:** \_\_\_\_\_  
**Tribal Affiliation** (if applicable) **Responding Tribunal Number:** \_\_\_\_\_

**NOTE:** **Initiating IV-D Case Identifier:** \_\_\_\_\_  
 **Nondisclosure Finding/Affidavit attached** **Initiating Tribunal Number:** \_\_\_\_\_  
 **This form sent through EDE**

I, \_\_\_\_\_, declare under penalty of perjury:  
Legal Name (first, middle, last, suffix)

**I. Personal Information About Obligee: (Obligee caretaker complete section I.E only)**  See section IX

**A. Obligee parent information**

1. Legal name (first, middle, last, suffix):  
2. Gender:  Male  Female  Other  
3. a. Occupation, trade, or profession:  
b. Highest level of education attained:  
4. Current tax filing status:  Single  Head of household  Married filing jointly  Married filing separately  
 Qualifying widow/widower with dependent children  Unknown

**B. Physical description of the obligee parent: (Attach a recent photo if available.)**

1. Race: 2. Height: 3. Weight: 4. Hair color:  
5. Eye color:

**C. Is the obligee parent financially responsible for dependent children other than those of this action (listed in section IV)?**  
 Yes  No  Unknown (If yes, provide information below if known.)

1. a. Legal name (first, middle, last, suffix): b. Year of birth:  
c. Relationship: d. Living with:

2. a. Legal name (first, middle, last, suffix): b. Year of birth:  
c. Relationship: d. Living with:

**GENERAL TESTIMONY, PAGE 2**

**I. Personal Information About Obligee (Continued):**

3.	a. Legal name (first, middle, last, suffix):	b. Year of birth:
	c. Relationship:	d. Living with:

D. Does the obligee parent have an order to pay support for any child listed in C above?  Yes  No  Unknown  
(If yes, fill out information below, if known, and attach a copy of the order and payment record/proof of payment, if available.)

1.	a. Child(ren) name(s):		
	b. Amount:	c. Frequency:	
	d. State and county/tribe/country:	e. Tribunal number:	

2.	a. Child(ren) name(s):		
	b. Amount:	c. Frequency:	
	d. State and county/tribe/country:	e. Tribunal number:	

3.	a. Child(ren) name(s):		
	b. Amount:	c. Frequency:	
	d. State and county/tribe/country:	e. Tribunal number:	

E. Obligee Caretaker information: (Provide any relevant non-party parent information, including financial information, in section IX.)

1. Caretaker legal name (first, middle, last, suffix):	
2. Caretaker relationship to child is: _____ <input type="checkbox"/> Has legal custody/guardianship of child	
3. Date child(ren) began residing with caretaker:	

**II. Personal Information About Obligor:**

See section IX

A. Obligor information:

1.	Legal name (first, middle, last, suffix):
2.	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
3.	a. Occupation, trade or profession:
	b. Highest level of education attained:
4.	Current tax filing status: <input type="checkbox"/> Single <input type="checkbox"/> Head of household <input type="checkbox"/> Married filing jointly <input type="checkbox"/> Married filing separately <input type="checkbox"/> Qualifying widow/widower with dependent children <input type="checkbox"/> Unknown

B. Physical description of the obligor: (Attach a recent photo if available.)

1. Race:	2. Height:	3. Weight:	4. Hair color:
5. Eye color:			

C. Is the obligor financially responsible for dependent children other than those of this action (listed in section IV)?

Yes  No  Unknown (If yes, provide information below if known.)

1.	a. Legal name (first, middle, last, suffix):	b. Year of birth:
	c. Relationship:	d. Living with:

2.	a. Legal name (first, middle, last, suffix):	b. Year of birth:
	c. Relationship:	d. Living with:

**GENERAL TESTIMONY, PAGE 3**

**II. Personal Information About Obligor (Continued):**

3.	a. Legal name (first, middle, last, suffix):	b. Year of birth:
	c. Relationship:	d. Living with:

D. Does the obligor have an order to pay support for any child listed in C above?  Yes  No  Unknown  
 (If yes, fill out information below, if known, and attach a copy of the order and payment record/proof of payment, if available.)

1.	a. Child(ren) name(s):		
	b. Amount: \$	c. Frequency:	
	d. State and county/tribe/country:	e. Tribunal number:	

2.	a. Child(ren) name(s):		
	b. Amount: \$	c. Frequency:	
	d. State and county/tribe/country:	e. Tribunal number:	

3.	a. Child(ren) name(s):		
	b. Amount: \$	c. Frequency:	
	d. State and county/tribe/country:	e. Tribunal number:	

**III. Legal Relationship of Parents of Children Listed in Section IV:**  See section IX

- A.  Never married to each other
- B.  Married on \_\_\_\_\_ in \_\_\_\_\_  
(Date) (State and county/tribe/country)
- C.  Married by common law for the period \_\_\_\_\_ in \_\_\_\_\_  
(Dates) (State and county/tribe/country)
- D.  Legally separated on \_\_\_\_\_ in \_\_\_\_\_  
(Date) (State and county/tribe/country)
- E.  Divorce pending in \_\_\_\_\_  
(State and county/tribe/country)
- F.  Divorced on \_\_\_\_\_ in \_\_\_\_\_  
(Date) (State and county/tribe/country)
- G.  Other \_\_\_\_\_

**IV. Dependent Child(ren) in This Action:**  See section IX

A.	1. Legal name (first, middle, last, suffix):	2. Parentage established? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	3. Child care expense per month \$ _____	4. Support order established? <input type="checkbox"/> Yes <input type="checkbox"/> No	5. Living with petitioner? <input type="checkbox"/> Yes <input type="checkbox"/> No
6. Does the child receive benefits from Social Security, VA, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, complete the information below.) _____ \$ _____ per month <small>(Benefit type(s))</small> Based on claim of _____ Relationship to child: _____ <small>(Name)</small>			
7. Tribal Affiliation <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, basis of tribal affiliation: _____)			

**GENERAL TESTIMONY, PAGE 4**

**IV. Dependent Child(ren) in This Action (Continued):**

B.	1. Legal name (first, middle, last, suffix): _____	2. Parentage established? [ ] Yes [ ] No
	3. Child care expense per month \$ _____	4. Support order established? [ ] Yes [ ] No
	5. Living with petitioner? [ ] Yes [ ] No	
	6. Does the child receive benefits from Social Security, VA, etc.? [ ] Yes [ ] No (If yes, complete the information below.) _____ \$ _____ per month (Benefit type(s)) Based on claim of _____ Relationship to child: _____ (Name)	
	7. Tribal Affiliation [ ] Yes [ ] No (If yes, basis of tribal affiliation: _____)	

C.	1. Legal name (first, middle, last, suffix): _____	2. Parentage established? [ ] Yes [ ] No
	3. Child care expense per month \$ _____	4. Support order established? [ ] Yes [ ] No
	5. Living with petitioner? [ ] Yes [ ] No	
	6. Does the child receive benefits from Social Security, VA, etc.? [ ] Yes [ ] No (If yes, complete the information below.) _____ \$ _____ per month (Benefit type(s)) Based on claim of _____ Relationship to child: _____ (Name)	
	7. Tribal Affiliation [ ] Yes [ ] No (If yes, basis of tribal affiliation: _____)	

**V. Health Care Coverage:**

[ ] See section IX

A. **Health Care Coverage for Child(ren):** For each child listed in section IV, complete the information below.

1. a.	Child's name: _____ Does this child have health care coverage? [ ] Yes [ ] No [ ] Unknown (If no or unknown, skip to 1.e.)
b.	Health care coverage is provided by (check all that apply): [ ] Medicaid (Skip to 1.e.) [ ] CHIP (Skip to 1.e.) [ ] TRICARE (Skip to 1.e.) [ ] Indian Health Service (Skip to 1.e.) [ ] Petitioner through an individual policy (Continue to 1.c below.) [ ] Petitioner through his/her employer (Continue to 1.c below.) [ ] Respondent through an individual policy (Continue to 1.c below.) [ ] Respondent through his/her employer (Continue to 1.c below.) [ ] Other person: _____ Relationship to child: _____ (Complete 1.c below.)
c.	Health care coverage provider name: _____ Address: _____ Policy ID number: _____ Group number: _____
d.	Is this a child only policy? [ ] Yes [ ] No (If yes, what is the monthly premium for this child only? \$ _____)
e.	Who claims a dependency exemption for the child for federal tax purposes? [ ] Obligee [ ] Obligor [ ] Other If other, identify the person: _____ Relationship to child: _____ (Attach a copy of any order addressing the dependency exemption.)
f.	Does the individual entitled to claim the dependency exemption change from year to year? [ ] Yes [ ] No (If yes, explain.) _____

**GENERAL TESTIMONY, PAGE 5**

**V. Health Care Coverage (Continued):**

2. a. Child's name: \_\_\_\_\_  
 Does this child have health care coverage?  Yes  No  Unknown (If no or unknown, skip to 2.e.)  
 If yes, is all the information the same as Child 1?  Yes (Skip to 2.e.)  No (Continue with 2.b.)

b. Health care coverage is provided by (check all that apply):  
 Medicaid (Skip to 2.e.)  CHIP (Skip to 2.e.)  TRICARE (Skip to 2.e.)  
 Indian Health Service (Skip to 2.e.)  
 Petitioner through an individual policy (Continue to 2.c below.)  
 Petitioner through his/her employer (Continue to 2.c below.)  
 Respondent through an individual policy (Continue to 2.c below.)  
 Respondent through his/her employer (Continue to 2.c below.)  
 Other person: \_\_\_\_\_ Relationship to child: \_\_\_\_\_ (Complete 2.c below.)

c. Health care coverage provider name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Policy ID number: \_\_\_\_\_ Group number: \_\_\_\_\_

d. Is this a child only policy?  Yes  No (If yes, what is the monthly premium for this child only? \$ \_\_\_\_\_)

e. Who claims a dependency exemption for the child for federal tax purposes?  Obligee  Obligor  Other  
 If other, identify the person: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
 (Attach a copy of any order addressing the dependency exemption.)

f. Does the individual entitled to claim the dependency exemption change from year to year?  
 Yes  No (If yes, explain in section IX.)

3. a. Child's name: \_\_\_\_\_  
 Does this child have health care coverage?  Yes  No  Unknown (If no or unknown, skip to 3.e.)  
 If yes, is all the information the same as Child 1?  Yes (Skip to 3.e.)  No (Continue with 3.b.)

b. Health care coverage is provided by (check all that apply):  
 Medicaid (Skip to 3.e.)  CHIP (Skip to 3.e.)  TRICARE (Skip to 3.e.)  
 Indian Health Service (Skip to 3.e.)  
 Petitioner through an individual policy (Continue to 3.c below.)  
 Petitioner through his/her employer (Continue to 3.c below.)  
 Respondent through an individual policy (Continue to 3.c below.)  
 Respondent through his/her employer (Continue to 3.c below.)  
 Other person: \_\_\_\_\_ Relationship to child: \_\_\_\_\_ (Complete 3.c below.)

c. Health care coverage provider name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Policy ID number: \_\_\_\_\_ Group number: \_\_\_\_\_

d. Is this a child only policy?  Yes  No (If yes, what is the monthly premium for this child only? \$ \_\_\_\_\_)

e. Who claims a dependency exemption for the child for federal tax purposes?  Obligee  Obligor  Other  
 If other, identify the person: \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
 (Attach a copy of any order addressing the dependency exemption.)

f. Does the individual entitled to claim the dependency exemption change from year to year?  
 Yes  No (If yes, explain in section IX.)

**GENERAL TESTIMONY, PAGE 6**

**V. Health Care Coverage (Continued):**

**B. Health Care Coverage for Petitioner:** Does the petitioner have health care coverage?  Yes  No (If no, skip to B.4.)

1. Petitioner's health care coverage is provided by:  Medicaid (Skip to B.4.)  TRICARE (Skip to C.)  
 Indian Health Service (Skip to C.)  
 Self through his/her employer (Continue to B.2 below.)  
 Self through an individual policy (Continue to B.2 below.)  
 Other person: \_\_\_\_\_ Relationship to petitioner: \_\_\_\_\_ (Complete B.2 below.)
2. Health care coverage provider name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Policy ID number: \_\_\_\_\_ Group number: \_\_\_\_\_  
 Monthly premium \$ \_\_\_\_\_ Portion for the child(ren) listed in section IV: \$ \_\_\_\_\_
3. Other than children of this action listed in section IV, are other adults and/or child(ren) included in this plan?  Yes  No  
 (If yes, provide information below.)  
 Total number of adults: \_\_\_\_\_ Total number of children: \_\_\_\_\_
4. If the petitioner does not have health care coverage or the coverage is through Medicaid, is employer-sponsored coverage available for:
  - a. Self  Yes  No
  - b. Child(ren) listed in section IV  Yes  No (If no, skip to C.)
5. Based on the residence of the child(ren), is the petitioner's employer-sponsored coverage accessible to the child(ren) in section IV?  Yes  No  Unknown (If no, skip to C.)
6. How much would the premiums be for an insurance plan offered by the petitioner's employer?
  - a. For self: \$ \_\_\_\_\_ per \_\_\_\_\_ (weekly, bi-weekly, semi-monthly, monthly, quarterly, yearly)
  - b. To add child(ren) in section IV: \$ \_\_\_\_\_ per \_\_\_\_\_ (weekly, bi-weekly, semi-monthly, monthly, quarterly, yearly)

**C. Health Care Coverage for Respondent:** Does the respondent have health care coverage?  Yes  No (If no, skip to C.4.)  
 Unknown (If unknown, skip to D.)

1. Respondent's health care coverage is provided by:  Medicaid (Skip to C.4.)  TRICARE (Skip to D.)  
 Indian Health Service (Skip to D.)  Unknown (Skip to D.)  
 Self through his/her employer (Continue to C.2 below.)  
 Self through an individual policy (Continue to C.2 below.)  
 Other person: \_\_\_\_\_ Relationship to respondent: \_\_\_\_\_ (Complete C.2 below.)
2. Health care coverage provider name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Policy ID number: \_\_\_\_\_ Group number: \_\_\_\_\_  
 Monthly premium \$ \_\_\_\_\_ Portion for the child(ren) in section IV: \$ \_\_\_\_\_
3. Other than children listed in section IV, are other adults and/or child(ren) included in this plan?  Yes  No  
 (If yes, provide information below.)  
 Total number of adults: \_\_\_\_\_ Total number of children: \_\_\_\_\_
4. If the respondent does not have health care coverage or the coverage is through Medicaid, is employer-sponsored coverage available for:
  - a. Self  Yes  No  Unknown (If no or unknown, skip to question D.)
  - b. Children listed in section IV  Yes  No  Unknown (If no or unknown, skip to question D.)
5. Based on the residence of the child(ren), is the respondent's employer-sponsored coverage accessible to the child(ren) in section IV?  Yes  No  Unknown (If no, skip to question D.)



**GENERAL TESTIMONY, PAGE 7**

**V. Health Care Coverage (Continued):**

6. How much would the premiums be for an insurance plan offered by the respondent's employer?
- a. For self: \$ \_\_\_\_\_ per \_\_\_\_\_ (weekly, bi-weekly, semi-monthly, monthly, quarterly, yearly)
- b. To add child(ren) in section IV: \$ \_\_\_\_\_ per \_\_\_\_\_ (weekly, bi-weekly, semi-monthly, monthly, quarterly, yearly)
- D. Do any of the children listed in section IV have special needs or extraordinary medical expenses not covered by insurance?  Yes  No  Unknown (If yes, provide additional information about the child(ren) involved, the type of needs/medical expenses, and the related costs in section IX.)
- E. Is the petitioner asking to be reimbursed for medical expenses paid?  Yes  No (If yes, provide information below.)  
 Balance: \$ \_\_\_\_\_ as of \_\_\_\_\_ (date) (Provide date, type of expense, and cost in section IX.)
- F. Is the petitioner asking to be compensated for ongoing medical expenses?  Yes  No (If yes, provide information below.)  
 Type of expense: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ per \_\_\_\_\_ (frequency)  
 (Provide additional information about the child(ren) involved, the need for ongoing expenses, and the expenses in section IX.)

**VI. Additional Information for Child Support Calculation:**

See section IX

- A. **Establishment** (If no child support order exists, complete the following section.):
1. Does a custody/parenting time order exist?  Yes  No (If yes, complete the information below and attach a copy of the order.)  
 Issuing tribunal number: \_\_\_\_\_ Date of order: \_\_\_\_\_
2. If an order does not exist, is there a written custody/parenting time agreement?  Yes  No (If yes, attach a copy.)
3. In the past 12 months or since separation (whichever is shorter), how many overnights has the child(ren) stayed with obligee \_\_\_\_\_ obligor \_\_\_\_\_?
4. Is child support sought for a period of time prior to the date of the petition for support (Uniform Support Petition)?  
 Yes  No (If yes, complete the following questions and section VIII for the period of time.)

a.	Support is sought from the following date: _____		
b.	During the period of time for which retroactive support is being sought, did the child(ren) reside with the obligor, other than the time specified under an existing custody/parenting time order? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, describe.) _____		
c.	During the period of time for which retroactive support is being sought, did the obligor make direct payments to the obligee? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, attach an affidavit of payments.)		
d.	Was public assistance paid for any of the children listed in section IV? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, check the appropriate box and provide the period of benefit and the state.)		
	<input type="checkbox"/> TANF	_____ / _____ First month                      year	To _____ / _____ Last month                      year
	<input type="checkbox"/> Medicaid	_____ / _____ First month                      year	To _____ / _____ Last month                      year
	<input type="checkbox"/> Foster Care	_____ / _____ First month                      year	To _____ / _____ Last month                      year
		By: _____	State

**GENERAL TESTIMONY, PAGE 8**

---

**VI. Additional Information for Child Support Calculation (Continued):**

B. **Modification** (If a child support order exists that the petitioner seeks to modify, complete the following section.):

1. Indicate the basis for the modification petition (check all that apply):
    - a. The earnings of the obligor have:  
 substantially increased  
 substantially decreased
    - b. The earnings of the obligee have:  
 substantially increased  
 substantially decreased
    - c. The needs of the child(ren) have:  
 substantially increased  
 substantially decreased
    - d.  The current support order was most recently established or modified at least 3 years ago or such lesser time as permitted by the laws of the responding jurisdiction.
    - e.  Other; explain: \_\_\_\_\_
  2. Does a custody/parenting time order exist?  Yes  No (If yes, attach a copy of the order.)  
Issuing tribunal number \_\_\_\_\_ Date of order \_\_\_\_\_
  3. If a custody/parenting time order does not exist, is there a written custody/parenting time agreement?  Yes  No  
(If yes, attach a copy of the agreement.)
  4. In the past 12 months or since separation (whichever is shorter), how many overnights has the child(ren) stayed with the obligee \_\_\_\_\_ obligor \_\_\_\_\_?
- 

**VII. Support Order and Payment:**

See section IX

- A. Is there an order for divorce or legal separation involving the children in this action?  
 Yes  No (If yes, provide a copy of the order.)
  - B. Does a current support order exist?  Yes  No (If yes, attach obligor's support payment history.)
  - C. Does the support order require the obligor to pay amounts to anyone other than to the State Disbursement Unit (SDU) (e.g., directly to the obligee, child care provider, or health care provider)?  
 Yes  No (If yes, complete D.)
  - D. Has the obligor made any direct payments under the order noted in C?  
 Yes  No (If yes, attach an affidavit of payments.)
  - E. If a support order does not exist, has the obligor made any voluntary support payments?  
 Yes  No (If yes, attach an affidavit of payments.)
- 

**VIII. Financial Information:**

See section IX

Information required varies based on responding jurisdiction's support guidelines. Petitioner includes an obligee caretaker with legal custody of the child(ren).

Monthly income from all sources:

1. Is the petitioner employed?  Yes; occupation: \_\_\_\_\_  No; income source: \_\_\_\_\_

**GENERAL TESTIMONY, PAGE 9**

**VIII. Financial Information (Continued):**

Monthly income from all sources (Continued):

2. Gross monthly income amounts:	<u>Petitioner</u>
a) Public Assistance	
i) Supplemental Security Income (SSI)	\$ _____
ii) TANF	\$ _____
iii) Other	\$ _____
b) Base pay salary, wages	\$ _____
c) Overtime, commission, tips, bonuses, part time	\$ _____
d) Unemployment compensation	\$ _____
e) Worker's compensation	\$ _____
f) Social Security Disability (not SSI)	\$ _____
g) Social Security Retirement	\$ _____
h) Dividends and interest	\$ _____
i) Trust/annuity income	\$ _____
j) Pensions, retirement	\$ _____
k) Child support	\$ _____
l) Spousal support/alimony	\$ _____
m) Income producing assets	\$ _____
n) All other sources (specify)	\$ _____

---

3. Deductions from gross pay:	
a) Federal income tax	\$ _____
b) State income tax	\$ _____
c) Local tax	\$ _____
d) FICA	\$ _____
4. Other deductions:	
a) Mandatory retirement	\$ _____
b) Nonmandatory retirement	\$ _____
c) Medical insurance	\$ _____
d) Union dues	\$ _____
e) Other (specify)	\$ _____

---

5. Gross income prior year: \$ \_\_\_\_\_

**IX. Other Pertinent Information:**

[ ] Continued on attached sheet(s), incorporated by reference.

**GENERAL TESTIMONY, PAGE 10**

---

**X. Attached and Incorporated by Reference:**

- Required number of copies of all support orders for the case
- Certified child support payment records
- Arrears balance and/or accrued Interest (affidavit of arrears)
- Payment history
- Copies of three most recent pay stubs from current employer(s)
- Copies of unreimbursed medical bills for the child(ren) in this action
- Copy of most recent federal tax return
- Declaration in Support of Establishing Parentage for each child whose parentage is at issue
- Copy of child(ren)'s birth certificate(s)/record(s)
- Acknowledgment of parentage
- Documentation of legal custody/guardianship of child(ren)
- Documentation of child care expenses
- Documentation of ongoing medical expenses for the child(ren) in this action
- Documentation in support of request for modification
- Copy of order for divorce or legal separation involving the child(ren) in this action
- Other: \_\_\_\_\_

Additional attached document(s), incorporated by reference.

---

**XI. Declaration:**

Under penalty of perjury, all information and facts stated in this General Testimony are true to the best of my knowledge and belief.

Date	Petitioner (Name)	Signature
Date	Name/Title, Agency or Tribunal Representative	Signature

**Encryption Requirements:**

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

**PERSONAL INFORMATION FORM FOR UIFSA § 311 – TO BE FILED WITH A TRIBUNAL**

**Nondisclosure finding/affidavit attached**

**THIS FORM CONTAINS SENSITIVE INFORMATION – DO NOT FILE THIS FORM IN A PUBLIC ACCESS FILE**

The information on this form is filed with the petition or pleading and may be disclosed to the parties in the case, unless accompanied by a nondisclosure finding/affidavit.

If you are not the intended recipient, you are hereby notified that any use, disclosure, distribution, or copying of this form or its contents is strictly prohibited.

**NOTE:**

**This form sent through EDE**

**Section 1. Case Information:**

Initiating jurisdiction name:	Responding jurisdiction name:
Initiating IV-D case identifier:	Responding IV-D case identifier:
Initiating tribunal number:	Responding tribunal number:

**Section 2. Parent/Caretaker Information:**

Parent <input type="checkbox"/> Obligee or <input type="checkbox"/> Obligor	Parent <input type="checkbox"/> Obligee or <input type="checkbox"/> Obligor
Legal name (first, middle, last):	Legal name (first, middle, last):
SSN:	SSN:
Home address (street, city, state, zip):	Home address (street, city, state, zip code):

Caretaker - Obligee (When obligee is not the child(ren)'s parent)
Legal name (first, middle, last):
SSN:
Home address (street, city, state, zip code):

**Section 3. Child(ren) Information:**

<b>Child #1 legal name</b> (first, middle, last):	
Child's address (street, city, state, zip code):	
The child began residing in _____ (state) on _____ (month/year).	
Child's SSN:	Child's date of birth:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>Child #2 legal name</b> (first, middle, last):	
Child's address (street, city, state, zip code):	
The child began residing in _____ (state) on _____ (month/year).	
Child's SSN:	Child's date of birth:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	

<b>Child #3 legal name</b> (first, middle, last):	
Child's address (street, city, state, zip code):	
The child began residing in _____ (state) on _____ (month/year).	
Child's SSN:	Child's date of birth:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	

Additional Child(ren) Information Attached

**Encryption Requirements:**

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to emails, may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

## INSTRUCTIONS FOR PERSONAL INFORMATION FORM FOR UIFSA § 311 TO BE FILED WITH A TRIBUNAL

### PURPOSE OF THE FORM:

The Personal Information Form for UIFSA § 311 is intended to safeguard the privacy of individuals by providing a means to record required UIFSA personal information on a separate document rather than requiring it to appear on all of the forms needed to process their case. This form can be filed with the tribunal, but should not be filed in a public access file.

**Nondisclosure Finding/Affidavit attached** - If there is a finding prohibiting disclosure of a party's or child(ren)'s address/identifying information or an affidavit alleging that disclosure of such information would result in risk of harm, check the box for "Nondisclosure Finding/Affidavit attached" and attach a copy of the finding/affidavit in accordance with section 312 of UIFSA. If there is a finding/affidavit prohibiting disclosure, the information must be sealed and may not be disclosed to the other party or the public. You may provide the address of the IV-D agency as a substitute address for the protected party.

### THIS FORM CONTAINS SENSITIVE INFORMATION – DO NOT FILE THIS FORM IN A PUBLIC ACCESS FILE.

This form includes information that may pose a significant risk to an individual if made available in a public forum or inappropriately disclosed. This form can be filed with the tribunal, but should not be filed or included in a record available to the general public.

The information on this form may be disclosed to the parties in the case, unless accompanied by a nondisclosure finding/affidavit.

If you are not the intended recipient, you are hereby notified that any use, disclosure, distribution, or copying of this form or its contents is strictly prohibited.

*Italicized text that appears within a "box" refers to policy or provides additional information.*

*For an address outside the United States, be sure to include the foreign country and postal code.*

*Tribal IV-D programs may choose to use the federal Intergovernmental forms. However, they are not required to use or accept such forms. If you have any questions, contact the tribal IV-D agency directly using the contact information on the OCSE website.*

*Where forms request a locator code, note that tribal locator codes uniquely identify tribal cases with "9" in the first position, 0 (zero) in the second position, and then a 3-character tribal code defined by the Bureau of Indian Affairs (BIA).*

*UIFSA requires that the petition or accompanying documents include certain identifying information regarding the parties and child(ren) (e.g., residential address, social security number) unless a party alleges in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child would be jeopardized by disclosure of such information. In that event, the information must be sealed. In some states a tribunal may have authority to make a nondisclosure finding.*

*If a jurisdiction has reason to believe that information should not be released because of safety concerns, it should ensure that there is a nondisclosure finding or an allegation in an affidavit or the pleading that disclosure of identifying information would result in a risk of harm, as provided under section 312 of UIFSA. In addition to identifying information included on this form, it may be appropriate to submit certain financial information under seal.*

In the "NOTE:" section, check any of the following that apply:

- **This form sent through EDE** – Check if this form was sent through the Electronic Document Exchange (EDE).

The following options are available for making IV-D requests and sending information on IV-D cases:

1. CSENet transactions are the recommended method for making requests or sending information to another state. If CSENet is not listed as an option on the form, then it cannot be used to convey any of the requests for information or IV-D requests provided on the form. Supporting documentation should be sent through EDE, whenever possible. If certified copies are needed, hard copies should also be sent by mail. Mail or fax may also be used for all documents when EDE is not available.
2. If CSENet transactions are not available in your state, EDE is the next preferred method for transmitting your request or information. Both your state and the receiving state must be using the EDE application to use this communication method.
3. If the EDE application is not available in your state or the receiving state, then mail or fax must be used to communicate your request.

### Section 1. Case Information:

In the space provided, enter:

- Initiating jurisdiction name
- Initiating IV-D case identifier
- Initiating tribunal number
- Responding jurisdiction name
- Responding IV-D case identifier, if known
- Responding tribunal number, if known

*The initiating jurisdiction is the jurisdiction that referred the case to the responding jurisdiction for services. The responding jurisdiction is the jurisdiction that is working the case at the request of the initiating jurisdiction. Under "IV-D case identifier", enter the number/identifier identical to the one submitted on the Federal Case Registry, which is a left-justified up to 15-character alphanumeric field, allowing all characters except asterisk and backslash, and with all characters in uppercase. Under "tribunal number", you may enter the docket number, cause number, or any other appropriate reference number that the initiating and responding tribunal have assigned to the case.*

### Section 2. Parent/Caretaker Information:

Identify each parent as an obligee or obligor as appropriate. UIFSA defines obligor to include a person alleged to be a parent. Provide the following information in the appropriate boxes:

- Full legal name (last, middle, first, suffix)
- Social Security Number
- Home address (street, city, state, zip code) – include all parts of the address (e.g., apartment number)

Complete the caretaker information only if the child(ren)'s caretaker is someone other than the child(ren)'s parent.

- Full legal name (last, middle, first, suffix).
- Social Security Number.
- Home address (street, city, state, zip code) – include all parts of the address (e.g., apartment number).

### Section 3. Child(ren) Information:

Identify all of the children for whom support is owed or being sought. For each child, enter:

- Full legal name (last, middle, first, suffix)
- Home address (street, city, state, zip) – include all parts of the address (e.g., apartment number)
- The month and year the child began residing in this state
- Social Security Number
- Date of birth
- Gender

Check Additional Child(ren) Information Attached" if additional space is needed or if support is owed or sought for more than three children.



**Encryption Requirements:**

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails, may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

**The Paperwork Reduction Act of 1995**

Public reporting burden for this collection of information is estimated to average 0.05 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	<i>FOR COURT USE ONLY</i>  <b>DRAFT 2</b>  NOT APPROVED BY THE JUDICIAL COUNCIL
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: <input type="checkbox"/> OTHER PARENT:	
<b>NOTICE OF REGISTRATION OF OUT-OF-STATE SUPPORT ORDER</b>  <input type="checkbox"/> Support Order <input type="checkbox"/> Income Withholding Order	CASE NUMBER:

1. To *(name)*:
  
2. You are notified that an  Out-of-State Support Order  Out-of-State Order for Income Withholding has been registered with this court. A copy of the order and the **letter of transmittal requesting registration** are attached.
  
3. The amount of arrears is specified in the attached **letter of transmittal requesting registration or sworn statement**.  
 The amount of the alleged arrears is: \_\_\_\_\_ as of \_\_\_\_\_ .  
 The arrears have a U.S. dollar equivalence of \_\_\_\_\_ as of \_\_\_\_\_ . *(Only applicable to foreign support orders.)*
  
4. The registered order is enforceable in the same manner as a support order made by a California court as of the date that the **letter of transmittal requesting registration and order** are filed.
  
5. If you want to contest the validity or enforcement of the registered order, you must request a hearing within 20 days after notice. You can request a hearing by completing and filing a *Request for Hearing Regarding Registration of Out-of-State Support Order* (form FL-575).
  
6. If you fail to contest the validity or enforcement of the attached order within 20 days after notice, the order will be confirmed by the court and you will be unable to contest any portion of the order including the amount of arrears as specified in the letter of transmittal requesting registration **or sworn statement**.

**CLERK'S CERTIFICATE OF MAILING**

7. I certify that I am not a party to this cause and that a copy of the out-of-state order, **and the documents and relevant information accompanying the order**, were sent to the person named in item 1 by first-class mail. The copies were enclosed in an envelope with postage fully prepaid. The envelope was addressed to the person named in item 1 only at the address listed in the **documents and relevant information accompanying the order**, sealed, and deposited with the U.S. Postal Service

at *(place)*:  
on *(date)*:

8. A copy was sent to the **registering party** on *(date)*:

Date: \_\_\_\_\_ Clerk, by \_\_\_\_\_, Deputy

PARTY WITHOUT ATTORNEY OR ATTORNEY <i>(name, state bar number, and address)</i> : NAME: STATE BAR NO.: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR <i>(name)</i> :	<b>FOR COURT USE ONLY</b>  <b>DRAFT</b> <b>Not approved by</b> <b>the Judicial Council</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
<b>REQUEST FOR HEARING REGARDING REGISTRATION          OF CALIFORNIA SUPPORT ORDER</b>	CASE NUMBER:

**NOTICE OF HEARING**

1. A hearing on this application will be held as follows *(see instructions on how to get a hearing date)*:

a. Date:	Time:	Dept:	Div:	Room:
----------	-------	-------	------	-------

b. The address of the court is  same as noted above  Other *(specify)*:

2. I request that service of the registration of support order be vacated (canceled) because:

- a.  I am not the Obligor (the parent ordered to pay support) named in the statement for registration.
- b.  the support order attached to the statement for registration is not a valid order.
- c.  the amount of arrears (back support) listed in the paperwork attached to the statement for registration is incorrect.  
 The correct amount of arrears is *(specify amount)*: \$  Supporting documents attached.
- d.  the order has been appealed, and the appeal is pending or the order has been stayed by another court.
- e.  Other *(specify)*:

3. Explain the facts in support of your request:

Contained in the attached declaration.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_
\_\_\_\_\_

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

PARTY WITHOUT ATTORNEY OR ATTORNEY (name, state bar number, and address): NAME: STATE BAR NO.: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	<b>FOR COURT USE ONLY</b>  <b>DRAFT 2</b> <b>Not approved by</b> <b>the Judicial Council</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
<b>REQUEST FOR HEARING REGARDING REGISTRATION</b> <b>OF OUT-OF-STATE SUPPORT ORDER</b>	CASE NUMBER:

**NOTICE OF HEARING**

1. A hearing on this application will be held as follows (see instructions on how to get a hearing date):

a. Date:	Time:	Dept:	Div:	Room:
----------	-------	-------	------	-------

b. The address of the court is  same as noted above  Other (specify):

2. I request that service of the registration of support order be vacated (canceled) because

- a.  the court or tribunal that issued the order did not have personal jurisdiction over me.
- b.  the support order was obtained by fraud.
- c.  the support order has been vacated, suspended, or modified by a later order. (Attach a copy of the later order.)
- d.  the order has been stayed pending appeal.
- e.  the amount of arrears (back support) listed in the letter for transmittal requesting registration or sworn statement is incorrect. The correct amount of arrears is (specify amount): \$  Supporting documents attached.
- f.  some or all of the arrears are not enforceable.
- g.  Other (specify):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_ (TYPE OR PRINT NAME) ▶ \_\_\_\_\_ (SIGNATURE OF DECLARANT)

# Outline of Major Differences Between Non-Hague Foreign Support Orders and Hague Foreign Support Orders

	Non-Hague Foreign Support Orders	Hague Foreign Support Orders
<b>Required Documents</b>	<ul style="list-style-type: none"> <li>• Transmittal letter</li> <li>• 2 copies of order, including 1 certified copy</li> <li>• Sworn or certified statement of arrears</li> <li>• Certain obligor &amp; obligee information</li> <li>• Name/address of person to whom support payments to be sent (if applicable)</li> <li>• Request for DCO, if appropriate</li> </ul>	<ul style="list-style-type: none"> <li>• Transmittal letter</li> <li>• Complete text of order (or abstract by issuing tribunal)</li> <li>• Record: order is enforceable in issuing country</li> <li>• Record attesting to due process (if default order)</li> <li>• Record: arrears and automatic adjustment of support</li> <li>• Record of receipt of free legal assistance in issuing country (if necessary)</li> </ul>
<b>Time Frame to Contest</b>	Within <b>20</b> days after notice of registration	<ul style="list-style-type: none"> <li>• Not later than <b>30</b> days after notice of registration</li> <li>• Not later than <b>60</b> days after notice if contesting party does not reside in US</li> </ul>
<b>Defenses to Recognition of Support Order</b>	<ul style="list-style-type: none"> <li>• Recognition and enforcement of order is manifestly incompatible with public policy, including failure of issuing tribunal to observe minimum standards of due process</li> <li>• Issuing tribunal lacked personal jurisdiction consistent with Section 201;</li> <li>• Order is not enforceable in issuing country;</li> <li>• If default order, there was a lack of due process re: notice &amp; opportunity to be heard</li> </ul>	<p>If a tribunal does not recognize a Hague order because:</p> <ul style="list-style-type: none"> <li>• There was a lack of personal jurisdiction;</li> <li>• There was procedural fraud;</li> <li>• A proceeding between same parties with same purpose is pending before a tribunal of that state and that proceeding was filed first; or</li> <li>• The order is a default order but the notice and opportunity to challenge did not satisfy due process</li> </ul> <p><b>THEN</b></p> <ul style="list-style-type: none"> <li>• The tribunal may not dismiss the proceeding without allowing a reasonable time for a party to request the establishment of a new Convention support order</li> <li>• <b>and</b> the [governmental entity] must take all appropriate measures to request a child support order for the obligee if the application for recognition and enforcement was received through the Central Authority system.</li> </ul>

*"DCO" = Determining Controlling Order*

RECOUVREMENT DES ALIMENTS  
CHILD SUPPORT

Doc. prélim. No 3 (définitif)  
Prel. Doc. No 3 – final

septembre / September 2011



## United States

### **PROFIL DES ÉTATS – CONVENTION RECOUVREMENT DES ALIMENTS DE 2007**

*coordonné par le Bureau Permanent*

\* \* \*

### **COUNTRY PROFILE – 2007 CHILD SUPPORT CONVENTION**

*co-ordinated by the Permanent Bureau*

*Document préliminaire No 3 (définitif) de septembre 2011 à l'intention de la Commission spéciale de novembre 2009 sur la mise en œuvre de la Convention de 2007 sur le recouvrement des aliments et du Protocole de 2007 sur la loi applicable aux obligations alimentaires*

*Preliminary Document No 3 (final) of September 2011 for the attention of the Special Commission of November 2009 on the implementation of the 2007 Child Support Convention and of the 2007 Protocol on the Law Applicable to Maintenance Obligation*



## TABLE OF CONTENTS

### I DESIGNATED CENTRAL AUTHORITIES

- [1. CENTRAL AUTHORITY TO WHICH COMMUNICATION SHOULD BE ADDRESSED \(Art. 4 of the Convention\)](#)
- [2. OTHER DESIGNATED CENTRAL AUTHORITY \(IF APPLICABLE\) \(Art. 4 of the Convention\)](#)
- [3. LANGUAGE REQUIREMENTS \(Art. 44 of the Convention\)](#)
- [4. FUNCTIONS OF CENTRAL AUTHORITIES \(Arts 5 and 6 of the Convention\)](#)
- [5. EFFECTIVE ACCESS TO PROCEDURES \(Art. 14 of the Convention\)](#)
- [6. SPECIFIC FUNCTIONS OF THE CENTRAL AUTHORITIES IN RELATION TO APPLICATIONS UNDER CHAPTER III \(Art. 6\(2\) of the Convention\)](#)

### II INFORMATION CONCERNING APPLICATIONS UNDER THE CONVENTION

- [1. APPLICATIONS FOR RECOGNITION OR RECOGNITION AND ENFORCEMENT OF A DECISION \(Arts. 10\(1\) a\) and 10\(2\) a\) of the Convention\)](#)
- [2. APPLICATIONS FOR RECOGNITION OR RECOGNITION AND ENFORCEMENT OF A MAINTENANCE ARRANGEMENT \(Art. 30 of the Convention\)](#)
- [3. APPLICATIONS FOR ENFORCEMENT OF A DECISION MADE OR RECOGNISED IN THE UNITED STATES \(Art. 10\(1\) b\) of the Convention\)](#)
- [4. APPLICATIONS FOR ENFORCEMENT OF A MAINTENANCE ARRANGEMENT MADE OR RECOGNISED IN THE UNITED STATES \(Arts 30\(2\) and 10\(1\) b\) of the Convention\)](#)
- [5. APPLICATIONS TO ESTABLISH A DECISION IN THE UNITED STATES \(Art. 10\(1\) c\) and d\) of the Convention\)](#)
- [6. APPLICATIONS TO MODIFY A MAINTENANCE DECISION MADE IN THE UNITED STATES \(Art. 10\(1\) e\) and 10\(2\) b\) of the Convention\)](#)
- [7. APPLICATIONS TO MODIFY A MAINTENANCE DECISION MADE IN A STATE OTHER THAN THE UNITED STATES \(Art. 10\(1\) f\) and 10\(2\) c\) of the Convention\)](#)
- [8. EFFECTIVE ACCESS TO PROCEDURES \(Art. 14 of the Convention\)](#)

### III INFORMATION AS TO THE LAWS AND PROCEDURES CONCERNING MAINTENANCE OBLIGATIONS IN THE UNITED STATES

- [1. MAINTENANCE OBLIGATIONS IN RESPECT OF A CHILD \(Art. 57 of the Convention\)](#)
- [2. COMPETENT AUTHORITIES RESPONSIBLE FOR MAINTENANCE DECISIONS AND MAINTENANCE ARRANGEMENTS IN THE UNITED STATES \(Art. 57 of the Convention\)](#)
- [3. INFORMATION REGARDING SYSTEMS FOR PROVIDING BENEFITS IN PLACE OF MAINTENANCE \(Art. 36 of the Convention\)](#)

### IV INFORMATION CONCERNING ENFORCEMENT RULES AND PROCEDURES IN THE UNITED STATES

- [1. GENERAL INFORMATION ABOUT ENFORCEMENT IN THE UNITED STATES \(Art. 57\(1\) d\) of the Convention\)](#)
- [2. DEBTOR PROTECTION RULES \(Art. 57\(1\) d\) of the Convention\)](#)
- [3. OVERVIEW OF ENFORCEMENT PROCEDURES IN THE UNITED STATES \(Art. 57\(1\) d\) of the Convention\)](#)
- [4. MEASURES AVAILABLE FOR ENFORCEMENT OF MAINTENANCE DECISIONS \(Art. 34 of the Convention\)](#)

### V OTHER INFORMATION

- [1. PAYMENT INFORMATION \(WHERE PAYMENTS SHOULD BE SENT\) \(Art. 11\(1\) f\) of the Convention\)](#)

#### 1 GENERAL INFORMATION

- [1. OVERVIEW OF THE PROCESS THAT OCCURS WHEN MAKING AN APPLICATION UNDER ARTICLE 10 OF THE CONVENTION \(Art. 57 of the Convention\)](#)
- [2. METHODS OF CALCULATING MAINTENANCE IN THE UNITED STATES \(Art. 57 of the Convention\)](#)
- [3. ESTABLISHMENT OF PARENTAGE \(Art. 57 of the Convention\)](#)
- [4. FOLLOWING RECOGNITION OF A DECISION BY ANOTHER STATE \(Art. 57 of the Convention\)](#)
- [5. DIRECT REQUESTS TO COMPETENT AUTHORITIES \(WHERE AVAILABLE\) \(Art. 37 of the Convention\)](#)

6. OTHER INFORMATION (Art. 57 of the Convention)

1. CENTRAL AUTHORITY TO WHICH COMMUNICATION SHOULD BE ADDRESSED ( <a href="#">Art. 4 of the Convention</a> )	
a. Name:	United States Central Authority for International Child Support, Department of Health and Human Services, Office of Child Support Enforcement (OCSE)
b. Address:	330 C Street SW 5th Floor Washington, DC 20201
c. Territorial or personal extent of functions, if applicable:	<p>The U.S. Child Support Enforcement Program is a joint federal, state, tribal, and local partnership designed to ensure that parents provide support to their children, authorized and structured under Title IV-D of the U.S. Social Security Act (Title IV-D program). Each individual state within the U.S., as well as certain tribes, the District of Columbia, and three U.S. territories (Guam, Puerto Rico, and the Virgin Islands), operate government funded child support programs. These programs are responsible for locating non-custodial parents, establishing paternity, establishing and reviewing child support obligations, enforcing child support obligations, and collecting and disbursing child support for families. OCSE provides regulatory and programmatic oversight to the child maintenance program. It also operates an expanded Federal Parent Locator Service. OCSE has designated all state Title IV-D program child support agencies (IV-D child support agencies) to perform many of its Central Authority functions under Article 6 of the Convention. These designated state entities include the District of Columbia, Guam, Puerto Rico, and the Virgin Islands but do not include tribal IV-D programs. Information about the laws and procedures of each individual U.S. state can be obtained on the Intergovernmental Reference Guide (IRG) (<a href="http://www.acf.hhs.gov/css/irg-state-map">http://www.acf.hhs.gov/css/irg-state-map</a>). IMPORTANT: The U.S. Central Authority does not process applications under the Convention. Send all applications directly to the appropriate state IV-D agency and not the U.S. Central Authority. See the OCSE Intergovernmental Reference Guide for state IV-D Central Registry contact information.</p>
d. Telephone:	1-202-401-5722



e. Fax:	1-202-401-5655
f. E-mail:	ocseinternational@acf.hhs.gov
g. Website:	http://acf.hhs.gov/programs/css
Contact Person	
First Name	Anne
Last Name	Miller
Telephone	1-202-401-5722
E-mail	ocseinternational@acf.hhs.gov
Language(s):(Keep CTRL pressed to choose multiple languages)	English
Last Update:	2017-03-10 18:53:00.0

2. OTHER DESIGNATED CENTRAL AUTHORITY (IF APPLICABLE) ([Art. 4 of the Convention](#))

a. Name:	
b. Address:	
c. Territorial or personal extent of functions, if applicable:	
d. Telephone:	
e. Fax:	
f. E-mail:	
g. Website:	http://
Contact person	
First Name	
Last Name	
Telephone:	

E-mail:	
Language(s):(Keep CTRL pressed to choose multiple languages)	
Last Update:	2017-03-03 21:23:20.0

### 3. LANGUAGE REQUIREMENTS ([Art. 44 of the Convention](#))

a. Does the United States require that any application and related documents be accompanied by a translation? If so, in what language? <a href="#">(Art. 44(1) of the Convention)</a> *	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> Into official language of the United States; <input type="checkbox"/> Into another language. Please specify.
b. Does the United States have more than one official language? *	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, please specify.
c. If the United States has more than one official language in its territory and cannot, for reasons of internal law, accept for the whole of the United States documents in one of those languages, please specify the language in which documents or translations shall be drawn up for submission in the specified parts of its territory. <a href="#">(Art. 44(2) of the Convention)</a>	Response not available in English Response not available in French Response not available in Spanish
d. For other communications between Central Authorities, does the United States object to the use of either French or English? <a href="#">(Arts 44(3) and 62 of the Convention)</a> *	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Object to English; <input checked="" type="checkbox"/> Object to French.
Last Update	2017-03-10 18:55:09.0

### 4. FUNCTIONS OF CENTRAL AUTHORITIES ([Arts 5 and 6 of the Convention](#))

a. Can the functions of the Central Authorities be performed by public bodies, or other bodies subject to the supervision of the competent authorities of the United States? <a href="#">(Art. 6(3) of the Convention)</a> *	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, please complete question 4.b. below.
b. Designation and contact details of any such public bodies or other bodies and the extent of their functions. <a href="#">(Art. 6(3) of the Convention)</a>	Name: OCSE has designated IV-D child support agencies to perform many of its Article 6 functions. Contact details about the individual U.S. IV-D child

	<p>support agencies are located on the IRG (<a href="http://www.acf.hhs.gov/css/irg-state-map">http://www.acf.hhs.gov/css/irg-state-map</a>).</p> <p>Extent of functions:</p> <p>Telephone:</p> <p>Fax:</p> <p>E-mail:</p> <p>Website:</p> <p><input type="checkbox"/> Other information, please specify:</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>c. How does the United States initiate or facilitate the institution of proceedings in respect of applications under Chapter III? (<a href="#">Art. 6(1) b</a>) of the Convention) *</p>	<p><input type="checkbox"/> The Central Authority has authority to initiate such proceedings;</p> <p><input type="checkbox"/> The Central Authority lacks authority to initiate such proceedings. It will refer the matter to the appropriate public body with authority to initiate such proceedings;</p> <p><input checked="" type="checkbox"/> Other, please specify.</p> <p>English version</p> <p>The U.S. Central authority (OCSE) has designated IV-D child support agencies as the public bodies with authority to initiate such proceedings.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>d. Does the United States have an agreement with another Contracting State for the purpose of improving the application of the Convention between the United States and that other Contracting State? (<a href="#">Art. 51 of the Convention</a>) *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> Bilateral agreement (please provide the title of the agreement and a link to a website for a copy of that agreement if available);</p> <p>English version</p>

	<p>The U.S. has reciprocity agreements or declarations with 26 countries, Provinces and Territories, each of which predate entry into force of the Convention for the United States. For copies, please see the list of Foreign Reciprocating Countries (<a href="http://www.acf.hhs.gov/css/resource/foreign-reciprocating-countries">http://www.acf.hhs.gov/css/resource/foreign-reciprocating-countries</a>) and select the applicable country.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p> <p><input type="checkbox"/> Other (please provide the title of the agreement and a link to a website for a copy of that agreement if available).</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
--	--

Last Update	2017-03-10 18:58:53.0
-------------	-----------------------

5.EFFECTIVE ACCESS TO PROCEDURES ([Art. 14 of the Convention](#))

<p>How does the United States provide applicants with effective access to procedures? *</p>	<p><input checked="" type="checkbox"/> the United States provides free legal assistance in accordance with Articles 14 to 17 (<a href="#">Art. 14(2)</a>). Please see Stage 1, question I.6.a below.</p> <p><input type="checkbox"/> the United States has procedures that enable the applicant to make the case without the need for legal assistance and the Central Authority provides such services as are necessary free of charge (<a href="#">Art. 14(3)</a>).</p>
---	---

Last Update	2017-03-10 19:05:39.0
-------------	-----------------------

6. SPECIFIC FUNCTIONS OF THE CENTRAL AUTHORITIES IN RELATION TO APPLICATIONS UNDER CHAPTER III ([Art. 6\(2\) of the Convention](#))

<p>a. How does the Central Authority in the United States provide or facilitate the provision of legal assistance in its jurisdiction? (<a href="#">Art. 6(2) a</a>) of the Convention and for the definition of "legal assistance" see <a href="#">Art. 3 c</a>) of the Convention) *</p>	<p><input type="checkbox"/> Legal assistance is not required in most cases. Administrative assistance is provided. Legal assistance is provided where required;</p> <p><input type="checkbox"/> Legal assistance is provided in all proceedings, including appeals;</p>
--	---

Other, please specify.

English version

The Central Authority (OCSE) does not provide legal assistance. Legal assistance is generally not required. Where administrative assistance is being provided under the Convention and legal assistance for a particular case is required, such assistance is provided by the IV-D child support agency managing the case.

Response not available in French

Response not available in Spanish

Where legal assistance is required :

Legal assistance is provided by lawyers employed by the Central Authority;

Legal assistance is provided by lawyers employed in State legal assistance bodies;

Legal assistance is provided by private lawyers and funded by the State;

Other, please explain.

English version

There is no attorney/client relationship between the IV-D child support agency and applicant. IVD child support agencies provide all necessary and appropriate administrative and legal assistance to the families they serve. The services vary based on case circumstances, and local laws and procedures.

Response not available in French

Response not available in Spanish

b. How does the Central Authority in the United States help locate a debtor or creditor resident in its territory? ([Art. 6\(2\) b](#)) of the Convention) \*

The Central Authority conducts a manual search, using the following publicly available directories :

Telephone directory;

Electoral roll;

Other, please specify.

Response not available in English

Response not available in French

Response not available in Spanish

The Central Authority conducts an automated search, using the following government databases :

Social security database;

Taxation database;

Employment database;

Transportation database;

Other. Please specify.

Response not available in English

Response not available in French

Response not available in Spanish

The Central Authority refers a locate request to an appropriate public body, which provides locate services. Please specify.

English version

In addition to the Federal Parent Locator Service, which accesses national databases, each IV-D child support agency provides locate services, using manual and automated searches.

Response not available in French

Response not available in Spanish

The Central Authority refers a locate request to a private entity, which provides locate services. Please specify.

Response not available in English

Response not available in French

Response not available in Spanish

The Central Authority searches population registry databases.

Other. Please specify.

Response not available in English

Response not available in French

Response not available in Spanish

c. As a requested State, how does the Central Authority in the United States help obtain within its territory relevant information concerning the income and if necessary other financial circumstances, including the location of assets, of resident debtors or creditors?

[\(Art. 6\(2\) c\)](#) of the Convention) \*

The Central Authority has access to the following information through available databases :

Salaries;

Other income;

Tax information;

Receipt of public assistance;

Financial institution records;

Ownership of motor vehicles;

Land and title registry;

Moveable property registry;

Other, please specify.

Response not available in English

Response not available in French

Response not available in Spanish

The Central Authority refers the application to the appropriate public body that can obtain relevant financial and asset information. Please specify.

Response not available in English

Response not available in French

Response not available in Spanish

- The Central Authority will contact the debtor or creditor and request that the individual provide information about his or her financial circumstances.
- The Central Authority will exercise legal powers to require that information be provided by persons or bodies, where applicable.
- Other, please specify.

English version

Applications under Chapter III should be sent to the central registry of the appropriate IV-D child support agency, which will usually be where the debtor or creditor resides. Contact information for each central registry can be found on the IRG (<http://www.acf.hhs.gov/css/irg-state-map>). The IV-D agency has access to databases with information about salaries, other income, tax information, receipt of public assistance, financial institution records, ownership of motor vehicles, and real property title registries.

Response not available in French

Response not available in Spanish

d. How does the Central Authority in the United States encourage amicable solutions with a view to obtaining voluntary payment of maintenance, where suitable by use of mediation, conciliation, or similar processes? ([Art. 6\(2\) d](#)) of the Convention) \*

- The use of mediation, conciliation, or similar processes is mandatory in every recovery of maintenance case;
- The use of mediation, conciliation, or similar processes is encouraged in every recovery of maintenance case;
- The use of mediation, conciliation, or similar processes depends upon the facts of the case. Please specify;

Response not available in English

Response not available in French

Response not available in Spanish

- As a general rule, before introducing an enforcement procedure, an amicable solution is sought with the debtor, to whom the possibility to make voluntary payments is offered;



Other, please specify.

English version

Individual IV-D child support agencies attempt amicable solutions based on local law. Please see the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&selProfileQuestion=5>) for more information.

Response not available in French

Response not available in Spanish

e. How does the Central Authority in the United States facilitate the ongoing enforcement of maintenance decisions including any arrears? ([Art. 6\(2\) e](#)) of the Convention) \*

The Central Authority has enforcement responsibility. Enforcement remedies are listed in Stage 1, question IV.4.a;

The Central Authority refers an application requiring ongoing enforcement to the appropriate public body. Enforcement remedies are listed in Stage 1, question IV.4.a;

Other, please specify.

Response not available in English

Response not available in French

Response not available in Spanish

f. How does the Central Authority in the United States facilitate the collection and expeditious transfer of maintenance payments? ([Art. 6\(2\) f](#)) of the Convention) \*

The Central Authority is responsible for the collection of maintenance payments.

The Central Authority is not responsible for the collection of maintenance. It refers an application requiring ongoing collection to the appropriate public body.

The Central Authority is not responsible for the collection of maintenance payments. This collection is handled privately. Please indicate how these payments are made.

Methods to collect payments

Payment must be made to a central location;

Payment may be made at local locations;

Payment may be made by preauthorised withdrawal from a financial institution account;

Payment may be made by payroll deductions;

- Payment may be made by cheque or warrant;
- Payment may be made by credit card;
- Payment may be made by electronic funds transfer;
- Payment may be made in cash;
- Other, please specify.

English version

Methods to collect payments will be based on local laws and procedures. Please see the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&selProfileQuestion=7>) for more information.

Response not available in French

Response not available in Spanish

Transfer of payments to the requesting State

- The Central Authority or public body is responsible for transferring maintenance payments:
  - Payments may be transferred by cheque;
  - Payments may be transferred by electronic funds transfer.
- The Central Authority, upon request from a Central Authority in the requesting State, will obtain and provide information from the appropriate public body concerning the transfer of maintenance payments.
- Other, please specify.

English version

There are federal rules for prompt distribution of payments. Unless other arrangements are made on a specific case, the rules require distribution within 2 days. The availability of electronic funds transfers in international cases depends on the IV-D child support agency.

Response not available in French

Response not available in Spanish

g. How does the Central Authority in the United States facilitate the obtaining of documentary or other evidence domestically?

([Art. 6\(2\) g](#)) of the Convention) \*

Under domestic law the Central Authority is responsible for the following :

- Issuing an administrative subpoena to obtain documentary or other evidence;
- Referring the matter to the appropriate competent authority to obtain documentary or other evidence;
- Seeking the voluntary submission of documentary or other evidence;
- Other, please specify.

English version

Each individual U.S. state has laws and procedures for obtaining documentary or other evidence, including use of subpoenas. Request for assistance in this regard should be made to the appropriate IV-D child support agency.

Response not available in French

Response not available in Spanish

h. How does the Central Authority in the United States facilitate the obtaining of documentary or other evidence abroad? To which international instruments for the obtaining of documentary evidence or other evidence abroad is the United States a Contracting party?

([Art. 6\(2\) g](#)) of the Convention)

Please consult the Hague Conference website for the contact details of the Central Authorities under the Hague Conventions. \*

The following international instruments :

- 1970 Hague Evidence Convention;
- 1954 Hague Civil Procedure Convention;
- Other, please specify.

English version

The U.S. is party to the 1970 Hague Evidence Convention, but rarely has required its use in international child support cases. Requests for specific measures under Article 7 will often permit the child support agencies to informally obtain and provide information related to the possibility of initiating a proceeding.

Response not available in French

Response not available in Spanish

Where no international instrument is applied, the United States applies rules for the obtaining of evidence abroad under domestic law or under

an instrument of a Regional Economic Integration Organisation.

i. How does the Central Authority in the United States provide assistance in establishing parentage where necessary for the recovery of maintenance? ([Art. 6\(2\) h](#)) of the Convention) \*

- The Central Authority will provide the following assistance, if necessary :
- Co-ordinate genetic testing;
  - Seek a voluntary acknowledgment of parentage;
  - Seek a legal determination of parentage through a judicial proceeding;
  - Seek a legal determination of parentage through an administrative proceeding;
  - Other, please specify.

Response not available in English

Response not available in French

Response not available in Spanish

- The Central Authority will refer an application, where the establishment of parentage is necessary for the recovery of maintenance, to the appropriate competent authority. Please specify.

English version

Each IV-D child support agency will provide assistance to coordinate genetic testing, seek a voluntary acknowledgment of paternity, or seek a legal determination of parentage through an administrative or a judicial proceeding.

Response not available in French

Response not available in Spanish

- If the United States is a Contracting Party to the 1954 Hague Civil Procedure Convention or the 1970 Hague Evidence Convention or another international instrument, the Central Authority is able to provide advice on the appropriate procedures.
- Other, please specify.

Response not available in English

	Response not available in French Response not available in Spanish
--	---

<p>j. How does the Central Authority in the United States initiate or facilitate the institution of proceedings to obtain any necessary provisional measures that are territorial in nature and the purpose of which is to secure the outcome of a pending maintenance application (e.g., freezing or attaching an asset)? (<a href="#">Art. 6(2) i</a>) of the Convention) *</p>	<p><input type="checkbox"/> The Central Authority has authority to initiate such proceedings;</p> <p><input checked="" type="checkbox"/> The Central Authority lacks authority to initiate such proceedings. It will refer the matter to the appropriate public body to initiate such proceedings;</p> <p><input type="checkbox"/> Such provisional measures are not available under domestic law;</p> <p><input checked="" type="checkbox"/> Other, please specify.</p> <p>English version</p> <p style="padding-left: 40px;">The availability of provisional measures is limited and will depend on local law.</p> <p>Response not available in French Response not available in Spanish</p>
---	--

<p>k. How does the Central Authority in the United States facilitate service of documents domestically? (<a href="#">Art. 6(2) j</a>) of the Convention) *</p>	<p><input checked="" type="checkbox"/> Under domestic law the Central Authority is responsible for the following:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Service of documents;</li> <li><input type="checkbox"/> Forwarding the documents needing to be served to the appropriate public body;</li> <li><input type="checkbox"/> Forwarding the documents needing to be served to a private contractor;</li> <li><input checked="" type="checkbox"/> Other, please specify.</li> </ul> <p>English version</p> <p style="padding-left: 40px;">The Central Authority (OCSE) is not responsible for the service of documents; IV-D child support agencies are responsible for facilitating the service of documents. The mechanism for personal service of documents depends on local laws and procedures. Please see the IRG (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=2">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=2</a>) for more information.</p> <p>Response not available in French</p>
--	---

	<p>Response not available in Spanish</p> <p><input type="checkbox"/> Under domestic law the Central Authority provides notification in lieu of service.</p>
--	---

<p>I. How does the Central Authority in the United States facilitate the service abroad of documents? To which International instruments on the service abroad of documents is the United States a Contracting Party? (<a href="#">Art. 6(2) j) of the Convention</a>) Please consult the Hague Conference website for the contact details of the Central Authorities under the Hague Conventions. *</p>	<p><input checked="" type="checkbox"/> The following international instruments:</p> <p><input checked="" type="checkbox"/> 1965 Hague Service Convention;</p> <p><input type="checkbox"/> 1954 Hague Civil Procedure Convention;</p> <p><input checked="" type="checkbox"/> Other, please specify.</p> <p>English version</p> <p>Countries can use the 1965 Hague Service Convention (see the Hague Conference website for information on Hague Service Convention procedures in the U.S.), or they may request service of process assistance on child support matters from the appropriate IV-D child support agency.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p> <p><input checked="" type="checkbox"/> Where no international instrument is applied, the United States applies rules for the service abroad of documents under domestic law or under an instrument of a Regional Economic Integration Organisation.</p>
--	---

Last Update	2017-04-03 02:40:23.0
-------------	-----------------------

1. APPLICATIONS FOR RECOGNITION OR RECOGNITION AND ENFORCEMENT OF A DECISION (Arts. [10\(1\) a\)](#) and [10\(2\) a\)](#) of the Convention)

<p>a. Has the United States made a reservation to a basis for recognition and enforcement under Article <a href="#">20(1) c)</a>, <a href="#">e)</a> and <a href="#">f)</a> of the Convention? (<a href="#">Art. 20(1) c) and f) of the Convention</a>) *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> The creditor was habitually resident in the State of origin at the time proceedings were instituted;</p> <p><input checked="" type="checkbox"/> The decision was made by an authority exercising jurisdiction on a matter of personal status or parental responsibility, unless that jurisdiction was based solely on the nationality of one of the parties.</p>
---	---

b. The following is information required by Articles [11](#) and [25](#) to be included in an application for recognition or recognition and enforcement of a maintenance decision made in another Contracting State.

\*\* It is important to note that provisions on the protection of personal data, confidentiality and non-disclosure of information to protect the health, safety or liberty of a person are contained in Articles [38](#), [39](#) and [40](#) of the Convention.

(Arts [11](#), [25](#), [38](#), [39](#) et [40](#) of the Convention) \*

About the applicant:

- Full name (required);
- Date of birth (required);
- Address (required);
- Contact details (required);

About the respondent:

- Full name (required);
- Date of birth (required if known);
- Address (required if known);

About the person for whom maintenance is sought:

- Full name (required);
- Date of birth (required);

Other information:

- Nature of the application (required);
- The grounds upon which the application is based (required);
- If the applicant is the creditor or the representative of the creditor, information concerning where the maintenance payment should be sent or electronically transmitted (required);
- The name and contact details of the person or unit from the Central Authority responsible for processing the application (required).

c. According to Articles [11\(3\)](#) and [25](#), the following documents are the only documents that a State can require for recognition or recognition and enforcement of a maintenance decision made in another Contracting State.

(Arts [11\(3\)](#) and [25](#) of the Convention) \*

- A complete text of the decision or decisions;
- A complete copy of the decision certified by the competent authority in the State of origin ([Art. 25\(3\) a\)](#));
- An abstract or extract of the decision drawn up by the competent authority of the State of origin, in lieu of the complete text of the decision or decisions ([Art. 25\(3\) b\)](#));
- A document stating that the decision is enforceable in the State of origin (required);
- In the case of a decision by an administrative authority, a document stating that the requirements of Article 19(3) are met unless that State has specified in accordance with Article 57 that decisions of

its administrative authorities always meet those requirements;

the United States does not require a document stating that the requirements of Article 19(3) are met;

If the respondent did not appear and was not represented in the proceedings in the State of origin, a document or documents attesting, as appropriate, either that the respondent had proper notice of the proceedings and an opportunity to be heard, or that the respondent had proper notice of the decision and the opportunity to challenge or to appeal it on fact and law (required);

A document showing the amount of any arrears and the date such amount was calculated (required, where necessary);

In the case of a decision providing for automatic adjustment by indexation, a document providing the information necessary to make the appropriate calculations (required, where necessary);

Documentation showing the extent to which the applicant received free legal assistance in the State of origin (required, where necessary);

d. Does the United States have a prescribed or preferred form for an application to recognise and enforce a decision? If so, please attach a copy, a website or both. \*

No

Yes – the standard recommended form published by the Hague Conference;

Yes – the form is attached or available through a linked website (please provide) or both.

English document

French document

Spanish document

Response not available in English

Response not available in French

Response not available in Spanish

e. Can the United States accept an application and related documents transmitted by electronic means? \*

No

Yes, please specify.

English version



	<p>All states have enacted UIFSA 2008, which authorizes the electronic transmission of documents. IV-D child support agencies will vary in their capability to accept electronic documents. Please see the IRG (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3</a>) for more information.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>f. Are there any differences to the information above when the application is made by a public body acting in place of an individual to whom maintenance is owed or a public body which claims reimbursement of benefits provided in place of maintenance? (<a href="#">Art. 36 of the Convention</a>) *</p>	<p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes, please specify.</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>Last Update</p>	<p>2017-03-10 21:03:05.0</p>
<p>2.APPLICATIONS FOR RECOGNITION OR RECOGNITION AND ENFORCEMENT OF A MAINTENANCE ARRANGEMENT (<a href="#">Art. 30 of the Convention</a>)</p>	
<p>a. Has the United States made a reservation in accordance with Article <a href="#">62</a> reserving the right not to recognise and enforce a maintenance arrangement? (<a href="#">Art. 30(8) of the Convention</a>) *</p>	<p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
<p>b. Has the United States made a declaration in accordance with Article <a href="#">63</a> that applications for recognition or recognition and enforcement of a maintenance arrangement can only be made through Central Authorities? (<a href="#">Art. 30(7) of the Convention</a>). *</p>	<p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
<p>c. The following is information required by Article <a href="#">11</a> to be included in an application for recognition or recognition and enforcement of a maintenance arrangement made in another Contracting State. ** It is important to note that provisions on the protection of personal data, confidentiality and non-disclosure of information to protect the health, safety or liberty of a</p>	<p>About the applicant:</p> <p><input checked="" type="checkbox"/> Full name(required);</p> <p><input checked="" type="checkbox"/> Date of birth (required);</p> <p><input checked="" type="checkbox"/> Address (required);</p> <p><input checked="" type="checkbox"/> Contact details (required);</p>

person are contained in Articles [38](#), [39](#) and [40](#) of the Convention.  
(Arts [11](#), [30](#), [38](#), [39](#) and [40](#) of the Convention) \*

About the respondent:

- Full name (required);
- Date of birth (required if known);
- Address (required if known);

About the person for whom maintenance is sought:

- Full name (required);
- Date of birth (required);

Other information:

- Nature of the application (required);
- The grounds upon which the application is based (required);
- If the applicant is the creditor or the representative of the creditor, information concerning where the maintenance payment should be sent or electronically transmitted (required);
- The name and contact details of the person or unit from the Central Authority responsible for processing the application (required).

d. According to Article [30\(3\)](#) the following documents shall be provided with an application for recognition or recognition and enforcement of a maintenance arrangement made in another Contracting State. \*

- A complete text of the maintenance arrangement (required).
- A document stating that the particular maintenance arrangement is enforceable as a decision in the State of origin (required).

e. In addition to the documents required under Article [30\(3\)](#), what other documents should accompany an application for recognition or recognition and enforcement of a maintenance arrangement made in another Contracting State?  
(Arts [11\(3\)](#) and [25](#) of the Convention)

- A document showing the amount of any arrears and the date such amount was calculated (where necessary);
- In the case of a maintenance arrangement providing for automatic adjustment by indexation, a document providing the information necessary to make the appropriate calculations (where necessary);
- Documentation showing the extent to which the applicant received free legal assistance in the State of origin (where necessary);
- Other, please specify.

English version

Documentation showing the extent to which the applicant received free legal assistance will rarely be required.

	<p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>f. Does the United States have a prescribed or preferred form for an application to recognise or recognise and enforce a maintenance arrangement? If so, please attach a copy, a website link or both. *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes – the standard recommended form published by the Hague Conference.</p> <p><input type="checkbox"/> Yes – the form is attached or available through a linked website (please provide) or both.</p> <p>English document</p> <p>French document</p> <p>Spanish document</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>g. Can the United States accept an application and related documents transmitted by electronic means? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>All states have enacted UIFSA 2008, which authorizes the electronic transmission of documents. IV-D child support agencies will vary in their capability to accept electronic documents. Please see the IRG (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3</a>) for more information.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>h. Are there any differences to the information above when the application is made by a public body acting in place of an individual to whom maintenance is owed or a public body which claims reimbursement of benefits provided in place of maintenance? (<a href="#">Art. 36 of the Convention</a>) *</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, please specify.</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>

Last Update

2017-03-10 21:05:44.0

3. APPLICATIONS FOR ENFORCEMENT OF A DECISION MADE OR RECOGNISED IN THE UNITED STATES ([Art. 10\(1\) b\) of the Convention](#))

a. In addition to pre-checked application contents required by Article [11](#), what information does the United States need in order to process an application for enforcement of a maintenance decision made or recognised in the United States?

\*\* It is important to note that provisions on the protection of personal data, confidentiality and non-disclosure of information to protect the health, safety or liberty of a person are contained in Articles [38](#), [39](#) and [40](#) of the Convention.

(Arts [11](#), [38](#), [39](#) and [40](#) of the Convention) \*

About the applicant:

- Full name(required);
- Date of birth (required);
- Address (required);
- Contact details (required);
- Personal identification number (such as the social security number);
- Other, please specify.

English version

If appropriate, a determination or an allegation in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child would be jeopardized by disclosure of identifying information.

Response not available in French

Response not available in Spanish

About the respondent:

- Full name (required);
- Date of birth (required if known);
- Address (required if known);
- Telephone number, if known;
- Financial circumstances, as appropriate, and to the extent known;
- Name and address of employer, as appropriate, and to the extent known;
- Nature and location of assets, as appropriate, and to the extent known;

Any other information that may assist in locating the respondent, as appropriate, and to the extent known;

Personal identification number (such as the social security number);

Other, please specify.

Response not available in English

Response not available in French

Response not available in Spanish

About the person for whom maintenance is sought:

Full name (required);

Date of birth (required);

Care arrangements;

Personal identification number (such as the social security number);

Other, please specify.

English version

The residence of, or care arrangements for, the child may be relevant under certain circumstances.

Response not available in French

Response not available in Spanish

Other information:

Nature of the application (required);

The grounds upon which the application is based (required);

If the applicant is the creditor or the representative of the creditor, information concerning where the maintenance payment should be sent or electronically transmitted (required);

The name and contact details of the person or unit from the Central Authority responsible for processing the application (required).

	<input type="checkbox"/> Other, please specify. Response not available in English Response not available in French Response not available in Spanish
<p>b. Has the United States specified by declaration any documents that must accompany the application to enforce a maintenance decision made or recognised in the United States?  <a href="#">(Art. 11(1) g) of the Convention</a> *</p>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, please consult the Hague Conference website.
<p>c. In addition to documents specified by declaration, what documents should accompany an application to enforce a maintenance decision made or recognised in the United States? Please specify if certification is required for copies. *</p>	<input checked="" type="checkbox"/> A complete text of the decision or decisions; <input type="checkbox"/> A complete copy of the decision certified by the competent authority in the State of origin; <input checked="" type="checkbox"/> A document showing the amount of any arrears and the date such amount was calculated (where necessary); <input checked="" type="checkbox"/> In the case of a decision providing for automatic adjustment by indexation, a document providing the information necessary to make the appropriate calculations (where necessary); <input checked="" type="checkbox"/> Documentation showing the extent to which the applicant received free legal assistance in the State of origin (where necessary); <input checked="" type="checkbox"/> Other, please specify. English version <p>If appropriate, a determination or an allegation in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child would be jeopardized by disclosure of identifying information.  In enacting UIFSA 2008, states specify whether they require the complete text of the decision or an abstract or extract. Please see Section 706(b) (1) of UIFSA 2008 (<a href="http://www.uniformlaws.org/shared/docs/interstate_family_support/UIFSA_2008_Final_Amended_2015_Revised_Prefatory_Note_and_Comments.pdf">http://www.uniformlaws.org/shared/docs/interstate_family_support/UIFSA_2008_Final_Amended_2015_Revised_Prefatory_Note_and_Comments.pdf</a>).  Documentation showing the extent to which the applicant received free legal assistance will rarely be required.</p>

	<p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>d. Can the United States accept an application to enforce a decision for a prior period only? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>In general, an order for support for a prior period will be enforced by the IV-D child support agency of the state that issued the order. In most instances, the creditor only needs to forward an application requesting enforcement. The creditor will also need to provide information identifying the decision. If the decision was issued by a different U.S. state, IV-D child support agencies vary as to whether they will enforce the other state's decision for a prior period only.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>e. Does the United States have a prescribed or preferred form for an application to enforce a maintenance decision made or recognised in the United States? If so, please attach a copy. *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes – the standard recommended form published by the Hague Conference;</p> <p><input type="checkbox"/> Yes – the form is attached or available through a linked website (please provide) or both.</p> <p>English document</p> <p>French document</p> <p>Spanish document</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>f. Can the United States accept an application and related documents transmitted by electronic means? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p>

	<p>All states have enacted UIFSA 2008, which authorizes the electronic transmission of documents. IV-D child support agencies will vary in their capability to accept electronic documents. Please see the IRG (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3</a>) for more information.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>g. Are there any differences to the information above when the application is made by a public body acting in place of an individual to whom maintenance is owed or by a public body which claims reimbursement of benefits provided in place of maintenance? If so, please specify. <a href="#">(Art. 36 of the Convention)</a> *</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, please specify.</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>Last Update</p>	<p>2017-03-10 21:05:48.0</p>
<p>4. APPLICATIONS FOR ENFORCEMENT OF A MAINTENANCE ARRANGEMENT MADE OR RECOGNISED IN THE UNITED STATES (Arts <a href="#">30(2)</a> and <a href="#">10(1) b</a>) of the Convention)</p>	
<p>a. In addition to pre-checked application contents required by Article <a href="#">11</a>, what information does the United States need in order to process an application for enforcement of a maintenance arrangement made or recognised in the United States? ** It is important to note that provisions on the protection of personal data, confidentiality and non-disclosure of information to protect the health, safety or liberty of a person are contained in Articles <a href="#">38</a>, <a href="#">39</a> and <a href="#">40</a> of the Convention. <a href="#">(Arts 11, 38, 39 and 40 of the Convention)</a> *</p>	<p>About the applicant:</p> <p><input checked="" type="checkbox"/> Full name(required); <input checked="" type="checkbox"/> Date of birth (required); <input checked="" type="checkbox"/> Address (required); <input checked="" type="checkbox"/> Contact details (required); <input checked="" type="checkbox"/> Personal identification number (such as the social security number); <input type="checkbox"/> Other, please specify.</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p> <p>About the respondent:</p>



- Full name (required);
- Date of birth (required if known);
- Address (required if known);
- Telephone number, if known;
- Financial circumstances, as appropriate, and to the extent known;
- Name and address of employer, as appropriate, and to the extent known;
- Nature and location of assets, as appropriate, and to the extent known;
- Any other information that may assist in locating the respondent, as appropriate, and to the extent known;
- Personal identification number (such as the social security number);
- Other, please specify.

Response not available in English

Response not available in French

Response not available in Spanish

About the person for whom maintenance is sought:

- Full name (required);
- Date of birth (required);
- Care arrangements;
- Personal identification number (such as the social security number);
- Other, please specify.

English version

The residence or care arrangements for the child may be relevant under certain circumstances.

Response not available in French

Response not available in Spanish

Other information:

- Nature of the application (required);
- The grounds upon which the application is based (required);
- If the applicant is the creditor or the representative of the creditor, information concerning where the maintenance payment should be sent or electronically transmitted (required);
- The name and contact details of the person or unit from the Central Authority responsible for processing the application (required).
- Other, please specify.

Response not available in English

Response not available in French

Response not available in Spanish

b. Has the United States specified by declaration any documents that must accompany the application to enforce a maintenance arrangement made or recognised in the United States ([Art. 11\(1\) g\) of the Convention](#)) \*

- No
- Yes, please consult the Hague Conference website.

c. In addition to documents specified by declaration, what documents should accompany an application to enforce a maintenance arrangement made or recognised in the United States? Please specify if certification is required for copies. \*

- A complete text of the maintenance arrangement;
- A document showing the amount of any arrears and the date such amount was calculated (where necessary);
- In the case of a maintenance arrangement providing for automatic adjustment by indexation, a document providing the information necessary to make the appropriate calculations (where necessary);
- Documentation showing the extent to which the applicant received free legal assistance in the State of origin (where necessary);
- Other, please specify.

English version

A document stating that the particular maintenance arrangement is enforceable as a decision in the State of origin.

	<p>Documentation showing the extent to which the applicant received free legal assistance will rarely be required.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>d. Can the United States accept an application to enforce a maintenance arrangement for a prior period only? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>In general, a maintenance arrangement for a prior period will be treated the same as an order, and, in most instances, the creditor only needs to forward an application requesting enforcement.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>e. Does the United States have a prescribed or preferred form for an application to enforce a maintenance arrangement made or recognised in the United States? If so, please attach a copy, a website link or both. *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes – the standard recommended form published by the Hague Conference;</p> <p><input type="checkbox"/> Yes – the form is attached or available through a linked website (please provide) or both.</p> <p>English document</p> <p>French document</p> <p>Spanish document</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>f. Can the United States accept an application and related documents transmitted by electronic means? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>All states have enacted UIFSA 2008, which authorizes the electronic transmission of documents. IV-D child support agencies will</p>

	<p>vary in their capability to accept electronic documents. Please see the IRG (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3</a>) for more information.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
--	---

<p>g. Are there any differences to the information above when the application is made by a public body acting in place of an individual to whom maintenance is owed or by a public body which claims reimbursement of benefits provided in place of maintenance? If so, please specify. <a href="#">(Art. 36 of the Convention)</a> *</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, please specify.</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
---	---

Last Update	2017-03-10 21:14:11.0
-------------	-----------------------

--

5. APPLICATIONS TO ESTABLISH A DECISION IN THE UNITED STATES ([Art. 10\(1\) c\) and d\) of the Convention](#))

<p>a. In any action to establish maintenance, including Article <a href="#">10(1) c) and d)</a> applications, what are the jurisdictional bases in the United States for establishing a maintenance decision? *</p>	<p><input checked="" type="checkbox"/> The debtor is habitually resident in the United States at the time proceedings are instituted;</p> <p><input checked="" type="checkbox"/> The debtor submits to the jurisdiction either expressly or by defending on the merits of the case without objecting to the jurisdiction at the first available opportunity;</p> <p><input type="checkbox"/> The creditor is habitually resident in the United States at the time proceedings are instituted;</p> <p><input checked="" type="checkbox"/> The child for whom maintenance is sought is habitually resident in the United States at the time proceedings are instituted, provided that the debtor has lived with the child in the United States or has resided in the United States and provided maintenance for the child there;</p> <p><input type="checkbox"/> The authority has jurisdiction on a matter of personal status or parental responsibility that is not based solely on the nationality of one of the parties;</p> <p><input type="checkbox"/> Nationality of the creditor;</p> <p><input type="checkbox"/> Nationality of the person for whom maintenance is sought;</p> <p><input type="checkbox"/> Nationality of the debtor;</p>
---	--

Other, please specify.

English version

In order to establish a maintenance decision, the tribunal must have personal jurisdiction over the debtor. That means the debtor must have sufficient minimum contacts with the U.S. state where the action is to be heard. In the above tickboxes, it is not residence in the U.S. that is required but residence in the individual U.S. jurisdiction where the action will be heard." In addition to the above jurisdictional bases, a state has personal jurisdiction over a nonresident debtor if:

The debtor was personally served with the appropriate summons or notice within the state;  
The child resides in the state as a result of acts or directives of the debtor;

The debtor engaged in sexual intercourse in the state and the child may have been conceived by that act of intercourse;

The debtor asserted parentage in the putative father registry maintained in the state or has signed an acknowledgment of parentage in the state; or There is any other basis consistent with the constitutions of the individual state and the U.S. for the exercise of personal jurisdiction.

Response not available in French

Response not available in Spanish

b. In any action to establish maintenance, including Article [10\(1\)](#) c) and d) applications, could the law of another State apply for the establishment of a maintenance decision? \*

No

Yes, in accordance with:

2007 Hague Maintenance Applicable Law Protocol;

1973 Hague Maintenance Convention (Applicable Law);

1956 Hague Maintenance Convention (Applicable Law);

Other, please specify.

Response not available in English

Response not available in French

	Response not available in Spanish
<p>c. Is it possible to seek enforcement of a decision by indicating so in the application for establishment? *</p>	<p><input checked="" type="checkbox"/> Yes, another application is not needed if enforcement is requested in the application for establishment;</p> <p><input type="checkbox"/> No, a separate application for enforcement is required.</p>
<p>d. In addition to pre-checked application contents required by Article 11, what information does the United States need in order to process an application to establish a maintenance decision?</p> <p>** It is important to note that provisions on the protection of personal data, confidentiality and non-disclosure of information to protect the health, safety or liberty of a person are contained in Articles 38, 39 and 40 of the Convention.</p> <p>(Arts 11, 38, 39 and 40 of the Convention) *</p>	<p>About the applicant:</p> <p><input checked="" type="checkbox"/> Full name (required);</p> <p><input checked="" type="checkbox"/> Date of birth (required);</p> <p><input checked="" type="checkbox"/> Address (required);</p> <p><input checked="" type="checkbox"/> Contact details (required);</p> <p><input checked="" type="checkbox"/> Financial circumstances, as appropriate, and to the extent known;</p> <p><input checked="" type="checkbox"/> Assets and liabilities, as appropriate, and to the extent known;</p> <p><input checked="" type="checkbox"/> Personal identification number (such as the Social security number);</p> <p><input checked="" type="checkbox"/> Other, please specify.</p> <p>English version</p> <p style="padding-left: 40px;">If appropriate, a determination or an allegation in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child would be jeopardized by disclosure of identifying information.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p> <p>About the respondent:</p> <p><input checked="" type="checkbox"/> Full name (required);</p> <p><input checked="" type="checkbox"/> Date of birth (required if known);</p> <p><input checked="" type="checkbox"/> Address (required if known);</p> <p><input checked="" type="checkbox"/> Telephone number, if known;</p> <p><input checked="" type="checkbox"/> Financial circumstances, as appropriate, and to the extent known;</p>

- Name and address of employer, as appropriate, and to the extent known;
- Nature and location of assets, as appropriate, and to the extent known;
- Any other information that may assist in locating the debtor, as appropriate, and to the extent known;
- Personal identification number (such as the social security number);
- Other, please specify.

English version

In the U.S., the amount of child support is based upon support guidelines, which are numerical formulas. Most state guidelines will look at whether the respondent has any other child support obligations.

Response not available in French

Response not available in Spanish

About the person for whom maintenance is sought:

- Full name (required);
- Date of birth (required);
- Identification of parents;
- Care arrangements;
- Personal identification number (such as the social security number);
- Other, please specify.

English version

Address of the child(ren) unless protected from disclosure.

In the U.S., the amount of child support is based upon support guidelines, which are numerical formulas. Each state has developed its own child support guideline. Under most state guidelines, the financial circumstances of both parents are required. The financial circumstances of the child may be relevant if the child has substantial income or assets.

Because child care expenses vary so greatly, child support guidelines do not include them within the basic support amount. However, support guidelines do address them, typically either as an add-on to the guideline amount or a deduction from the income of the paying parent. Custody arrangements also impact the amount of support under support guidelines. If the application seeks additional support because of extraordinary expenses, such as a child's educational or medical expenses, additional information may be required.

For more information, see the OCSE Intergovernmental Reference Guide, Section I 'Support Order Establishment.'

? Go to the IRG Profile Query web page for question I.2 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=342>).

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'I. Support Order Establishment'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states. Most IV-D child support agencies will require a copy of the child's birth certificate. If the child was born out of wedlock, there will also need to be proof of parentage.

Response not available in French

Response not available in Spanish

Other information:

Nature of the application (required);

The grounds upon which the application is based (required);

Amount of maintenance sought by the applicant;

If the applicant is the creditor or the representative of the creditor, information concerning where the maintenance payment should be sent or electronically transmitted (required);



	<input checked="" type="checkbox"/> The name and contact details of the person or unit from the Central Authority responsible for processing the application (required); <input checked="" type="checkbox"/> Case history, please specify (i.e., if there is an agreement between the parties or not); <input checked="" type="checkbox"/> Family history, please specify (i.e., if the parties were married, how many children); <input checked="" type="checkbox"/> The date from which maintenance is requested; <input type="checkbox"/> The applicant's view of the appropriate amount of maintenance; <input checked="" type="checkbox"/> Other, please specify.  English version  See additional information in guidelines section, Stage 2, I(2).  Response not available in French  Response not available in Spanish
--	---

<p>e. Has the United States specified by declaration any documents that must accompany the application to establish a maintenance decision in the United States?  <a href="#">(Art. 11(1) g) of the Convention</a> *</p>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, please consult the Hague Conference website.
--	--

<p>f. In addition to documents specified by declaration, what documents should accompany an application to establish a maintenance decision? Please specify if certification is required for copies.  <a href="#">(Art. 11(3) of the Convention)</a> *</p>	<input checked="" type="checkbox"/> Evidence of birth (birth certificate). <input checked="" type="checkbox"/> Evidence supporting an obligation to provide maintenance: <input type="checkbox"/> Yes, please see <a href="#">Stage 1, question II.5.i.</a> <input checked="" type="checkbox"/> Financial statement: <input checked="" type="checkbox"/> Creditor; <input type="checkbox"/> Child; <input type="checkbox"/> Person having care of the child. <input checked="" type="checkbox"/> Documents supporting the financial statement above: <input checked="" type="checkbox"/> Salary statement; <input checked="" type="checkbox"/> Income tax declaration;
--	---

Health insurance invoice;

Other, please specify.

English version

In the U.S., the amount of child support is based upon support guidelines, which are numerical formulas. Each state has developed its own child support guideline. Under most state guidelines, the financial circumstances of both parents are required. For more information, see the OCSE Intergovernmental Reference Guide, Section I 'Support Order Establishment.'

? Go to the IRG Profile Query web page (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=342>).

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'I. Support Order Establishment'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

Child who has not reached the age of majority:

Evidence of attendance at secondary or post-secondary educational institution;

Evidence of disability;

Other, please specify.

English version

For detailed information, please the OCSE Intergovernmental Reference Guide, Section I 'Support Order Establishment.'

? Go to the IRG Profile Query web page (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=342>).

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'I. Support Order Establishment'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

Child who has reached the age of majority:

Evidence of attendance at secondary or post-secondary educational institution;

Evidence of disability;

Other, please specify.

English version

For detailed information, please see the OCSE Intergovernmental Reference Guide, Section D 'Age of Majority.'

? Go to the IRG Profile Query web

page for question D.6 ([https://](https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=316)

[ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=316](https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=316)).

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'D. Age of Majority'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

Any existing maintenance decisions or written agreements between the parties, or relating to any person for whom maintenance is sought;

Decision of the requested State to refuse recognition and enforcement (where applicable);

Other, please specify.

English version

If appropriate, a determination or an allegation in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child

	<p>would be jeopardized by disclosure of identifying information.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>g. Can the United States accept an application and related documents transmitted by electronic means? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>All states have enacted UIFSA 2008, which authorizes the electronic transmission of documents. IV-D child support agencies will vary in their capability to accept electronic documents. Please see the IRG (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3</a>) for more information.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>h. Is there a time limit before which an applicant must seek a decision establishing a maintenance obligation? If so, please indicate the time limit that applies.</p> <p>** It is important to note that a law other than the law of the requested State may be applicable. *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes</p> <p><input type="checkbox"/> Before years after the parents separate. Please specify number of years;</p> <p><input checked="" type="checkbox"/> Before expiration of the normal duration of support (see Stage 1, question III.1.g);</p> <p><input type="checkbox"/> Other, please specify.</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>i. Is it necessary for an applicant to prove that an obligation to provide maintenance exists when an application is made to establish a maintenance decision? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes</p>

j. If so, by what means can an applicant prove that an obligation to provide maintenance exists? \*

- Applicant provides a marriage certificate showing that the debtor was married to a parent of the child when the child was born;
- Applicant provides a civil union certificate showing that the debtor was in a civil union with a parent of the child when the child was born;
- Applicant provides a formal statement stating that the debtor was living with the parent of the child when the child was born;
- Applicant provides a marriage certificate showing that the debtor was married to a parent of the child when the child was conceived;
- Applicant provides a civil union certificate showing that the debtor was in a civil union with a parent of the child when the child was conceived;
- Applicant provides a formal statement stating that the debtor was living with a parent of the child when the child was conceived;
- Applicant provides a formal statement stating that the debtor is a parent of the child;
- Applicant provides a copy of a birth certificate showing that the debtor is listed as a parent of the child;
- Applicant provides a copy of an entry in a birth registry showing that the debtor is listed as a parent of the child;
- Applicant provides a copy of a written statement in which the alleged debtor has acknowledged parentage;
- Applicant provides a copy of an adoption certificate stating that the debtor has legally adopted the child;
- Applicant provides a copy of genetic test results that indicate a high probability that the debtor is a parent of the child;
- Applicant provides a formal statement stating that for the first two years of the child's life, the debtor resided in the same household with the child and openly held the child out as the debtor's own;
- Applicant provides a copy of a decision in which a competent authority has established parentage;
- Applicant provides a formal statement stating that the applicant has care and control of the child;
- Other, please specify.

English version

Evidence of a civil union at the time the child was born or conceived may be considered proof that an obligation to provide maintenance exists in accordance with local law. If the applicant is other than a parent, local law may require the applicant to provide proof that he or she is the legal custodian of the child.

Response not available in French

Response not available in Spanish

k. Is there any time limit for establishing parentage or an obligation to provide maintenance? If so, please indicate the time limit that applies.

\*\* It is important to note that a law other than the law of the requested State may be applicable. \*

No

Yes

Before expiration of the normal duration of support (see Stage 1, question III.1.g);

Child is aged 2;

Child is aged 5;

Other, please specify.

English version

Each U.S. state must allow for the establishment of parentage at least up until the child's 18th birthday. For more information please see Section E 'Statute of Limitations,' question E.2 of the IRG: <https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=442>. The time limit for establishing a duty of support varies by local law. Please see the IRG for more information.

Response not available in French

Response not available in Spanish

l. What costs arise in the United States for the applicant when obtaining a maintenance decision, including appeal procedures? Please include all costs arising in practice (e.g., court costs, fees for an administrative authority, costs for experts, legal costs).

No costs arise.

The following costs arise, please specify.

English version

With respect to requests from treaty partners, no costs are assessed for assistance from the

	<p>IV-D child support agency from the foreign reciprocating country or its resident creditors. However, costs may be assessed by the IV-D child support agency against the debtor. In cases not handled by the IV-D child support agency, costs for the creditor will vary. Many jurisdictions charge court filing fees, as well as fees for the service of documents. These fees vary among the states. In some states, private legal aid (as distinct from any legal or other services offered by the IV-D child support agency) may be available on an individual basis, depending on the residence, resource availability, or scope of services determined by the individual legal aid provider. Similarly, it would be at the option of the legal aid provider whether it would provide assistance to a claimant for child support who is a resident abroad and does not apply through the U.S. child support system.</p> <p>All U.S. states allow a creditor to retain a private attorney at his or her own expense. Please see the IRG (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=1">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=1</a>) for more information.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
--	--

<p>m. Can the applicant claim reimbursement from the debtor of expenses incurred (e.g., for a lawyer)? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>Whether the applicant can claim reimbursement from the debtor for expenses incurred will depend upon local law.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
--	---

<p>n. Does the United States have a prescribed or preferred form for an application to establish a maintenance decision? If so, please attach a copy, a link to a website or both. *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, the standard recommended form published by the Hague Conference;</p>
--	---

	<input type="checkbox"/> Yes, the form is attached or available through a linked website (please provide) or both. English document French document Spanish document Response not available in English Response not available in French Response not available in Spanish
--	---

<p>o. Are there any differences to the information above when the application is made by a public body acting in place of an individual to whom maintenance is owed or by a public body which claims reimbursement of benefits provided in place of maintenance? If so, please specify.  <a href="#">(Art. 36 of the Convention)</a> *</p>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, please specify. Response not available in English Response not available in French Response not available in Spanish
--	---

Repeat the similar answers given in response to questions II.5.b, II.5.d ( <a href="#">in part</a> ), II.5.e and II.5.g to questions II.6.a, II.6.b ( <a href="#">in part</a> ), II.6.c and II.6.g, and questions II.7.a, II.7.b (in part), II.7.c and II.7.g respectively: *	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
---	--

Last Update	2017-03-10 17:02:58.0
-------------	-----------------------

6. APPLICATIONS TO MODIFY A MAINTENANCE DECISION MADE IN THE UNITED STATES (Art. [10\(1\) e](#) and [10\(2\) b](#) of the Convention)

<p>a. In any action to modify a maintenance decision, under Article <a href="#">10(1) e</a> and <a href="#">10(2) b</a> applications, could the law of another State apply for the modification of maintenance decisions? Please check all that apply. *</p>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, in accordance with: <ul style="list-style-type: none"> <li><input type="checkbox"/> 2007 Hague Maintenance Applicable Law Protocol;</li> <li><input type="checkbox"/> 1973 Hague Maintenance Convention (Applicable Law);</li> <li><input type="checkbox"/> 1956 Hague Maintenance Convention (Applicable Law);</li> <li><input type="checkbox"/> Other, please specify.</li> </ul>
--	---



Response not available in English

Response not available in French

Response not available in Spanish

b. In addition to pre-checked application contents required by Article [11](#), what information does the United States need in order to process an application to modify a maintenance decision made in the United States?

\*\* It is important to note that provisions on the protection of personal data, confidentiality and non-disclosure of information to protect the health, safety or liberty of a person are contained in Articles [38](#), [39](#) and [40](#) of the Convention.

(Arts [11](#), [38](#), [39](#) and [40](#) of the Convention) \*

About the applicant:

- Full name (required);
- Date of birth (required);
- Address (required);
- Contact details (required);
- Telephone number, if known;
- Financial circumstances, as appropriate, and to the extent known;
- Assets and liabilities, as appropriate, and to the extent known;
- Personal identification number (such as the Social security number);
- Other, please specify.

English version

If appropriate, a determination or an allegation in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child would be jeopardized by disclosure of identifying information.

Response not available in French

Response not available in Spanish

About the respondent:

- Full name (required);
- Date of birth (required if known);
- Address (required if known);
- Telephone number, if known;
- Financial circumstances, as appropriate, and to the extent known;

- Name and address of employer, as appropriate, and to the extent known;
- Nature and location of assets, as appropriate, and to the extent known;
- Any other information that may assist in locating the debtor, as appropriate, and to the extent known;
- Personal identification number (such as the social security number);
- Other, please specify.

English version

In the U.S., the amount of child support is based upon support guidelines, which are numerical formulas. Most state guidelines will look at whether the respondent has any other child support obligations.

Response not available in French

Response not available in Spanish

About the person for whom maintenance is sought:

- Full name (required);
- Date of birth (required);
- Care arrangements;
- Personal identification number (such as the social security number);
- Other, please specify.

English version

Address of the child(ren) unless protected from disclosure.

In the U.S., the amount of child support is based upon support guidelines, which are numerical formulas. Each state has developed its own child support guideline. Under most state guidelines, the financial circumstances of both parents are required. The financial circumstances of the child may be relevant if the child has substantial income or assets. Because child care expenses vary so greatly, child support guidelines do not include them

within the basic support amount. However, support guidelines do address them, typically either as an add-on to the guideline amount or a deduction from the income of the paying parent. Custody arrangements also impact the amount of support under support guidelines. If the application seeks additional support because of extraordinary expenses, such as a child's educational or medical expenses, additional information may be required.

For more information, see the OCSE Intergovernmental Reference Guide, Section I 'Support Order Establishment.'

? Go to the IRG Profile Query web page for question I.2 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=342>).

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'I. Support Order Establishment'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states. Most IV-D child support agencies will require a copy of the child's birth certificate. If the child was born out of wedlock, there will also need to be proof of parentage.

Response not available in French

Response not available in Spanish

Other information:

Nature of the application (required);

The grounds upon which the application is based (required);

If the applicant is the creditor or the representative of the creditor, information concerning where the maintenance payment should be sent or electronically transmitted (required);

The name and contact details of the person or unit from the Central Authority responsible for processing the application (required);

Modified amount of maintenance sought by the applicant;

	<input checked="" type="checkbox"/> Other, please specify.  English version  See additional information in guidelines section, Stage 2, I(2).  Response not available in French  Response not available in Spanish
c. Has the United States specified by declaration any documents that must accompany the application to modify a maintenance decision in the United States? <a href="#">(Art. 11(1) g) of the Convention</a> *	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, please consult the Hague Conference website.
d. In addition to documents specified by declaration, what documents should accompany an application to modify a maintenance decision made in the United States? Please specify if certification is required for copies. *	<input checked="" type="checkbox"/> Complete text of the decision or decisions; <input checked="" type="checkbox"/> Special expense claim; <input checked="" type="checkbox"/> Salary statement establishing a change in income; <input checked="" type="checkbox"/> Written agreement between the parties related to modification of the maintenance; <input checked="" type="checkbox"/> Information identifying the decision to be modified; <input checked="" type="checkbox"/> Latest income tax declaration of the applicant, if possible; <input checked="" type="checkbox"/> Other, please specify.  English version  Documents showing any other significant change in circumstances of any of the parties. If appropriate, a determination or an allegation in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child would be jeopardized by disclosure of identifying information.  Response not available in French  Response not available in Spanish
e. In what circumstances can an application be made for modification of a maintenance decision made in the United States? *	<input checked="" type="checkbox"/> The circumstances of the child have changed so as to justify the modification; <input checked="" type="checkbox"/> The circumstances of the debtor have changed so as to justify the modification; <input checked="" type="checkbox"/> The circumstances of the creditor have changed so as to justify the modification;

- The circumstances of the person having care of the child have changed so as to justify the modification;
- The care arrangements for the child have changed so as to justify the modification;
- The cost of living has changed to such an extent as to justify the modification;
- If the decision was made by consent, the amount ordered to be paid is no longer appropriate or adequate;
- Other, please specify.

#### English version

The need to provide for a child's health care needs in the decision, through health insurance or other means, may be an adequate basis under U.S. state law to petition for an adjustment (modification) of the decision, regardless of whether a modification to the child support amount is necessary.

In some U.S. states, enactment of new support guidelines may justify a change in the support amount if the new guidelines would result in a certain percentage change to the guideline calculation. Some states may consider cost of living as a deviation factor.

Note: To learn the criteria for modification in an individual U.S. state, please see the OCSE Intergovernmental Reference Guide, Section K 'Modification and Review/Adjustment.'

? Go to the IRG Profile Query web page for question K.4 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=402>)

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'K. Modification and Review/Adjustment'.  
? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

f. Can the modification be made retroactively? If so, please specify the basis and any limitations. \*

No

Yes, please specify the basis and any limitations.

English version

The modification may be made retroactively to the date the petition to modify was filed or notice was provided to the party.

Response not available in French

Response not available in Spanish

g. Can the United States accept an application and related documents transmitted by electronic means? \*

No

Yes, please specify.

English version

All states have enacted UIFSA 2008, which authorizes the electronic transmission of documents. IV-D child support agencies will vary in their capability to accept electronic documents. Please see the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&selProfileQuestion=3>) for more information.

Response not available in French

Response not available in Spanish

h. Does the United States have a prescribed or preferred form for an application to modify a maintenance decision made in the United States? If so, please attach a copy or link to a website or both. \*

No

Yes, the standard recommended form published by the Hague Conference;

Yes, the form is attached or available through a linked website (please provide) or both.

English document

French document

Spanish document

Response not available in English

Response not available in French

Response not available in Spanish

Last Update:

2017-03-10 18:36:19.0

7. APPLICATIONS TO MODIFY A MAINTENANCE DECISION MADE IN A STATE OTHER THAN THE UNITED STATES (Art. [10\(1\) f](#)) and [10\(2\) c](#)) of the Convention)

a. In any action to modify a maintenance decision, under Article [10\(1\) f](#)) and [10\(2\) c](#)) applications, could the law of another State apply for the modification of a maintenance decision? Please check all that apply. \*

- No
- Yes, in accordance with:
- 2007 Hague Maintenance Applicable Law Protocol;
  - 1973 Hague Maintenance Convention (Applicable Law);
  - 1956 Hague Maintenance Convention (Applicable Law);
  - Other, please specify.

Response not available in English

Response not available in French

Response not available in Spanish

b. In addition to application contents required by Article [11](#), what information does the United States need in order to process an application to modify a maintenance decision made in a State other than the United States?

\*\* It is important to note that provisions on the protection of personal data, confidentiality and non-disclosure of information to protect the health, safety or liberty of a person are contained in Articles [38](#), [39](#) and [40](#) of the Convention.

(Arts [11](#), [38](#), [39](#) and [40](#) of the Convention) \*

About the applicant:

- Full name (required);
- Date of birth (required);
- Address (required);
- Telephone number, if known;
- Financial circumstances, as appropriate, and to the extent known;
- Assets and liabilities, as appropriate, and to the extent known;
- Personal identification number (such as the Social security number);
- Other, please specify.

English version

If appropriate, a determination or an allegation in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child

would be jeopardized by disclosure of identifying information.

Response not available in French

Response not available in Spanish

About the respondent:

- Full name (required);
- Date of birth (required if known);
- Address (required if known);
- Telephone number, if known;
- Financial circumstances, as appropriate, and to the extent known;
- Name and address of employer, as appropriate, and to the extent known;
- Nature and location of assets, as appropriate, and to the extent known;
- Any other information that may assist in locating the debtor, as appropriate, and to the extent known;
- Personal identification number (such as the social security number);
- Other, please specify.

English version

In the U.S., the amount of child support is based upon support guidelines, which are numerical formulas. Most state guidelines will look at whether the respondent has any other child support obligations.

Response not available in French

Response not available in Spanish

About the person for whom maintenance is sought:

- Full name (required);
- Date of birth (required);
- Care arrangements;



Personal identification number (such as the social security number);

Other, please specify.

#### English version

Address of the child(ren) unless protected from disclosure.

In the U.S., the amount of child support is based upon support guidelines, which are numerical formulas. Each state has developed its own child support guideline. Under most state guidelines, the financial circumstances of both parents are required. The financial circumstances of the child may be relevant if the child has substantial income or assets. Because child care expenses vary so greatly, child support guidelines do not include them within the basic support amount. However, support guidelines do address them, typically either as an add-on to the guideline amount or a deduction from the income of the paying parent. Custody arrangements also impact the amount of support under support guidelines. If the application seeks additional support because of extraordinary expenses, such as a child's educational or medical expenses, additional information may be required.

For more information, see the OCSE Intergovernmental Reference Guide, Section I 'Support Order Establishment.'

? Go to the IRG Profile Query web page for question I.2 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=342>).

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'I. Support Order Establishment'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states. Most IV-D child support agencies will require a copy of the child's birth certificate. If the child was born out of wedlock, there will also need to be proof of parentage.

Response not available in French

Response not available in Spanish

Other information:

Nature of the application (required);

The grounds upon which the application is based (required);

If the applicant is the creditor or the representative of the creditor, information concerning where the maintenance payment should be sent or electronically transmitted (required);

The name and contact details of the person or unit from the Central Authority responsible for processing the application (required);

Modified amount of maintenance sought by the applicant;

Other, please specify.

English version

See additional information in guidelines section, Stage 2, I(2).

Response not available in French

Response not available in Spanish

c. Has the United States specified by declaration any documents that must accompany the application to modify a maintenance decision made in a State other than the United States?

[\(Art. 11\(1\) g\) of the Convention](#) \*

No

Yes, please consult the Hague Conference website.

d. In addition to documents specified by declaration, what documents should accompany an application to modify a maintenance decision made in a State other than the United States? Please specify if certification is required for copies. \*

Complete text of the decision or decisions;

Special expense claim;

Salary statement establishing a change in income;

Written agreement between the parties related to modification of the maintenance;

Latest income tax declaration of the applicant, if possible;

Other, please specify.

English version

	<p>If appropriate, a determination or an allegation in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child would be jeopardized by disclosure of identifying information.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>e. Are the circumstances in which a maintenance decision made by another State can be modified in the United States the same as the circumstances in which a decision made by the United States can be modified? *</p>	<p><input type="checkbox"/> No. Please specify the difference.</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p> <p><input checked="" type="checkbox"/> Yes. See reply to question II.4.e. above.</p>
<p>f. Does the United States have a prescribed or preferred form for an application to modify a maintenance decision made in a State other than the United States? If so, please attach a copy or link to a website or both. *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes – the standard recommended form published by the Hague Conference;</p> <p><input type="checkbox"/> Yes – the form is attached or available through a linked website (please provide) or both.</p> <p>English document</p> <p>French document</p> <p>Spanish document</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>g. Can the United States accept an application and related documents transmitted by electronic means? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>All states have enacted UIFSA 2008, which authorizes the electronic transmission of documents. IV-D child support agencies will vary in their capability to accept electronic</p>

	<p>documents. Please see the IRG (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&amp;selProfileQuestion=3</a>) for more information.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
--	---

<p>h. Can the modification be made retroactively? If so, please specify the basis and any limitations *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify the basis and any limitations.</p> <p>English version</p> <p>The modification may be made retroactively to the date the petition to modify was filed or notice was provided to the parties.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
---	--

<p>i. If the State of origin modifies a maintenance decision after the United States has recognised it, can the United States recognise the modification? If so, please specify any limitations and outline the key steps or requirements. *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify key steps or requirements and any limitations.</p> <p>English version</p> <p>The modified decision must be registered for recognition and enforcement, just as the original decision was.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
--	--

<p>Last Update</p>	<p>2017-03-10 21:33:36.0</p>
--------------------	------------------------------

--	--

<p>8. EFFECTIVE ACCESS TO PROCEDURES (<a href="#">Art. 14 of the Convention</a>)</p>	
--	--

<p>How does the United States provide applicants with effective access to procedures? *</p>	<p><input checked="" type="checkbox"/> the United States provides free legal assistance in accordance with Articles 14 to 17 (<a href="#">Art. 14(2)</a>). Please see Question I.6.a. above;</p> <p><input type="checkbox"/> the United States has procedures that enable the applicant to make the case without the need for legal</p>
---	---

assistance and the Central Authority provides such services as are necessary free of charge ([Art. 14\(3\)](#)):

The Central Authority is the competent authority and provides all necessary services with respect to the application;

The Central Authority initiates proceedings by submitting the application to the competent authority and provides all necessary services with respect to the application;

The Central Authority refers the application to a public body for submission to the competent authority. The public body provides all necessary services with respect to the application;

The Central Authority refers the application to another body subject to the supervision of the competent authority. This body provides all necessary services with respect to the application;

Other, please specify.

Response not available in English

Response not available in French

Response not available in Spanish

Last Update

2017-03-03 21:23:00.0

## 1. MAINTENANCE OBLIGATIONS IN RESPECT OF A CHILD ([Art. 57 of the Convention](#))

a. What legislation applies to child maintenance obligations in the United States? Provide a link to a website if possible.

English version

Each U.S. state has its own legislation that applies to child maintenance obligations in that state. Please see the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=174>) for more information.

See specifically Article 7 of UIFSA 2008 ([http://www.uniformlaws.org/shared/docs/interstate\\_family\\_support/UIFSA\\_2008\\_Final\\_Amended\\_2015\\_Revised\\_Prefatory\\_Note\\_and\\_Comments.pdf](http://www.uniformlaws.org/shared/docs/interstate_family_support/UIFSA_2008_Final_Amended_2015_Revised_Prefatory_Note_and_Comments.pdf)), which applies to Convention cases and has been enacted by all U.S. states.

Response not available in French

	Response not available in Spanish
<p>b. Who is eligible to benefit from child maintenance? *</p>	<p><input checked="" type="checkbox"/> For any child regardless of status;  <input type="checkbox"/> Child born in wedlock;  <input type="checkbox"/> Child born out of wedlock:  <input type="checkbox"/> Acknowledged by the father;  <input type="checkbox"/> Not yet acknowledged by the father;  <input type="checkbox"/> Adopted child;  <input type="checkbox"/> Any child for whom a person stands in place of a parent (in loco parentis);  <input checked="" type="checkbox"/> Other, please specify.</p> <p>English version</p> <p>A child born out of wedlock who is not yet acknowledged by the father is eligible to benefit from child maintenance. However, the court or agency must first find a support duty under U.S. law before it will issue a maintenance decision.</p> <p>Response not available in French  Response not available in Spanish</p>
<p>c. Who is the creditor in a child maintenance matter? *</p>	<p><input checked="" type="checkbox"/> Child;  <input checked="" type="checkbox"/> Custodial parent or other person responsible for the child;  <input checked="" type="checkbox"/> Public bodies;  <input checked="" type="checkbox"/> Other, please specify.</p> <p>English version</p> <p>Individual state law in the U.S. differs regarding who is the creditor/obligee in a child maintenance matter. However, the answer does not affect case processing.</p> <p>Response not available in French  Response not available in Spanish</p>
<p>d. What can be included in a child maintenance decision? *</p>	<p><input checked="" type="checkbox"/> Periodic payments for child maintenance;  <input checked="" type="checkbox"/> Lump sum payments;</p>

- Child care expenses;
- Extra-curricular activities;
- Dental or medical expenses;
- Attorney's fees;
- Extraordinary expenses, please specify;

English version

See the support guidelines of the individual U.S. state. For more information about a particular state's support guidelines, please see the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&selProfileQuestion=4>) for more information.

Response not available in French

Response not available in Spanish

- Costs of the competent authority, please specify;
- Other, please specify.

English version

Health care  
Reimbursement of genetic test costs

Response not available in French

Response not available in Spanish

e. Can a child maintenance decision be subject to automatic adjustment? If so, by what mechanism and with what frequency? \*

- No
- Yes, please list the mechanisms and frequency:
  - By indexation;
  - Other, please specify.

English version

The availability of an automatic cost of living adjustment depends upon individual state law. Please see the OCSE Intergovernmental Reference Guide, Section K 'Modification and Review/Adjustment.'  
? Go to the IRG Profile Query web page for question K.5 (<https://>

ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=408)  
? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'K. Modification and Review/Adjustment'.  
? Next, make a selection from the list of Profile Questions.  
? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

f. Can a child maintenance decision be made retroactively? If so, what is the earliest date from which a decision can apply? Please specify any limitations. \*

- No
- Yes
  - Child's date of birth;
  - Date that proceedings are initiated;
  - Date of separation;
  - Date of the suspension of voluntary payments;
  - A certain amount of time from the initiation of the proceedings, please specify;

Response not available in English

Response not available in French

Response not available in Spanish

- Other, please specify.

English version

To learn whether an individual U.S. state has legislation authorizing retroactive support, please see the OCSE Intergovernmental Reference Guide, Section I 'Support Order Establishment.'  
? Go to the IRG Profile Query web page for question I.4 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=366>)  
? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'I. Support Order Establishment'.



? Next, make a selection from the list of Profile Questions.  
? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

Any limitation, please specify.

Response not available in English

Response not available in French

Response not available in Spanish

g. Until what age can a child maintenance obligation be established? Please provide a citation to the laws of the United States.

[\(Art. 32\(4\) of the Convention\)](#) \*

- Until 18 years of age;
- Until 19 years of age;
- Until 21 years of age;
- Other, please specify.

English version

All states allow the establishment of a child maintenance obligation until at least age 18. The age of majority may be longer in some states. To learn the age of majority in an individual U.S. state, please see the OCSE Intergovernmental Reference Guide, Section D 'Age of Majority.'

? Go to the IRG Profile Query web page for question D.1 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=185>)

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'D. Age of Majority'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states.

? Next, make a selection from the list of Profile Questions.  
? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

h. In what circumstances can child maintenance end before the normal duration?  
[\(Art. 32\(4\) of the Convention\)](#) \*

- The child emancipates before the normal duration;
- The child is no longer under the care of the creditor and there is no decision re-directing payments to someone else;
- The child marries;
- The child is adopted by someone other than the debtor;
- The child has been removed from the family and is a civil ward of the State;
- The maintenance decision states that child maintenance ceases prior to the normal duration;
- Other, please specify.

English version

Entry into military service before the age of 18 also emancipates a child.  
Within the U.S., individual state law will govern and state law varies. For more information, please see the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&selProfileQuestion=6>).

Response not available in French

Response not available in Spanish

i. Can child maintenance extend beyond the normal duration? If so, in what circumstances?  
[\(Art. 32\(4\) of the Convention\)](#)

- No
- Yes
  - To enable the child to complete secondary education;
  - To enable a child to complete post secondary education;
  - If a child is past the normal duration and under the parent's charge but unable, by reason of illness, disability or other cause, to withdraw from that charge or to obtain the necessities of life;
  - Other, please specify.

English version

Within the U.S., individual state law will govern and state law varies. Please see the OCSE

	<p>Intergovernmental Reference Guide, Section D 'Age of Majority.'</p> <p>? Go to the IRG Profile Query web page for question D.6 (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&amp;staticProfileQuestion=316">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&amp;staticProfileQuestion=316</a>)</p> <p>? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'D. Age of Majority'.</p> <p>? Next, make a selection from the list of Profile Questions.</p> <p>? Click the 'Submit' button at the bottom of the page and you will see information for all states.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
--	---

<p>j. Must other proceedings be initiated or finalised before a child maintenance decision can be made in the United States? *</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes, please specify:</p> <p>If parties are married:</p> <p><input type="checkbox"/> Divorce proceedings must be initiated;</p> <p><input type="checkbox"/> Divorce proceedings must be finalised;</p> <p><input type="checkbox"/> Spousal property proceedings must be initiated;</p> <p><input type="checkbox"/> Spousal property proceedings must be finalised.</p> <p>If parties are / were married:</p> <p><input type="checkbox"/> Child custody proceedings must be initiated;</p> <p><input type="checkbox"/> Child custody proceedings must be finalised.</p> <p>If child was born outside of marriage:</p> <p><input type="checkbox"/> Parentage proceedings must be initiated;</p> <p><input type="checkbox"/> Parentage proceedings must be finalised.</p>
--	---

Last Update	2017-03-03 21:23:29.0
-------------	-----------------------

2. COMPETENT AUTHORITIES RESPONSIBLE FOR MAINTENANCE DECISIONS AND MAINTENANCE ARRANGEMENTS IN THE UNITED STATES ([Art. 57 of the Convention](#))

<p>a. Which authority in the United States is competent to recognise and enforce maintenance decisions? (<a href="#">Art. 57 of the Convention</a>) *</p>	<p><input checked="" type="checkbox"/> Judicial authority;</p> <p><input checked="" type="checkbox"/> Administrative authority.</p>
---	---

<p>b. Which authority in the United States is competent to enforce maintenance decisions?</p>	<p><input checked="" type="checkbox"/> Judicial authority;</p> <p><input checked="" type="checkbox"/> Administrative authority.</p>
---	---

<a href="#">(Art. 57 of the Convention)</a> *	
<p>c. Which authority in the United States is competent to establish maintenance decisions? <a href="#">(Art. 57 of the Convention)</a> *</p>	<input checked="" type="checkbox"/> Judicial authority; <input checked="" type="checkbox"/> Administrative authority. <input checked="" type="checkbox"/> Decisions of this administrative authority always meet the requirements of Article <a href="#">19(3)</a> .
<p>d. Which authority in the United States is competent to modify maintenance decisions? <a href="#">(Art. 57 of the Convention)</a> *</p>	<input checked="" type="checkbox"/> Judicial authority; <input checked="" type="checkbox"/> Administrative authority; <input checked="" type="checkbox"/> Decisions of this administrative authority always meet the requirements of Article <a href="#">19(3)</a> .
<p>e. Which authority in the United States is competent to recognise and enforce maintenance arrangements? <a href="#">(Art. 57 of the Convention)</a> *</p>	<input checked="" type="checkbox"/> Judicial authority; <input checked="" type="checkbox"/> Administrative authority.
<p>f. Which authority in the United States is competent to enforce maintenance arrangements? <a href="#">(Art. 57 of the Convention)</a> *</p>	<input checked="" type="checkbox"/> Judicial authority; <input checked="" type="checkbox"/> Administrative authority; <input type="checkbox"/> Other, please specify.  Response not available in English  Response not available in French  Response not available in Spanish
Last Update	2017-03-03 21:23:14.0
<b>3. INFORMATION REGARDING SYSTEMS FOR PROVIDING BENEFITS IN PLACE OF MAINTENANCE</b> <a href="#">(Art. 36 of the Convention)</a>	
<p>Does the United States have any public bodies that act in place of an individual to whom maintenance is owed or any public bodies to which reimbursement may be owed for benefits provided to the creditor in place of maintenance? *</p>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, please give a brief outline of the system.  English version  When certain forms of public assistance are provided for families, the state may act in place of the individual to seek an order that may be used for reimbursement for public assistance expenditures.  Response not available in French  Response not available in Spanish

Last Update	2017-03-10 22:01:53.0
-------------	-----------------------

1. GENERAL INFORMATION ABOUT ENFORCEMENT IN THE UNITED STATES ([Art. 57\(1\) d\) of the Convention](#))

<p>a. Is there a time limitation for enforcement of maintenance? <a href="#">(Art. 57(1) d) of the Convention</a>; *</p>	<p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>To learn the statute of limitations in an individual U.S. state, please see the OCSE Intergovernmental Reference Guide, Section E 'Statute of Limitations,' question E.1: <a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&amp;staticProfileQuestion=356">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&amp;staticProfileQuestion=356</a>.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
--	---

<p>b. Are there other limitations to enforcement? *</p>	<p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>Federal law includes certain bankruptcy and consumer credit protections. State law may also recognize certain defenses to enforcement.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
---	---

<p>c. Can a debtor claim forfeiture of a maintenance claim due to the inaction of the creditor? *</p>	<p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>In some U.S. states, in very limited circumstances, a debtor may be able to raise equitable defenses.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
---	--

<p>d. Is a ranking applied to creditors where there are several maintenance obligations from different previous relationships? *</p>	<p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes, please specify.</p> <p>Response not available in English  Response not available in French  Response not available in Spanish</p>
--	--

<p>e. Is a proportional distribution applied to creditors where there are several maintenance obligations from different previous relationships? *</p>	<p><input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes, please specify.</p> <p>English version</p> <p>When a IV-D child support agency receives a child support payment through income withholding on behalf of a debtor who has several child maintenance obligations owed to different creditors, the agency must distribute the payments among the creditors, provided that each creditor receives payment on the current support obligation prior to any distribution on arrears. For payments made by methods other than income withholding, states may have different distribution procedures.</p> <p>Response not available in French  Response not available in Spanish</p>
--	--

<p>Last Update</p>	<p>2017-03-03 21:23:21.0</p>
--------------------	------------------------------

2. DEBTOR PROTECTION RULES ([Art. 57\(1\) d\) of the Convention](#))

<p>Please specify any debtor protection rules that apply to the recovery of maintenance in the United States.</p>	<p><input type="checkbox"/> No protection rules apply.  <input checked="" type="checkbox"/> The following protection rules apply, please specify.</p> <p>English version</p> <p>There is a federal bankruptcy act that includes protections to debtors, but there is limited applicability to child support debt. See stage 2, I(6)(g).</p>
---	---

The Federal Consumer Credit Protection Act (CCPA) sets limits on amounts that can be withheld from a debtor's disposable earnings. If the debtor owes less than 12 weeks' worth of arrears, it is 60% of the debtor's disposable income. This ceiling is reduced to 50% if the debtor is supporting another spouse or other dependents. If the arrears have been owed for 12 weeks or more, 5% is added to the applicable percentage. An individual state may have laws providing the debtor greater protection from withholding than the limits under the CCPA. In addition, each U.S. state has enacted legislation governing enforcement of child maintenance decisions made in that state. For information about such laws and procedures, please see the OCSE Intergovernmental Reference Guide, Section J 'Support Enforcement' and Section L 'Payments.'

? Go to the IRG Profile Query web page for question J.2 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=305>) or question L.9 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=350>)

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'J. Support Enforcement' or 'L. Payments'

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

Last Update

2017-03-10 22:15:39.0

3. OVERVIEW OF ENFORCEMENT PROCEDURES IN THE UNITED STATES ([Art. 57\(1\) d\) of the Convention](#))

Please provide a short overview of the process(es) that occur(s) when the United States enforces a decision in its territory. Please include time frames.

English version

The local child support agency providing services will review the case to determine the most appropriate enforcement remedy. Enforcement

remedies include income withholding, seizure of bank accounts, contempt proceedings, liens on personal and real property, federal and state income tax refund interception, suspension of the debtor's driver's, occupational, or recreational licenses, and passport denial. Time frames will vary depending upon the enforcement sought. However, by federal regulation, child support agencies must take any appropriate enforcement action unless service of process is necessary, within no more than 30 calendar days of identifying a delinquency or other support-related non-compliance with the decision or the location of the noncustodial parent, whichever occurs later. Income withholding and federal income tax refund offset are mandatory enforcement mechanisms with different timeframes. If service of process is necessary prior to taking an enforcement action, service must be completed (or unsuccessful attempts to serve process must be documented), and enforcement action taken if process is served, within no later than 60 calendar days of identifying a delinquency or other support-related non-compliance with the decision, or the location of the noncustodial parent, whichever occurs later. For more information about enforcement see the OCSE Intergovernmental Reference Guide, Section J 'Support Enforcement.'

? Go to the IRG Profile Query web page for question J.3 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=269>)

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'J. Support Enforcement'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

Last Update

2017-03-03 21:23:31.0



4. MEASURES AVAILABLE FOR ENFORCEMENT OF MAINTENANCE DECISIONS ([Art. 34 of the Convention](#))

What methods are available in the United States for the enforcement of maintenance decisions? ([Art. 34 of the Convention](#)); \*

- Provisional measures;
- Wage withholding;
- Garnishment or attachment from bank accounts and other sources;
- Seizure and sale of assets;
- Deductions from social security payments;
- Lien on or forced sale of property;
- Withholding or attachment of tax refund;
- Withholding or attachment of pension benefits;
- Seizure of lump sum payments;
- Credit bureau reporting;
- Denial, suspension or revocation of various licenses (for example, passport, driving licenses);
- Incarceration;
- Hearing regarding a default in payment;
- Prohibition of a debtor from leaving the United States;
- Seizure of lottery or gambling winnings;
- Criminal prosecution on account of failure to comply with duty to pay maintenance;
- The use of mediation, conciliation or similar processes to bring about voluntary compliance;
- Other, please specify.

English version

Please see the OCSE Intergovernmental Reference Guide, Section J 'Support Enforcement,' questions J.7 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=221>) and J.8 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=205>).

Response not available in French

Response not available in Spanish

Last Update

2017-03-03 21:23:12.0

1. PAYMENT INFORMATION (WHERE PAYMENTS SHOULD BE SENT) ([Art. 11\(1\) f\) of the Convention](#))

a. When the United States is the requesting State, where should maintenance payments be sent? \*

- Directly to the creditor;
- To the representative of the creditor;
- To the Central Authority;
- To a centralised location other than the Central Authority;
- To another authority;
- If multiple options apply, please explain.

Response not available in English

Response not available in French

Response not available in Spanish

b. When the United States is the requesting State and receives maintenance payments at a centralised location or at a different address from the Central Authority, please provide the following contact details about where to send the payments:

Name:

Address:

All U.S. IV-D child support agencies have a state disbursement unit (SDU), to which all maintenance payments are centrally made. The SDU then transfers the payments to the creditor. For the address of each individual state SDU, please see the IRG (<http://www.acf.hhs.gov/programs/css/irg-state-map>). Select the state. Click on the Contact Tab. Under "Address Type," click on State Disbursement Unit. Then click on View.

Telephone:

Fax:

E-mail:

Website:

Contact person(s):

- Other information, please specify:

Response not available in English

Response not available in French

Response not available in Spanish

c. When the United States is the requesting State, in what form can maintenance payments be received in that State? Please check all that apply. If the answer depends upon who is receiving the payment, please also check "Other" and specify. \*

- Cash;
- Cheque or warrant;
- Electronic funds transfer;

English version

Individual U.S. states vary in their laws and procedures. Please see Section L of the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=459>) for more information about support payments.

Response not available in French

Response not available in Spanish

- Credit card;
- Other, please specify.

English version

Individual U.S. states vary in their laws and procedures. Please see Section L of the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=459>) for more information about support payments.

Response not available in French

Response not available in Spanish

d. When the United States is the requested State, in what form can maintenance payments be made in that State? Please check all that apply. If the answer depends upon who is receiving the payment, please also check "Other" and specify. \*

- Cash;
- Cheque or warrant;
- Electronic funds transfer. Please provide details;

English version

Individual U.S. states vary in their laws and procedures. Please see Section L of the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=459>) for more information about support payments.

Response not available in French

Response not available in Spanish

- Payroll deductions;
- Preauthorized withdrawal from a financial institution account;
- Credit card;
- Other, please specify.

English version

Individual U.S. states vary in their laws and procedures. Please see Section L of the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=459>) for more information about support payments.

Response not available in French

Response not available in Spanish

e. What actions does the United States take to reduce the costs and fees associated with international payment processing? \*

- All payments are processed through a designated authority.
- All payments are processed upon receipt.
- Payments under a certain amount are not processed. Please specify the minimum amount processed and currency using the ISO code.

English version

Individual U.S. states vary in their laws and procedures. Please see Section L of the IRG (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=3&selProfileQuestion=8>) for more information about support payments.

Response not available in French

Response not available in Spanish

- Payments under a certain amount are collected, banked and combined into one payment sent at intervals agreed with the creditor. Please specify the amount and currency using the ISO code.

Response not available in English

Response not available in French  
 Response not available in Spanish  
 Other, please specify.  
 Response not available in English  
 Response not available in French  
 Response not available in Spanish

Last Update

2017-03-03 21:23:37.0

1. OVERVIEW OF THE PROCESS THAT OCCURS WHEN MAKING AN APPLICATION UNDER ARTICLE 10 OF THE CONVENTION ([Art. 57 of the Convention](#))

a. Please provide a short overview (max. 4000 characters) of the process(es) that occur(s) when the United States receives an application to recognise or to recognise and enforce a maintenance decision made in a Contracting State. Please indicate which authority receives the application, where the application is sent for processing, the steps that occur, and what happens if recognition is contested. The purpose of this question is to provide the caseworker in the requesting State with a general understanding of the steps that will take place in working the case. Please include time frames.

English version

Each individual U.S. state has enacted the Uniform Interstate Family Support Act (UIFSA); Article 7 governs Recognition and Enforcement of maintenance decisions made by a Contracting State.

The requesting Central Authority sends the application to the Interstate Central Registry of the U.S. state in which the requesting Central Authority wants the decision recognized and enforced; usually that will be a U.S. state in which the debtor is located or has income or assets.

For the address of each individual state central registry, please see the IRG (<http://www.acf.hhs.gov/programs/css/irg-state-map>). Select the state. Click on the Contact Tab. Under "Address Type," click on Central Registry Contact. Then click on View.

When the Central Registry receives the application, it will forward the documents to the appropriate local IV-D child support agency. The local IV-D child support agency will review the case to determine the most appropriate enforcement remedy. The agency will register (file) the foreign decision with the appropriate tribunal in that state. The tribunal will send a notice to the debtor that the decision has been registered. It will include a copy of the decision and the statement of any alleged arrearages. The

	<p>notice will inform the debtor that the decision is enforceable as of the date of registration, that he or she has a certain time period to challenge the registration or enforcement of the decision, and that failure to timely challenge the registration or enforcement of the decision will result in confirmation of the decision as well as any alleged arrears.</p> <p>If the debtor does not contest the registration, the registration and the alleged arrears are confirmed by operation of law. If there is a challenge, there is a hearing before the tribunal at which both parties may present evidence. In a Central Authority case, the child support agency in the registering state will facilitate the production of evidence on behalf of the applicant creditor. If the contesting party fails to establish a valid defense, the registered decision and arrearages are confirmed. The registering state will immediately enforce the decision by any means available, including income withholding. A separate enforcement hearing is not necessary. If a requesting Central Authority does not know where the debtor lies within the U.S., the Central Authority may send an application to the Federal Office of Child Support Enforcement for locate services.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>b. Please provide a short overview (max. 4000 characters) of the process(es) that occur(s) when the United States receives an application to recognise or to recognise and enforce a maintenance arrangement made in a Contracting State. Please indicate which authority receives the application, where the application is sent for processing, the steps that occur, and what happens if recognition is contested. The purpose of this question is to provide the caseworker in the requesting State with a general understanding of the steps that will take place in working the case. Please include time frames.</p>	<p>English version</p> <p>The procedures will be substantially similar to the procedures for recognition and enforcement of a support order.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>c. Please provide a short overview (max. 4000 characters) of the process(es) that occur(s) when the United States receives an application to enforce a maintenance decision made or recognised in</p>	<p>English version</p> <p>The requesting Central Authority sends the application to the Interstate Central Registry of</p>

the United States. Please indicate which authority receives the application, where the application is sent for processing and the steps that occur, and what happens if enforcement is contested. The purpose of this question is to provide the caseworker in the requesting State with a general understanding of the steps that will take place in working the case. Please include time frames.

the U.S. state in which the requesting Central Authority wants the decision enforced; usually that will be a U.S. state in which the debtor is located or has income or assets. For the address of each individual state central registry, please see the IRG (<http://www.acf.hhs.gov/programs/css/irg-state-map>). Select the state. Click on the Contact Tab. Under "Address Type," click on Central Registry Contact. Then click on View. When the Central Registry receives the application, it will forward the documents to the appropriate local IV-D child support agency. The local IV-D child support agency will review the case to determine the most appropriate enforcement remedy. Enforcement remedies include income withholding, seizure of bank accounts, contempt proceedings, liens on personal and real property, federal and state income tax refund interception, suspension of the debtor's driver's, occupational, or recreational licenses, and passport denial. Timeframes will vary depending upon the enforcement sought. However, by federal regulation, child support agencies must take any appropriate enforcement action unless service of process is necessary, within no more than 30 calendar days of identifying a delinquency or other support-related non-compliance with the decision or the location of the noncustodial parent, whichever occurs later. Income withholding and federal income tax refund offset are mandatory enforcement mechanisms with different timeframes. If service of process is necessary prior to taking an enforcement action, service must be completed (or unsuccessful attempts to serve process must be documented), and enforcement action taken if process is served, within no later than 60 calendar days of identifying a delinquency or other support-related non-compliance with the decision, or the location of the noncustodial parent, whichever occurs later.

Response not available in French

Response not available in Spanish

d. Please provide a short overview (max. 4000 characters) of the process(es) that occur(s) when

English version

the United States receives an application to enforce a maintenance arrangement made or recognised in the United States. Please indicate which authority receives the application, where the application is sent for processing and the steps that occur, and what happens if enforcement is contested. The purpose of this question is to provide the caseworker in the requesting State with a general understanding of the steps that will take place in working the case. Please include time frames.

The U.S. does not "make" maintenance arrangements. However, the U.S. will process applications to enforce a foreign maintenance arrangement previously recognized in the U.S. The procedures will be substantially similar to the procedures for receiving an application to enforce a foreign support order which has been recognized in the U.S.

Response not available in French

Response not available in Spanish

e. Please provide a short overview (max. 4000 characters) of the process(es) that occur(s) when an application to establish a decision is received in the United States. Please indicate which authority receives the application, where the application is sent for processing, and the steps that occur. The purpose of this question is to provide the caseworker in the requesting State with a general understanding of the steps that will take place in working the case. Please include time frames.

English version

The requesting Central Authority sends the application to the Interstate Central Registry of the U.S. state with jurisdiction over the alleged debtor. That will usually be the state in which the alleged debtor resides. For the address of each individual state central registry, please see the IRG. Select the state. Click on the Contact Tab. Under 'Address Type,' click on Central Registry Contact. Then click on View.

When the Central Registry receives the application, it will forward the documents to the appropriate local IV-D child support agency. The local IV-D child support agency will process the case according to its state law and regulations. The state must prove that it has personal jurisdiction over the debtor. Generally, a state's tribunal has jurisdiction over people living within the state, but a person can also submit to the jurisdiction of the tribunal. Jurisdiction may also be based on significant connections between the debtor and the requested state. Once an application is received, the IV-D child support agency must, within no more than 20 calendar days of receipt of the application, open a case by establishing a case record, and based on an assessment of the case, determine necessary action. The agency can seek relevant information from the custodial parent (along with other sources) and verify the information as necessary. If there is inadequate location information to proceed with the case, the agency can also request additional information or refer the case for further locate attempts.



Some U.S. states will process the application administratively. Others will process the application judicially. Each U.S. state has enacted the Uniform Interstate Family Support Act (UIFSA). Within that Act is Article 4 governing Establishment, which applies to establishment of a decision in both domestic and international cases. A U.S. state will only establish a child maintenance decision when there is no other decision entitled to recognition under the Act. In such cases, the Act directs a tribunal to apply its own state law in determining the existence of a support duty and in determining the amount of any support obligation. Every U.S. state uses support guidelines, which are numerical formulas, to determine the support amount. With limited exception, when a child maintenance decision is issued, the decision will require that payments be made through income withholding and that payments be made to a centralized state disbursement unit.

For more information about a particular U.S. state's laws and procedures regarding establishment of a maintenance decision, please see the OCSE Intergovernmental Reference Guide, Section F 'Support Details' and Section I 'Support Order Establishment.'

? Go to the IRG Profile Query web page for questions F.1 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=357>) and I.1 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=389>)

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'F. Support Details' or 'I. Support Order Establishment'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

English version

f. Please provide a short overview (max. 4000 characters) of the process(es) that occur(s) when the United States receive an application to modify

a maintenance decision made in the United States. Please indicate which authority receives the application, where the application is sent for processing, and the steps that occur. The purpose of this question is to provide the caseworker in the requesting State with a general understanding of the steps that will take place in working the case. Please include time frames.

The requesting Central Authority sends the application for modification of a U.S. child maintenance decision to the Interstate central registry of the U.S. state with jurisdiction over the respondent. For the address of each individual state central registry please see the IRG. Select the state. Click on the Contact Tab. Under "Address Type," click on Central Registry Contact. Then click View.

In interstate or international cases, the requested U.S. state will determine whether it is the appropriate state, under the Uniform Interstate Family Support Act (UIFSA), to conduct the review and modification. UIFSA establishes rules for when a court or agency has jurisdiction (authority) to modify a child or spousal maintenance decision. These rules govern U.S. tribunals in modifying child and spousal maintenance decisions made in their state, as well as in other states.

Pursuant to UIFSA, a tribunal has continuing, exclusive jurisdiction to modify a child maintenance decision, which it made, so long as the debtor, creditor, or child resides in that state. If one of the parties or the child continues to live in the state that issued the child maintenance decision, that is usually where the requesting Central Authority should send the application. There are limited exceptions, primarily involving the parties' consent for another state to modify the decision.

If no tribunal has continuing, exclusive jurisdiction (CEJ), usually the party seeking modification must register the existing order in the U.S. state with jurisdiction over the other party. For example, if the creditor seeks modification, the application should be sent to the Interstate Central Registry of the U.S. state with jurisdiction over the debtor, which will usually be where the debtor resides. If the debtor seeks modification, the application should be sent to the Interstate Central Registry of the U.S. state with jurisdiction over the creditor, which will usually be where the creditor resides.

Within 180 calendar days of receiving a request for a review or locating the non-requesting parent, whichever occurs later, a state must conduct a review of the decision and adjust/ modify the decision or determine -- based on

federal and state law -- that the decision should not be adjusted/modified.

When a U.S. tribunal has jurisdiction to modify a child maintenance decision, it will follow the law in that state regarding the criteria that must be met in order to modify the decision, as well as its state support guidelines. One exception regarding applicable law is important. The duration of the maintenance decision cannot be modified. So if one U.S. state has jurisdiction to modify another U.S. state's decision, it will be able to modify the support amount but not the duration of support, if duration is nonmodifiable under the law of the issuing state.

Upon modification the new child maintenance decision becomes the one order that all U.S. states will recognize as controlling. It is immediately enforceable by all means available, including income withholding.

UIFSA has different rules for modifying a spousal maintenance decision. Pursuant to UIFSA, the only U.S. state with jurisdiction to modify a spousal maintenance decision is the state that issued the decision. If the application is for modification of a spousal maintenance decision, IV-D child support agencies will not handle such an application. The applicant needs to send the request directly to the competent authority (local court) in the issuing U.S. state. In most states, the petitioner (which can be the creditor or debtor) will need to retain a lawyer to take the legal action on the petitioner's behalf.

The petitioner will need to prove a change in circumstances that meets the state's criteria for a modification.

Response not available in French

Response not available in Spanish

g. Please provide a short overview (max. 4000 characters) of the process(es) that occur(s) when the United States receives an application to modify a maintenance decision made in a State other than the United States. Please indicate which authority receives the application, where the application is sent for processing, and the steps that occur. The purpose of this question is to provide the caseworker in the requesting State with a general understanding of the

English version

Each U.S. state has enacted the Uniform Interstate Family Support Act (UIFSA). Within that Act is Article 7, which governs modification of maintenance decisions made by a Contracting State other than the U.S. Article 7 prohibits modification of a Convention order if the creditor is still a resident of the foreign country where

steps that will take place in working the case. Please include time frames.

the support order was issued, unless (1) the creditor submits to the jurisdiction of the U.S. tribunal, or (2) the foreign tribunal lacks or refuses to exercise jurisdiction to modify its support order. The requesting Central Authority sends the application for modification of a child maintenance decision made in a State other than the U.S. to the Interstate Central Registry of the U.S. state with jurisdiction over the respondent, which will usually be the U.S. state where the respondent lives.

For example, if the creditor seeks modification, the application should be sent to the Interstate Central Registry of the U.S. state with jurisdiction over the debtor, which will usually be where the debtor resides. If the debtor seeks modification, the application should be sent to the Interstate Central Registry of the U.S. state with jurisdiction over the creditor, which will usually be where the creditor resides. For the address of each individual state central registry, please see the IRG (<http://www.acf.hhs.gov/programs/css/irgstate-map>). Select the state. Click on the Contact Tab. Under 'Address Type,' click on Central Registry Contact. Then click on View. The application must include documents required under the Convention.

When the Central Registry receives the application, it will forward the documents to the appropriate local IV-D child support agency. The local IV-D child support agency will register (file) the foreign decision with the appropriate tribunal in that state. The tribunal will send a notice to the respondent that the decision has been registered for modification. It will include a copy of the decision and the statement of any alleged arrearages. The notice will also inform the respondent that the decision is enforceable as of the date of registration, that he or she has a certain time period within which to challenge the registration or enforcement of the decision, and that failure to timely challenge the registration or enforcement of the decision will result in confirmation of the decision as well as any alleged arrears.

A party contesting a registered Convention maintenance decision must file the contest not later than 30 days after notice of the registration. If the contesting party does not live in the

U.S., the challenge period is extended to 60 days after notice of the registration.

If there is no timely contest, the registered order is enforceable and the alleged arrears are confirmed by operation of law. The tribunal will then proceed to modify the order based on evidence of income and application of the state's support guidelines. If there is a challenge, there is a hearing before the tribunal at which both parties may present evidence. In Central Authority case, the child support agency in the registering state will facilitate the production of evidence on behalf of the applicant.

In a contest of a registered Convention support order, a U.S. tribunal is bound by the findings of fact on which the foreign tribunal based its jurisdiction and may not review the merits of the decision.

The U.S. tribunal will follow the law in that U.S. state regarding the criteria that must be met in order to modify a maintenance decision, as well as its state support guidelines. One exception regarding applicable law is important. The duration of the maintenance decision cannot be modified. So if a U.S. state has jurisdiction to modify another State's decision, it will be able to modify the support amount but not the duration of support, if duration is nonmodifiable under the law of the issuing state.

Upon registration and modification, the new child maintenance decision is immediately enforceable by all means available, including income withholding.

In most cases, the above steps will be completed within 180 calendar days from receipt of the application or location of the respondent, whichever occurs later.

If the application is for modification of another State's spousal maintenance decision, IV-D child support agencies will not handle such an application. The applicant needs to send the request directly to the competent authority (local court) in the issuing U.S. state. In most states, the petitioner (which can be the creditor or debtor) will need to retain a lawyer to take the legal action on the petitioner's behalf.

The petitioner will need to prove a change in circumstances that meets the state's criteria for a modification.

Response not available in French

Response not available in Spanish

Last Update

2017-03-10 23:20:33.0

## 2. METHODS OF CALCULATING MAINTENANCE IN THE UNITED STATES ([Art. 57 of the Convention](#))

a. Is the assessment of maintenance based on a formula, guidelines, or other criteria? Please outline the principal elements involved in making an assessment \*

No

Yes, please outline the principal elements.

English version

Federal law requires that each state establish numerical child support guidelines for use in calculating child maintenance. At a minimum, these guidelines must take into consideration all earnings and income of the debtor and provide for the child's health care needs, through health insurance coverage or other means. State guidelines vary substantially. The principal elements of most state guidelines are:

? Incomes of the parents (varies as to net or gross)

? Educational expenses

? Child care expenses

? Health insurance

? Extraordinary health care costs

? Custody and visitation arrangements

Many state guidelines also address income of the children, age of the children, and other child maintenance obligations owed by the parent.

There are three principal types of guidelines currently in place throughout the U.S.: (1) income shares, (2) percentage of income, and (3) the Melson formula.

An income shares guideline is based on the concept that the child should receive the same proportion of parental income that he or she would have received if the parents lived together. The guideline considers the incomes of both parents. A majority of individual U.S. states use an income shares guideline.

The basic principle of the percentage of income guideline is that the noncustodial parent should pay a flat percentage of his or her gross or net income in child support. It is assumed that the custodial parent is providing in-kind support.

These guidelines often include an adjustment for pre-existing support orders, and take into account the number of dependents. The Melson guideline is a comprehensive formula with three basic principles: (1) parents should keep sufficient income for their basic needs and to encourage continued employment; (2) parents should not retain any excess income until the basic needs of their dependents are met; and (3) when income is sufficient to provide the basic needs of the parents and all dependents, the dependents are entitled to share any additional income so that they can benefit from the noncustodial parent's higher standard of living.

For information about individual state guidelines, please see the OCSE Intergovernmental Reference Guide, Section F 'Support Details' and Section I 'Support Order Establishment.'

? Go to the IRG Profile Query web page (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=357>)

for Section F or (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=342>) for Section I

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'F. Support Details' or 'I. Support Order Establishment'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

b. What legislation applies to the assessment of maintenance? Provide a link to a website if possible.

English version

Please see Section F 'Support Details,' question F.1 for more information: <https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=357>

Response not available in French

Response not available in Spanish

Last Update	2017-03-03 21:23:32.0
3. ESTABLISHMENT OF PARENTAGE ( <a href="#">Art. 57 of the Convention</a> )	
<p>a. What legislation applies to the establishment of parentage in the context of maintenance proceedings? Provide a link to a website if possible.</p>	<p>English version</p> <p>Each individual state has its own laws that apply to parentage establishment. The laws must meet certain federal requirements (see the response below). For a detailed description of a state's legislation governing establishment of parentage, please see the OCSE Intergovernmental Reference Guide, Section H 'Paternity.'</p> <p>? Go to the IRG Profile Query web page for question H.2 (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&amp;staticProfileQuestion=153">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&amp;staticProfileQuestion=153</a>)</p> <p>? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'H. Paternity'.</p> <p>? Next, make a selection from the list of Profile Questions.</p> <p>? Click the 'Submit' button at the bottom of the page and you will see information for all states.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>b. What are the legal methods for establishing parentage in the context of maintenance proceedings ? *</p>	<p><input checked="" type="checkbox"/> Establishment of parentage by presumption;</p> <p><input checked="" type="checkbox"/> Establishment of parentage by acknowledgement;</p> <p><input checked="" type="checkbox"/> Establishment of parentage by judicial decision;</p> <p><input checked="" type="checkbox"/> Establishment of parentage by administrative decision;</p> <p><input checked="" type="checkbox"/> Other, please specify.</p> <p>English version</p> <p>Establishment of parentage by adoption</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>



c. Please provide a short overview of how the above method(s) for establishing parentage are applied in the context of maintenance proceedings.

#### English version

Tribunals generally apply the law of the forum, in the establishment of parentage in child maintenance cases.

Federal law specifies that, in order to receive federal funding, an individual U.S. state must have certain basic procedures related to parentage establishment:

? Legal means to establish parentage until a child reaches 18 years of age, including the use of legally and medically acceptable genetic tests.

? Voluntary acknowledgment of parentage

? In-hospital parentage establishment

All states have programs in which birthing hospitals provide unmarried parents of a newborn the opportunity to acknowledge parentage of the child.

? Acknowledgment of parentage up until the child's eighteenth birthday through vital records offices or other entities designated by the State.

? In a contested case, administrative authority in the IV-D child support agency to order genetic testing.

? In a contested case, the ordering of genetic tests - by a court or an administrative child support agency -- upon the request of a party, if the request is supported by a sworn statement by the party: (1) alleging parentage and setting forth facts establishing a reasonable possibility of the requisite sexual contact between the parties; or (2) denying parentage and setting forth facts establishing a reasonable possibility of the non-existence of sexual contact between the parties.

? A legal presumption of parentage based upon genetic test results.

All states have rules regarding presumption of parentage. For a detailed description of a state's parentage establishment procedures, please see the OCSE Intergovernmental Reference Guide, Section H 'Paternity.'

? Go to the IRG Profile Query web page for question H.1 (<https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=240>)

? In the 'Program Category' drop-down menu (just above the line in the middle of the page)

select 'H. Paternity'.

? Next, make a selection from the list of Profile Questions.  
? Click the 'Submit' button at the bottom of the page and you will see information for all states. State laws vary regarding establishment of parentage for same sex couples and assisted reproductive technology.

Response not available in French

Response not available in Spanish

d. Please describe the scientific or medical methods (e.g., DNA testing) used for establishing parentage, including requirements and restrictions, and how they apply in the context of maintenance proceedings.

English version

In the U.S. most testing is done by DNA analysis.  
? In a contested case, the IV-D child support agency must have administrative authority to order genetic testing.  
? In a contested case, a court or an administrative child support agency must order genetic tests upon the request of a party, if the request is supported by a sworn statement by the party: (1) alleging parentage and setting forth facts establishing a reasonable possibility of the requisite sexual contact between the parties; or (2) denying parentage and setting forth facts establishing a reasonable possibility of the nonexistence of sexual contact between the parties.  
? There must be a legal presumption of parentage based upon genetic test results. State laws vary regarding establishment of parentage for same sex couples and assisted reproductive technology.

Response not available in French

Response not available in Spanish

e. Please indicate the costs that typically would be involved in the establishment of parentage in the United States, who would bear these costs, whether the costs are capable of being covered by legal assistance, and whether any distinction is made between residents and non-residents in these matters.

English version

No distinction is made between U.S. residents and nonresidents regarding genetic testing. However, foreign reciprocating countries and their resident creditors are not charged fees for establishing parentage or other requested services.  
In any case in which the IV-D child support agency orders genetic testing, the agency will

	<p>pay costs of such tests, subject to recoupment (if the state so elects) from the alleged parent if parentage is established. Payment of support owed to the creditor obligee has priority over fees, costs and expenses. The IV-D child support agency will also obtain additional testing in any case where an original test result is contested, upon request and advance payment by the contestant.</p> <p>Genetic testing costs range from about U.S. \$150 to U.S. \$500 for testing of the mother, father, and child. Costs for international cases may be higher because of the need to ensure the chain of custody of the evidence. Costs vary between states and may also depend on whether the individuals are requesting the test in a private attorney case or are tested at the request of a IV-D child support agency that has negotiated a contract price with a specific laboratory.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
--	--

Last Update	2017-03-03 21:23:12.0
-------------	-----------------------

4. FOLLOWING RECOGNITION OF A DECISION BY ANOTHER STATE ([Art. 57 of the Convention](#))

a. Following recognition of the maintenance decision in the other State, does the United States require notification of the recognition? *	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
--	--

b. Does the recognition in the other State affect the status of the original decision in the United States? *	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, please specify.  Response not available in English  Response not available in French  Response not available in Spanish
---	---

Last Update	2017-03-03 21:23:01.0
-------------	-----------------------

5. DIRECT REQUESTS TO COMPETENT AUTHORITIES (WHERE AVAILABLE) ([Art. 37 of the Convention](#))

<p>a. Please provide a short overview of how direct requests are handled in the United States.</p>	<p>English version</p> <p>Direct requests should be made to the appropriate local court. If the applicant needs legal assistance, the applicant must retain private counsel. The individual U.S. state that is conducting the hearing will apply the law of the state where it is located.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>b. Please provide information about the competent authorities in the United States to which direct requests should be addressed.</p>	<p>English version</p> <p>Direct requests should be addressed to the appropriate local court. Information on courts is available at: <a href="http://www.ncsc.org/Informationand-Resources/Browse-by-State.aspx">http://www.ncsc.org/Informationand-Resources/Browse-by-State.aspx</a></p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>c. Please provide other relevant information regarding direct requests in the United States.</p>	<p>English version</p> <p>N/A</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>Last Update</p>	<p>2017-03-03 21:23:11.0</p>
<p>6. OTHER INFORMATION (<a href="#">Art. 57 of the Convention</a>)</p>	
<p>a. Please describe, in the form of a flow chart, the process followed for establishment in the United States.</p>	<p>English version</p> <p>? The creditor must fill out an application for establishment that contains all the necessary information about the applicant, respondent, and the person for whom maintenance is sought.</p> <p>? The requesting Central Authority sends the application to the Interstate Central Registry of the U.S. state with jurisdiction over the alleged debtor. That will usually be the state in which the alleged debtor resides.</p>

? When the Central Registry receives the application, it will process the case according to its state law and regulations. Some U.S. states will process the application administratively. Others will process the application judicially.  
? Each U.S. state has enacted the Uniform Interstate Family Support Act (UIFSA).  
? A U.S. state will only establish a child maintenance decision when there is no other decision entitled to recognition under UIFSA.  
? In such cases, UIFSA directs a tribunal to apply its own state law in determining the existence of a support duty and in determining the amount of any support obligation.  
? Every U.S. state uses support guidelines, to determine the support amount.  
? With limited exception, when a child maintenance decision is issued, the decision will require that payments be made through income withholding and that payments be made to a centralized state disbursement unit.

English document

French document

Spanish document

Response not available in French

Response not available in Spanish

b. Are there any limitations on the period for which arrears may be enforced? Please provide the limitation period and the citation to the laws of the United States.

[\(Art. 32\(5\) of the Convention\)](#) \*

No

Yes, please provide limitation period and the citation to the laws of the United States.

English version

This is governed by individual U.S. state law. The law of the forum will apply. Please see Section E 'Statute of Limitations,' question E.1 of the IRG: <https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&staticProfileQuestion=356>

Response not available in French

Response not available in Spanish

<p>c. What happens when the debtor pays a monthly amount, but this amount does not cover the current maintenance as well as the arrears? How is it determined which debt is paid first and who makes such a decision?</p>	<p>English version</p> <p>Federal regulations require that all current child support must be paid, before any payment is allocated toward arrears. All IV-D child support agencies must comply with this directive, when enforcing maintenance decisions.</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>d. When there are multiple garnishments / withholdings against the income of a debtor, does child maintenance have priority over the other debts? *</p>	<p><input checked="" type="checkbox"/> Yes;</p> <p><input type="checkbox"/> Yes, in certain circumstances. Please explain;</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p> <p><input type="checkbox"/> No, please specify order of priority.</p> <p>Response not available in English</p> <p>Response not available in French</p> <p>Response not available in Spanish</p>
<p>e. Is it possible to collect interest on arrears in the United States? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes.</p>
<p>f. When it is possible to collect interest on arrears in the United States, are there limitations? *</p>	<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes, please specify any limitations.</p> <p>English version</p> <p>Individual state law varies. To learn whether a particular U.S. state charges interest on support arrears, please see the OCSE Intergovernmental Reference Guide, Section F 'Support Details.' ? Go to the IRG Profile Query web page for question F.2 (<a href="https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&amp;staticProfileQuestion=381">https://ocsp.acf.hhs.gov/irg/profileQuery.html?geoType=1&amp;staticProfileQuestion=381</a>)</p>

? In the 'Program Category' drop-down menu (just above the line in the middle of the page) select 'F. Support Details'.

? Next, make a selection from the list of Profile Questions.

? Click the 'Submit' button at the bottom of the page and you will see information for all states.

Response not available in French

Response not available in Spanish

g. What happens with a maintenance claim under the United States insolvency laws? (e.g., does it make a difference whether there is a decision for maintenance?)

English version

Bankruptcy in the U.S. is governed by federal law.

Enforcement. Creditors generally are prohibited from taking any actions to establish or collect debts while the debtor's bankruptcy proceeding is pending. This 'stay' arises automatically on the filing of the bankruptcy petition. The Bankruptcy Reform Act exempts actions to establish paternity and those to establish or modify alimony, maintenance, or support from the scope of the automatic stay. Additionally, it exempts alimony, maintenance, or support as property of the bankruptcy estate. Accordingly, actions to establish parentage or to establish or modify alimony, maintenance, or support are not subject to the automatic stay in the first place.

Dischargeability. Child support debts are generally not dischargeable in bankruptcy. That means that the insolvent debtor is still subject to the terms of his or her maintenance decision, demonstrating a public policy favoring financial responsibility toward children.

Debt priority. Debts owed for child support and alimony or maintenance also have a high priority over other debts of the bankrupt debtor. This is important because, as the bankruptcy estate is liquidated and the debtor's funds disbursed, there might not be sufficient funds to satisfy the claims of all creditors. Increasing the priority of child support claims makes it more likely they will be paid. If the full child support debt is not paid as part of the disbursement, they remain debts of the debtor and must ultimately be paid.

Response not available in French

	Response not available in Spanish
h. What are the procedures when a debtor leaves the United States? *	<input checked="" type="checkbox"/> Notify original requesting State; <input type="checkbox"/> End the proceedings; <input type="checkbox"/> Other, please specify.  Response not available in English  Response not available in French  Response not available in Spanish
i. Please provide a short overview of the process that occurs when the creditor or the debtor wants to appeal a decision in the United States.	English version  If the decision was issued by a trial court, either party may appeal to the next appellate level. State law will govern the allowable bases for appeal. If the decision was issued by an administrative agency, the party must comply with the state's administrative appeals. If there continues to be a challenge of an administrative decision, an appeal to a court must be allowed. The bases for appeal, timeframes, and procedure will also depend upon the type of action being appealed. Individual state law will apply. Please see the IRG for more information. The IV-D child support agency will provide assistance equivalent to that in an appeal in a domestic case.  Response not available in French  Response not available in Spanish
Last Update	2017-03-10 23:52:58.0
Profil d'État -	

Powered by SmartGuide. Co-financed by Norway and Alphinat.



*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance***Abstract of a Decision**

(Article 25(3) b))

1. **Name of the State of origin of the decision:** \_\_\_\_\_  
(identify territorial unit if applicable) \_\_\_\_\_
2. **Competent authority issuing the Abstract**
- 2.1 **Name:** \_\_\_\_\_
- 2.2 **Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2.3 **Telephone number:** \_\_\_\_\_
- 2.4 **Fax number:** \_\_\_\_\_
- 2.5 **E-mail:** \_\_\_\_\_
3. **The decision<sup>1</sup>**
- 3.1 **Type of authority:**  judicial authority or  administrative authority<sup>2</sup>
- 3.2 **Name and place of authority:** \_\_\_\_\_
- 3.3 **(address if applicable)** \_\_\_\_\_  
\_\_\_\_\_
- 3.4 **Date of the decision:** \_\_\_\_\_ (dd/mm/yyyy)
- 3.5 **Date of effect of the decision:** \_\_\_\_\_ (dd/mm/yyyy)
- 3.6 **Reference number of the decision:** \_\_\_\_\_
- 3.7 **Names of the parties to the decision:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 3.8 **Decision results from:**  Divorce or legal separation proceedings  
 Parentage establishment proceedings  
 Maintenance proceedings  
 Parental responsibility proceedings  
 Other: \_\_\_\_\_
4. **Name of the debtor:** \_\_\_\_\_

<sup>1</sup> For the definition of decision see Article 19(1).<sup>2</sup> The Administrative Authority referred to in this Statement meets the requirements of Article 19(3).

5. Terms of decision

5.1 Maintenance payable for one person or a group of persons (specify currency<sup>3</sup> for each amount)

Name(s) and date(s) of birth of the person(s) entitled to support / maintenance, arrears and other payments

- a. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- b. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- c. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)

5.1.1 Terms of payment of support / maintenance

- <sup>4</sup> Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay support / maintenance in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     other (specify): \_\_\_\_\_  
This payment includes     arrears     retroactive maintenance  
 interest     health insurance     school fees     other payments, arrangements or conditions (specify\*): \_\_\_\_\_

5.1.2 Terms of payment of arrears

- As of \_\_\_\_\_ (dd/mm/yyyy) the total amount of arrears is in the amount of \_\_\_\_\_. Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay arrears in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     single payment     other (specify): \_\_\_\_\_

5.1.3 Terms of payment of retroactive maintenance

- As of \_\_\_\_\_ (dd/mm/yyyy) the total amount of retroactive maintenance is in the amount of \_\_\_\_\_. Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay retroactive maintenance in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     single payment     other (specify): \_\_\_\_\_

<sup>3</sup> Currency should be specified using the ISO code.

<sup>4</sup> Where different payments are provided for different periods please replicate this information for such periods with the understanding that at the new beginning date the former amount is replaced by the new one.

\* Include extract of the decision if necessary.

**5.1.4 Other payments as provided in the decision**

- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay interest in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year         other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay health insurance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year         other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay school fees in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year         other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall make other payments, arrangements or conditions (specify\*): \_\_\_\_\_  
\_\_\_\_\_ to be paid in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year         other (specify): \_\_\_\_\_

**5.1.5 Lump sum**

The debtor shall pay the lump sum amount of \_\_\_\_\_ on

Due date \_\_\_\_\_ (dd/mm/yyyy)

Another frequency (specify): \_\_\_\_\_

**5.2 Maintenance payments for more than one person on an individual basis (specify currency<sup>5</sup> for each amount)**

a. Family name(s): \_\_\_\_\_  
 Given name(s): \_\_\_\_\_  
 Date of birth: \_\_\_\_\_ (dd/mm/yyyy)

<sup>6</sup> Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay support / maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_  
 This payment includes       arrears       retroactive maintenance  
 interest       health insurance     school fees     other payments, arrangements or conditions (specify\*): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay arrears in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       single payment     other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay retroactive maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       single payment     other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay interest in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay health insurance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay school fees in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall make other payments, arrangements or conditions (specify\*): \_\_\_\_\_  
 \_\_\_\_\_ to be paid in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

**Lump sum**

The debtor shall pay the lump sum amount of \_\_\_\_\_ on  
 Due date \_\_\_\_\_ (dd/mm/yyyy)  
 Another frequency (specify): \_\_\_\_\_

<sup>5</sup> Currency should be specified using the ISO code.

<sup>6</sup> Where different payments are provided for different periods please replicate this information for such periods with the understanding that at the new beginning date the former amount is replaced by the new one.

\* Include extract of the decision if necessary.

b. Family name(s): \_\_\_\_\_  
 Given name(s): \_\_\_\_\_  
 Date of birth: \_\_\_\_\_ (dd/mm/yyyy)

<sup>7</sup> Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay support / maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_  
 This payment includes       arrears       retroactive maintenance  
 interest       health insurance     school fees     other payments, arrangements or conditions (specify\*): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay arrears in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       single payment     other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay retroactive maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       single payment     other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay interest in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay health insurance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay school fees in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall make other payments, arrangements or conditions (specify\*): \_\_\_\_\_  
 \_\_\_\_\_ to be paid in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other: \_\_\_\_\_

**Lump sum**

The debtor shall pay the lump sum amount of \_\_\_\_\_ on  
 Due date \_\_\_\_\_ (dd/mm/yyyy)  
 Another frequency (specify): \_\_\_\_\_

<sup>7</sup> Where different payments are provided for different periods please replicate this information for such periods with the understanding that at the new beginning date the former amount is replaced by the new one.

\* Include extract of the decision if necessary.

c. Family name(s): \_\_\_\_\_  
 Given name(s): \_\_\_\_\_  
 Date of birth: \_\_\_\_\_ (dd/mm/yyyy)

<sup>8</sup> Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay support / maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_  
 This payment includes       arrears       retroactive maintenance  
 interest       health insurance     school fees     other payments, arrangements or conditions (specify\*): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay arrears in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       single payment     other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay retroactive maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       single payment     other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay interest in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay health insurance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay school fees in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall make other payments, arrangements or conditions (specify\*): \_\_\_\_\_  
 \_\_\_\_\_ to be paid in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

**Lump sum**

The debtor shall pay the lump sum amount of \_\_\_\_\_ on  
 Due date \_\_\_\_\_ (dd/mm/yyyy)  
 Another frequency (specify): \_\_\_\_\_

<sup>8</sup> Where different payments are provided for different periods please replicate this information for such periods with the understanding that at the new beginning date the former amount is replaced by the new one.

\* Include extract of the decision if necessary.

**5.3 Maintenance payments directed to a public body (specify currency<sup>9</sup> for each amount)**

- a. Name of the public body: \_\_\_\_\_
- b. Family name(s) of the contact person: \_\_\_\_\_
- c. Given name(s) of the contact person: \_\_\_\_\_
- d. Address: \_\_\_\_\_
- e. Telephone numbers: \_\_\_\_\_
- f. Fax number: \_\_\_\_\_
- g. E-mail: \_\_\_\_\_

- <sup>10</sup> Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay support / maintenance in the amount of \_\_\_\_\_ every:
  - week       two weeks     month       3 months     6 months
  - year         other (specify): \_\_\_\_\_
 This payment includes     arrears       retroactive maintenance  
 interest     health insurance     school fees     other payments, arrangements or conditions (specify\*): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay arrears in the amount of \_\_\_\_\_ every:
  - week       two weeks     month       3 months     6 months
  - year         single payment     other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay retroactive maintenance in the amount of \_\_\_\_\_ every:
  - week       two weeks     month       3 months     6 months
  - year         single payment     other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay interest in the amount of \_\_\_\_\_ every:
  - week       two weeks     month       3 months     6 months
  - year         other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay health insurance in the amount of \_\_\_\_\_ every:
  - week       two weeks     month       3 months     6 months
  - year         other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay school fees in the amount of \_\_\_\_\_ every:
  - week       two weeks     month       3 months     6 months
  - year         other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall make other payments, arrangements or conditions (specify\*): \_\_\_\_\_  
 \_\_\_\_\_ to be paid in the amount of \_\_\_\_\_ every:
  - week       two weeks     month       3 months     6 months
  - year         other (specify): \_\_\_\_\_

**Lump sum**

The debtor shall pay the lump sum amount of \_\_\_\_\_ on

- Due date \_\_\_\_\_ (dd/mm/yyyy)
- Another frequency (specify): \_\_\_\_\_

<sup>9</sup> Currency should be specified using the ISO code.

<sup>10</sup> Where different payments are provided for different periods please replicate this information for such periods with the understanding that at the new beginning date the former amount is replaced by the new one.

\* Include extract of the decision if necessary.

6. Indexation of maintenance

- The decision is silent about indexation
- The maintenance is indexed by operation of law.
- The maintenance should be indexed every year by \_\_\_\_\_ %
- The maintenance should be indexed as follows: \_\_\_\_\_

7. Interest where maintenance payments are late

- The decision is silent about interest where maintenance payments are late
- The interest on late payments is by operation of law.
- Unpaid amounts generate interest where payments are late at the following rate:  
\_\_\_\_\_ % per  month  3 months  6 months  year
- The interest is:  simple or  compound

8. Effect of the decision

This decision shall remain in effect:

- Until the child(ren) has (have) reached the age of: \_\_\_\_\_
- Until the child(ren) is (are) self-supporting
- Until the child(ren) has (have) completed education (specify):
  - Secondary school  High school  Other: \_\_\_\_\_
  - College  University \_\_\_\_\_
- Until the creditor is self-supporting
- Unless and until it is changed or discontinued by further decision or by operation of law
- Other: \_\_\_\_\_

9. Costs and expenses

- The decision is silent about costs and expenses
- The debtor is ordered to pay costs and expenses
- The creditor is ordered to pay costs and expenses
- Costs and expenses amount to: \_\_\_\_\_ (specify currency<sup>11</sup>)
- This Abstract accurately reflects the content of the decision, described under item 3 above, in relation to maintenance for the persons listed under items 5.1. and 5.2. a, b and c above.

Name: \_\_\_\_\_ (in block letters) Date: \_\_\_\_\_  
Name of the official from the competent authority of the State of origin (dd/mm/yyyy)

- This Abstract was completed by the official from the competent authority of the State of origin whose name appears above and is transmitted by the requesting Central Authority.

Name: \_\_\_\_\_ (in block letters) Date: \_\_\_\_\_  
Authorised representative of the Central Authority (dd/mm/yyyy)

Requesting Central Authority reference number: \_\_\_\_\_  
(For Central Authority use only)

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

<sup>11</sup> Currency should be specified using the ISO code.



ANNEX II

## Acknowledgement form under Article 12(3)

### CONFIDENTIALITY AND PERSONAL DATA PROTECTION NOTICE

*Personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted. Any authority processing such data shall ensure its confidentiality, in accordance with the law of its State.*

*An authority shall not disclose or confirm information gathered or transmitted in application of this Convention if it determines that to do so could jeopardise the health, safety or liberty of a person in accordance with Article 40.*

*A determination of non-disclosure has been made by a Central Authority in accordance with Article 40.*

<b>1. Requested Central Authority</b>	<b>2. Contact person in requested State</b>
a. Address	a. Address (if different)
b. Telephone number	b. Telephone number (if different)
c. Fax number	c. Fax number (if different)
d. E-mail	d. E-mail (if different)
e. Reference number	e. Language(s)

3. Requesting Central Authority \_\_\_\_\_  
Contact person \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

4. The requested Central Authority acknowledges receipt on \_\_\_\_\_ (dd/mm/yyyy) of the transmittal form from the requesting Central Authority (reference number \_\_\_\_\_; dated \_\_\_\_\_ (dd/mm/yyyy)) concerning the following application under:

- Article 10(1) a)
- Article 10(1) b)
- Article 10(1) c)
- Article 10(1) d)
- Article 10(1) e)
- Article 10(1) f)
- Article 10(2) a)
- Article 10(2) b)
- Article 10(2) c)

Family name(s) of applicant: \_\_\_\_\_

Family name(s) of the person(s) for whom  
maintenance is sought or payable: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Family name(s) of debtor: \_\_\_\_\_

**5. Initial steps taken by the requested Central Authority:**

The file is complete and is under consideration

See attached status of application report

Status of application report will follow

Please provide the following additional information and / or documentation:

\_\_\_\_\_

\_\_\_\_\_

The requested Central Authority refuses to process this application as it is manifest that the requirements of the Convention are not fulfilled (Art. 12(8)). The reasons:

are set out in an attached document

will be set out in a document to follow

**The requested Central Authority requests that the requesting Central Authority inform it of any change in the status of the application.**

Name: \_\_\_\_\_ (in block letters)      Date: \_\_\_\_\_

Authorised representative of the Central Authority      (dd/mm/yyyy)

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 0.5 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

## Application for Enforcement of a Decision Made or Recognised in the Requested State (Article 10(1) b))

### CONFIDENTIALITY AND PERSONAL DATA PROTECTION NOTICE

*Personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted. Any authority processing such information shall ensure its confidentiality, in accordance with the law of its State.*

*An authority shall not disclose or confirm information gathered or transmitted in application of this Convention if it determines that to do so could jeopardise the health, safety or liberty of a person in accordance with Article 40.*

*A determination of non-disclosure has been made by a Central Authority in accordance with Article 40. If this box is ticked, information under sections 2 d, e, f and g and 5 should only be provided in the Restricted Information on the Applicant page of this form.*

1. Requesting Central Authority file reference number: \_\_\_\_\_
2. Particulars of the applicant
  - a. Family name(s): \_\_\_\_\_
  - b. Given name(s): \_\_\_\_\_
  - c. Date of birth:<sup>1</sup> \_\_\_\_\_ (dd/mm/yyyy)

or

  - a. Name of the public body: \_\_\_\_\_
  - b. Family name(s) of the contact person: \_\_\_\_\_
  - c. Given name(s) of the contact person: \_\_\_\_\_

and

  - d. Address: \_\_\_\_\_  
\_\_\_\_\_
  - e. Telephone numbers: \_\_\_\_\_  
\_\_\_\_\_
  - f. Fax number: \_\_\_\_\_
  - g. E-mail: \_\_\_\_\_
3. Particulars of the person(s) for whom maintenance is sought or payable
  - 3.1  Maintenance is sought or payable for the applicant named above
 

**Maintenance basis:**

<input type="checkbox"/> parentage	<input type="checkbox"/> <i>in loco parentis</i> or equivalent relationship
<input type="checkbox"/> marriage	<input type="checkbox"/> analogous relationship to marriage
<input type="checkbox"/> affinity (please identify): _____	
<input type="checkbox"/> grandparent	<input type="checkbox"/> sibling <input type="checkbox"/> grandchild
<input type="checkbox"/> other: _____	

<sup>1</sup> It is not necessary to provide a date of birth in the case of a representative.

- 3.2  Maintenance is sought or payable for the following child(ren)
- a. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)  
Maintenance basis:  
 parentage  *in loco parentis* or equivalent relationship
- b. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)  
Maintenance basis:  
 parentage  *in loco parentis* or equivalent relationship
- c. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)  
Maintenance basis:  
 parentage  *in loco parentis* or equivalent relationship

- 3.3  Maintenance is sought or payable for the following person
- Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)  
Maintenance basis:  
 marriage  analogous relationship to marriage  
 affinity (please identify): \_\_\_\_\_  
 grandparent  sibling  grandchild  
 other: \_\_\_\_\_

- 3.4  Maintenance is sought or payable for additional children or persons, additional particulars are attached

4. Particulars (if known) of the debtor (respondent)

- a. Family name(s): \_\_\_\_\_
- b. Given name(s): \_\_\_\_\_
- c. Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- d. Personal identification number: \_\_\_\_\_  
(include name of country or territorial unit that issued the number)
- e. Residential address: \_\_\_\_\_  
\_\_\_\_\_
- f. Postal address: \_\_\_\_\_  
\_\_\_\_\_
- g. Any other information that may assist with the location of the debtor  
\_\_\_\_\_  
\_\_\_\_\_

**5. Payments**

**a. Details for electronic transfer of payments (if applicable)**

**Name of the bank:** \_\_\_\_\_  
**NBIC:**<sup>2</sup> \_\_\_\_\_  
**SWIFT-address:** \_\_\_\_\_  
**IBAN:**<sup>3</sup> \_\_\_\_\_  
**Account number:** \_\_\_\_\_  
**Name of account holder:** \_\_\_\_\_  
**Reference:**<sup>4</sup> \_\_\_\_\_

**b. Details for payments by cheques (if applicable)**

**Cheque payable to:** \_\_\_\_\_  
**Cheque to be sent to:** \_\_\_\_\_  
**(address)** \_\_\_\_\_  
\_\_\_\_\_  
**Reference:**<sup>3</sup> \_\_\_\_\_

**6. The decision made in the requested State**

**6.1 Type of authority:**  **judicial authority** or  **administrative authority**

**6.2 Name and place of authority:** \_\_\_\_\_

**6.3 (address if applicable)** \_\_\_\_\_

**6.4 Date of the decision:** \_\_\_\_\_ **(dd/mm/yyyy)**

**6.5 Date of effect of the decision:** \_\_\_\_\_ **(dd/mm/yyyy)**

**6.6 Reference number of the decision:** \_\_\_\_\_

**6.7 Names of the parties:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**7. The following are attached to this application:**

- Decision made in the requested State**
- Decision (or registration) made in the requested State to recognise a decision of another State**
- Decision of the State of origin (other State)**
- Statement of arrears**
- Financial Circumstances Form**

<sup>2</sup> National Bank Identification Code.

<sup>3</sup> International Bank Account Number.

<sup>4</sup> Where needed to effect payment.

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

8.  Where the application is for the recovery of maintenance other than maintenance obligations arising from a parent-child relationship towards a person under the age of 21 years, the applicant (creditor) has benefited from legal assistance in the State of origin (Articles 17 and 25(1)f)

9. Other information: \_\_\_\_\_  
\_\_\_\_\_

10. Attestations

This application was completed by the applicant and reviewed by the requesting Central Authority

This application complies with the requirement of the Convention (Article 12(2)). The information contained in this application and the attached documents correspond to and are in conformity with the information and documents provided by the applicant to the requesting Central Authority. The application is forwarded by the Central Authority on behalf of and with the consent of the applicant

Name: \_\_\_\_\_ (in block letters)  
Authorised representative of the Central Authority

Date: \_\_\_\_\_  
(dd/mm/yyyy)

## Restricted Information on the Applicant

### Application for Enforcement of a Decision Made or Recognised in the Requested State (Article 10(1) b))

**N.B.** The requesting Central Authority has determined that information under sections 2 d, e, f and g and 5 on this page shall not be disclosed or confirmed for the protection of the health, safety or liberty of a person. Such a determination shall according to Article 40(2) be taken into account by the requested Central Authority.

1. Requesting Central Authority file reference number: \_\_\_\_\_
  
2. Particulars of the applicant
  - a. Family name(s): \_\_\_\_\_
  - b. Given name(s): \_\_\_\_\_
  - c. Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
  - d. Address: \_\_\_\_\_  
\_\_\_\_\_
  - e. Telephone numbers: \_\_\_\_\_  
\_\_\_\_\_
  - f. Fax number: \_\_\_\_\_
  - g. E-mail: \_\_\_\_\_
  
5. Payments
  - a. Details for electronic transfer of payments (if applicable)
    - Name of the bank: \_\_\_\_\_
    - NBIC: \_\_\_\_\_
    - SWIFT-address: \_\_\_\_\_
    - IBAN: \_\_\_\_\_
    - Account number: \_\_\_\_\_
    - Name of account holder: \_\_\_\_\_
    - Reference: \_\_\_\_\_
  - b. Details for payments by cheques (if applicable)
    - Cheque payable to: \_\_\_\_\_
    - Cheque to be sent to: \_\_\_\_\_  
(address) \_\_\_\_\_
    - Reference: \_\_\_\_\_

- This application was completed by the applicant and reviewed by the requesting Central Authority
- This application complies with the requirement of the Convention (Article 12(2)). The information contained in this application and the attached documents correspond to and are in conformity with the information and documents provided by the applicant to the requesting Central Authority. The application is forwarded by the Central Authority on behalf of and with the consent of the applicant

Name: \_\_\_\_\_ (in block letters)      Date: \_\_\_\_\_  
Authorised representative of the Central Authority      (dd/mm/yyyy)

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

## Application for Establishment of a Decision (including where necessary the establishment of parentage)

( Article 10(1) c)  Article 10(1) d))

### CONFIDENTIALITY AND PERSONAL DATA PROTECTION NOTICE

*Personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted. Any authority processing such information shall ensure its confidentiality, in accordance with the law of its State.*

*An authority shall not disclose or confirm information gathered or transmitted in application of this Convention if it determines that to do so could jeopardise the health, safety or liberty of a person in accordance with Article 40.*

*A determination of non-disclosure has been made by a Central Authority in accordance with Article 40. If this box is ticked, information under sections 2 d, e, f and g and 5 should only be provided in the Restricted Information on the Applicant page of this form.*

1. Requesting Central Authority file reference number: \_\_\_\_\_

2. Particulars of the applicant

a. Family name(s): \_\_\_\_\_

b. Given name(s): \_\_\_\_\_

c. Date of birth: \_\_\_\_\_ (dd/mm/yyyy)

d. Address: \_\_\_\_\_

e. Telephone numbers: \_\_\_\_\_

f. Fax number: \_\_\_\_\_

g. E-mail: \_\_\_\_\_

3. Particulars of the person(s) for whom maintenance is sought or payable

3.1  Maintenance is sought or payable for the applicant named above

Parentage is established or presumed

Maintenance basis:

parentage  *in loco parentis* or equivalent relationship

marriage  analogous relationship to marriage

affinity (please identify): \_\_\_\_\_

grandparent  sibling  grandchild

other: \_\_\_\_\_



- 3.2  Maintenance is sought or payable for the following child(ren)
- a. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- Parentage is established or presumed
- Maintenance basis:  
 parentage  *in loco parentis* or equivalent relationship
- b. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- Parentage is established or presumed
- Maintenance basis:  
 parentage  *in loco parentis* or equivalent relationship
- c. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- Parentage is established or presumed
- Maintenance basis:  
 parentage  *in loco parentis* or equivalent relationship
- 3.3  Maintenance is sought or payable for the following person
- Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- Maintenance basis:  
 marriage  analogous relationship to marriage  
 affinity (please identify): \_\_\_\_\_  
 grandparent  sibling  grandchild  
 other: \_\_\_\_\_
- 3.4  Maintenance is sought or payable for additional children or persons, additional particulars are attached
4. Particulars (if known) of the debtor (respondent)
- a. Family name(s): \_\_\_\_\_
- b. Given name(s): \_\_\_\_\_
- c. Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- d. Personal identification number: \_\_\_\_\_  
(include name of country or territorial unit that issued the number)
- e. Residential address: \_\_\_\_\_  
\_\_\_\_\_
- f. Postal address: \_\_\_\_\_  
\_\_\_\_\_

- g. Any other information that may assist with the location of the debtor

---

---

5. Payments

- a. Details for electronic transfer of payments (if applicable)

Name of the bank: \_\_\_\_\_  
NBIC: <sup>1</sup> \_\_\_\_\_  
SWIFT-address: \_\_\_\_\_  
IBAN: <sup>2</sup> \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name of account holder: \_\_\_\_\_  
Reference: <sup>3</sup> \_\_\_\_\_

- b. Details for payments by cheques (if applicable)

Cheque payable to: \_\_\_\_\_  
Cheque to be sent to: \_\_\_\_\_  
(address) \_\_\_\_\_  
Reference: <sup>3</sup> \_\_\_\_\_

6. This application is for the establishment of a decision in the requested State where:

- a.  there is no existing decision (Article 10(1) c)  
b.  recognition and enforcement of a decision is not possible or is refused because of the lack of a basis for recognition and enforcement under Article 20 or on the grounds specified in Article 22 b) or e) (Article 10(1) d))

7. Support / maintenance sought by the applicant<sup>4</sup> (specify currency<sup>5</sup> for each amount)

Support / maintenance  
Please specify the amount: \_\_\_\_\_  
Frequency of payments  
 week     two weeks     month     3 months     6 months  
 year     other (specify): \_\_\_\_\_

Retroactive support / maintenance  
Please specify date from which retroactive maintenance is sought:  
\_\_\_\_\_ (dd/mm/yyyy)  
Please specify the amount: \_\_\_\_\_  
Frequency of payments  
 week     two weeks     month     3 months     6 months  
 year     single payment     other (specify): \_\_\_\_\_

---

<sup>1</sup> National Bank Identification Code.

<sup>2</sup> International Bank Account Number.

<sup>3</sup> Where needed to affect payment.

<sup>4</sup> Complete this section only if required by the requested State.

<sup>5</sup> Currency should be specified using the ISO code.

- Other payments, arrangements or conditions**  
Please specify: \_\_\_\_\_  
Please specify the amount: \_\_\_\_\_  
Frequency of payments  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

**8. The following document(s) are attached in support of this application:**

- Birth certificate or equivalent
- Acknowledgement of parentage by the debtor
- Formal statement providing evidence relating to parentage
- Decision of competent authority concerning parentage
- Genetic test results
- Adoption certificate
- Certificate of marriage or similar relationship and date of divorce / separation
- Formal statement providing evidence relating to common residence of the parties
- Agreement between the parties relating to maintenance
- Evidence of attendance at secondary or post-secondary educational institution
- Evidence of disability
- Financial Circumstances Form
- Statement of arrears or payment history
- Other evidence in accordance with the law of the requested State
- Decision of the requested State refusing recognition and enforcement

**9.  Please initiate enforcement measures once the decision is established**

**10. Other information:** \_\_\_\_\_  
\_\_\_\_\_

**11. Attestations**

- This application was completed by the applicant and reviewed by the requesting Central Authority**
- This application complies with the requirement of the Convention (Article 12(2)). The information contained in this application and the attached documents correspond to and are in conformity with the information and documents provided by the applicant to the requesting Central Authority. The application is forwarded by the Central Authority on behalf of and with the consent of the applicant.**

**Name:** \_\_\_\_\_ (in block letters)  
**Authorised representative of the Central Authority**

**Date:** \_\_\_\_\_  
(dd/mm/yyyy)

## Restricted Information on the Applicant

Application for Establishment of a Decision  
(including where necessary the establishment of parentage)  
( Article 10(1) c)  Article 10(1) d))

N.B. The requesting Central Authority has determined that information under sections 2 d, e, f and g and 5 on this page shall not be disclosed or confirmed for the protection of the health, safety or liberty of a person. Such a determination shall according to Article 40(2) be taken into account by the requested Central Authority.

1. Requesting Central Authority file reference number: \_\_\_\_\_
  
2. Particulars of the applicant
  - a. Family name(s): \_\_\_\_\_
  - b. Given name(s): \_\_\_\_\_
  - c. Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
  - d. Address: \_\_\_\_\_  
\_\_\_\_\_
  - e. Telephone numbers: \_\_\_\_\_  
\_\_\_\_\_
  - f. Fax number: \_\_\_\_\_
  - g. E-mail: \_\_\_\_\_
  
5. Payments
  - a. Details for electronic transfer of payments (if applicable)  
Name of the bank: \_\_\_\_\_  
NBIC: \_\_\_\_\_  
SWIFT-address: \_\_\_\_\_  
IBAN: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Name of account holder: \_\_\_\_\_  
Reference: \_\_\_\_\_
  - b. Details for payments by cheques (if applicable)  
Cheque payable to: \_\_\_\_\_  
Cheque to be sent to: \_\_\_\_\_  
(address) \_\_\_\_\_  
Reference: \_\_\_\_\_

- This application was completed by the applicant and reviewed by the requesting Central Authority
- This application complies with the requirement of the Convention (Article 12(2)). The information contained in this application and the attached documents correspond to and are in conformity with the information and documents provided by the applicant to the requesting Central Authority. The application is forwarded by the Central Authority on behalf of and with the consent of the applicant

Name: \_\_\_\_\_ (in block letters)  
Authorised representative of the Central Authority

Date: \_\_\_\_\_  
(dd/mm/yyyy)

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 0.5 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

## Application for Recognition or Recognition and Enforcement

( Article 10(1) a)  Article 10(2) a)  Article 30)

### CONFIDENTIALITY AND PERSONAL DATA PROTECTION NOTICE

*Personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted. Any authority processing such information shall ensure its confidentiality, in accordance with the law of its State.*

*An authority shall not disclose or confirm information gathered or transmitted in application of this Convention if it determines that to do so could jeopardise the health, safety or liberty of a person in accordance with Article 40.*

*A determination of non-disclosure has been made by a Central Authority in accordance with Article 40. If this box is ticked, information under sections 2 d, e, f and g and 5 should only be provided in the Restricted Information on the Applicant page of this form.*

1. Requesting Central Authority file reference number: \_\_\_\_\_

2. Particulars of the applicant

The applicant is:

- The person for whom maintenance is sought or payable  
 The representative of the person for whom maintenance is sought or payable  
 The debtor  
 The representative of the debtor

a. Family name(s): \_\_\_\_\_

b. Given name(s): \_\_\_\_\_

c. Date of birth:<sup>1</sup> \_\_\_\_\_ (dd/mm/yyyy)

or

a. Name of the public body: \_\_\_\_\_

b. Family name(s) of the contact person: \_\_\_\_\_

c. Given name(s) of the contact person: \_\_\_\_\_

and

d. Address: \_\_\_\_\_  
 \_\_\_\_\_

e. Telephone numbers: \_\_\_\_\_  
 \_\_\_\_\_

f. Fax number: \_\_\_\_\_

g. E-mail: \_\_\_\_\_

<sup>1</sup> It is not necessary to provide a date of birth in the case of a representative.

**3. Particulars of the person(s) for whom maintenance is sought or payable**

**3.1  Maintenance is sought or payable for the applicant named above**

**Maintenance basis:**

- parentage  *in loco parentis* or equivalent relationship  
 marriage  analogous relationship to marriage  
 affinity (please identify): \_\_\_\_\_  
 grandparent  sibling  grandchild  
 other: \_\_\_\_\_

**3.2  Maintenance is sought or payable for the following child(ren)**

**a. Family name(s):** \_\_\_\_\_

**Given name(s):** \_\_\_\_\_

**Date of birth** \_\_\_\_\_ (dd/mm/yyyy)

**Maintenance basis:**

- parentage  *in loco parentis* or equivalent relationship

**b. Family name(s):** \_\_\_\_\_

**Given name(s):** \_\_\_\_\_

**Date of birth** \_\_\_\_\_ (dd/mm/yyyy)

**Maintenance basis:**

- parentage  *in loco parentis* or equivalent relationship

**c. Family name(s):** \_\_\_\_\_

**Given name(s):** \_\_\_\_\_

**Date of birth** \_\_\_\_\_ (dd/mm/yyyy)

**Maintenance basis:**

- parentage  *in loco parentis* or equivalent relationship

**3.3  Maintenance is sought or payable for the following person**

**Family name(s):** \_\_\_\_\_

**Given name(s):** \_\_\_\_\_

**Date of birth** \_\_\_\_\_ (dd/mm/yyyy)

**Maintenance basis:**

- marriage  analogous relationship to marriage  
 affinity (please identify): \_\_\_\_\_  
 grandparent  sibling  grandchild  
 other: \_\_\_\_\_

**3.4  Maintenance is sought or payable for additional children or persons, additional particulars are attached**

**4.1 Particulars (if known) of the debtor**

- The person is the same as the applicant named above
- a. Family name(s): \_\_\_\_\_
- b. Given name(s): \_\_\_\_\_
- c. Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- d. Residential address: \_\_\_\_\_  
\_\_\_\_\_
- e. Postal address: \_\_\_\_\_  
\_\_\_\_\_

**4.2 If the debtor is the applicant, particulars (if known and applicable) of the representative of the person(s) for whom maintenance is sought or payable**

- a. Family name(s): \_\_\_\_\_
- b. Given name(s): \_\_\_\_\_
- c. Address: \_\_\_\_\_  
\_\_\_\_\_
- d. Telephone numbers: \_\_\_\_\_  
\_\_\_\_\_
- e. Fax number: \_\_\_\_\_
- f. E-mail: \_\_\_\_\_

**4.3 Information that may assist with the location of the respondent**

- a. Personal identification number: \_\_\_\_\_  
(include name of country or territorial unit that issued the number)
- b. Any other information that may assist with the location of the respondent  
\_\_\_\_\_

**5. Payments**

**a. Details for electronic transfer of payments (if applicable)**

- Name of the bank: \_\_\_\_\_
- NBIC:<sup>2</sup> \_\_\_\_\_
- SWIFT-address: \_\_\_\_\_
- IBAN:<sup>3</sup> \_\_\_\_\_
- Account number: \_\_\_\_\_
- Name of account holder: \_\_\_\_\_
- Reference:<sup>4</sup> \_\_\_\_\_

<sup>2</sup> National Bank Identification Code.

<sup>3</sup> International Bank Account Number.

<sup>4</sup> Where needed to effect payment.

**b. Details for payments by cheques (if applicable)**

**Cheque payable to:** \_\_\_\_\_

**Cheque to be sent to:** \_\_\_\_\_

**(address)** \_\_\_\_\_

**Reference:**<sup>5</sup> \_\_\_\_\_

6.  **This is an application for recognition only; do not initiate enforcement measures**

7. **Bases for recognition and enforcement (Article 20) (please tick all relevant boxes)**

**Date of decision:** \_\_\_\_\_ **(dd/mm/yyyy)** **State of origin:** \_\_\_\_\_

**The respondent was habitually resident in the State of origin at the time proceedings were instituted;**

**The respondent has submitted to the jurisdiction either expressly or by defending on the merits of the case without objecting to the jurisdiction at the first available opportunity;**

**The creditor was habitually resident in the State of origin at the time proceedings were instituted;**

**The child for whom the maintenance was ordered was habitually resident in the State of origin at the time proceedings were instituted, provided that the respondent has lived with the child in that State or has resided in that State and provided support for the child there;**

**There has been agreement to the jurisdiction by the parties in writing or evidenced by writing (except in disputes relating to maintenance obligations in respect of children);**

**The maintenance decision was made by an authority exercising jurisdiction on a matter of personal status or parental responsibility and that jurisdiction was not based solely on the nationality of one of the parties; or**

**In a case where the State addressed has made a reservation in accordance with Article 20(2), there are factual circumstances in which the law of that State in similar circumstances would confer or would have conferred jurisdiction on its authorities to make such a decision. Please specify:**

\_\_\_\_\_  
\_\_\_\_\_

8. **Appearance of the respondent**

**The respondent appeared or was represented in the proceedings in the State of origin**

**The respondent did not appear and was not represented in the proceedings in the State of origin (see attached Statement of Proper Notice (Art. 25(1) c))**

9.  **Financial Circumstances Form attached (Art. 11(2) a) and b))**

<sup>5</sup> Where needed to effect payment.



10.  Where the application is for the recovery of maintenance other than maintenance obligations arising from a parent-child relationship towards a person under the age of 21 years, the applicant (creditor) has benefited from legal assistance in the State of origin (Articles 17 and 25(1) f))
- Where the application is for the recovery of maintenance including maintenance obligations arising from a parent-child relationship towards a person under the age of 21 years, the applicant (debtor) has benefited from legal assistance in the State of origin (Articles 17 and 25(1) f))

\* See Transmittal Form for the list of documents in support of the application.

11. Other information: \_\_\_\_\_  
\_\_\_\_\_

12. Attestations

- This application was completed by the applicant and reviewed by the requesting Central Authority.
- This application complies with the requirement of the Convention (Article 12(2)). The information contained in this application and the attached documents correspond to and are in conformity with the information and documents provided by the applicant to the requesting Central Authority. The application is forwarded by the Central Authority on behalf of and with the consent of the applicant.

Name: \_\_\_\_\_ (in block letters)  
Authorised representative of the Central Authority

Date: \_\_\_\_\_  
(dd/mm/yyyy)

## Restricted Information on the Applicant

### Application for Recognition or Recognition and Enforcement

Article 10(1) a)  Article 10(2) a)  Article 30)

**N.B.** The requesting Central Authority has determined that information under sections 2 d, e, f and g and 5 on this page shall not be disclosed or confirmed for the protection of the health, safety or liberty of a person. Such a determination shall according to Article 40(2) be taken into account by the requested Central Authority.

1. Requesting Central Authority file reference number: \_\_\_\_\_
  
2. Particulars of the applicant
  - a. Family name(s): \_\_\_\_\_
  - b. Given name(s): \_\_\_\_\_
  - c. Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
  - d. Address: \_\_\_\_\_  
\_\_\_\_\_
  - e. Telephone numbers: \_\_\_\_\_  
\_\_\_\_\_
  - f. Fax number: \_\_\_\_\_
  - g. E-mail: \_\_\_\_\_
  
5. Payments
  - a. Details for electronic transfer of payments (if applicable)

Name of the bank: \_\_\_\_\_

NBIC: \_\_\_\_\_

SWIFT-address: \_\_\_\_\_

IBAN: \_\_\_\_\_

Account number: \_\_\_\_\_

Name of account holder: \_\_\_\_\_

Reference: \_\_\_\_\_
  - b. Details for payments by cheques (if applicable)

Cheque payable to: \_\_\_\_\_

Cheque to be sent to: \_\_\_\_\_

(address) \_\_\_\_\_  
\_\_\_\_\_

Reference: \_\_\_\_\_

- This application was completed by the applicant and reviewed by the requesting Central Authority.
- This application complies with the requirement of the Convention (Article 12(2)). The information contained in this application and the attached documents correspond to and are in conformity with the information and documents provided by the applicant to the requesting Central Authority. The application is forwarded by the Central Authority on behalf of and with the consent of the applicant.

Name: \_\_\_\_\_ (in block letters)  
Authorised representative of the Central Authority

Date: \_\_\_\_\_  
(dd/mm/yyyy)

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 0.5 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance***Financial Circumstances Form**

*N.B. Sections II to VI should be completed only as necessary for the purposes of the application to which this form is attached and to the best of the applicant's knowledge. When completing the Financial Circumstances Form, please consult Country Profile of the requested State to verify what information is required for a specific application.*

**CONFIDENTIALITY AND PERSONAL DATA PROTECTION NOTICE**

*Personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted. Any authority processing such information shall ensure its confidentiality, in accordance with the law of its State.*

*An authority shall not disclose or confirm information gathered or transmitted in application of this Convention if it determines that to do so could jeopardise the health, safety or liberty of a person in accordance with Article 40.*

*A determination of non-disclosure has been made by a Central Authority in accordance with Article 40. If this box is ticked, information under items V.D. 2, 4, 6, 8, 10, 12, 14 and 16 and VI.D. 9 and 11 should only be provided in the Restricted Information on the Applicant page of this form.*

**I. REFERENCE INFORMATION**

1. Requesting Central Authority	2. Contact person in Requested State
a. Address	a. Address (if different)
b. Telephone number	b. Telephone number (if different)
c. Fax number	c. Fax number (if different)
d. E-mail	d. E-mail (if different)
e. Reference number	e. Language(s)

3. The applicant, \_\_\_\_\_ (family name(s) and given name(s)), born \_\_\_\_\_ (dd/mm/yyyy), is:  creditor,  representative of the person(s) for whom maintenance is sought or payable, or  debtor

4. This form is being submitted in relation to: (it is possible to tick more than one box)

- Establishment of a decision (Art. 10(1) c) and d))  
(Complete all sections)
- Recognition or recognition and enforcement of a decision (Art. 10(1) a))  
(Complete sections III and IV)
- Enforcement of a decision made or recognised in the requested State (Art. 10(1) b))  
(Complete sections III and IV)
- Modification of a decision (Art. 10(1) e) and f) and (2) b) and c))  
(Complete all sections)
- Applying for legal assistance (Art. 17 a))  
(Complete sections II, V and VI if the applicant is the person identified under II)  
(Complete sections III, V and VI if the applicant is the person identified under III)

5. Unless otherwise specified, the currency (ISO code) used to complete this form and, if applicable, the exchange rate (and date of exchange rate) if the amounts are converted into the currency of the requested State is: \_\_\_\_\_ (dd/mm/yyyy)

**II. GENERAL INFORMATION ABOUT THE CREDITOR OR THE PERSON(S) FOR WHOM MAINTENANCE IS SOUGHT OR PAYABLE (IF KNOWN)**

**A. Information about the creditor or the person(s) for whom maintenance is sought or payable**

1. The creditor or the person for whom maintenance is sought is: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Caretaker other than parent <input type="checkbox"/> Foster care provider <input type="checkbox"/> Both the child and the above person (marked) are considered as creditors <input type="checkbox"/> The child her/himself is the only creditor <input type="checkbox"/> Public body <input type="checkbox"/> Other person (see the application)	
2. Occupation, trade or profession	
3. Estimated gross monthly earnings (specify currency)	4. Other monthly income (& source) (specify currency)
5. Present marital status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Partner <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	

**B. Information about creditor's dependents**

Family name(s) Given name(s)	Age	Relationship to creditor	Subject of this application?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

**C. Information about current  spouse or  partner of creditor  other member of the household contributing to the expenses of the household**

1. Family name(s), given name(s)	2. Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
3. Estimated gross monthly earnings (specify currency)	4. Other monthly income (& source) (specify currency)
5. The person identified above pays child support / maintenance <input type="checkbox"/> voluntarily or <input type="checkbox"/> judicial / administrative decision in the amount of _____ per _____ (specify currency and instalment period). As of _____ (dd/mm/yyyy) the total amount paid is: _____; and the total amount outstanding is: _____ (specify currency).	

**III. GENERAL INFORMATION ABOUT THE DEBTOR (IF KNOWN)**

**A. Information about the debtor**

1. The debtor is: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Caretaker other than parent <input type="checkbox"/> Foster care <input type="checkbox"/> Spouse <input type="checkbox"/> Partner <input type="checkbox"/> Child <input type="checkbox"/> Other person	
2. Occupation, trade or profession:	
3. Name and address of the employer:	
4. Estimated gross monthly earnings (specify currency)	5. Other monthly income (& source) (specify currency)
6. Present Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Partner <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	

**B. Information about debtor's dependents**

Family name(s) Given name(s)	Age	Relationship to debtor	Subject of this application?
1.			<input type="checkbox"/> Yes <input type="checkbox"/> No
2.			<input type="checkbox"/> Yes <input type="checkbox"/> No
3.			<input type="checkbox"/> Yes <input type="checkbox"/> No
4.			<input type="checkbox"/> Yes <input type="checkbox"/> No
5.			<input type="checkbox"/> Yes <input type="checkbox"/> No

**C. Information about current  spouse or  partner of debtor  other member of the household contributing to the expenses of the household**

1. Family name(s), given name(s)	2. Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
3. Estimated gross monthly earnings (specify currency)	4. Other monthly income (& source) (specify currency)
5. The person identified above pays child support / maintenance <input type="checkbox"/> voluntarily or <input type="checkbox"/> judicial / administrative decision in the amount of _____ per _____ (specify currency and instalment period). As of _____ (dd/mm/yyyy) the total amount paid is: _____ ; and the total amount outstanding is: _____ (specify currency).	

**IV. ASSETS AND DEBTS OF THE DEBTOR (IF KNOWN)**

**Please specify currency used to complete the following tables: \_\_\_\_\_**

**A. Value of debtor's assets**

1. House – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	2. (location and / or registration number)
3. Other real estate – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	4. (location and / or registration number, description)
5. Motor vehicle(s) – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	6. (location and / or registration number, model, year)
7. Caravans/boats – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	8. (location and / or registration number, model, year)
9. Furniture and household effects – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	10. (location and description)
11. Bank account(s)	12. (institution(s) and account number(s))
13. Life insurance and buy back value	14. (insurance company, policy number)
15. Other assets * – Value:	16. (institution(s) and account number(s))

\* Please list specifically each additional item.

**B. Value of debtor's debts**

Credit provider	Amount	Payment rate	Encumbered property
1.			
2.			
3.			
4.			

**V. FINANCIAL STATEMENT OF THE APPLICANT**

Please specify currency used to complete the following tables: \_\_\_\_\_

**A. Applicant's gross income**

1. <input type="checkbox"/> Monthly <input type="checkbox"/> Annual	Applicant	Applicant's current spouse/partner	Child(ren) for whom maintenance is sought or payable	Other persons for whom maintenance is sought or payable
2. Gross salary (incl. payments in kind)				
3. Income from non-salaried occupations				
4. Pensions, disability pensions, alimonies, allowances, annuities				
5. Unemployment benefits				
6. Income from securities/floating capital				
7. Income from real property				
8. Public assistance				
9. Other sources of income *				
10. TOTAL				

**B. Applicant's income deductions**

1. <input type="checkbox"/> Monthly <input type="checkbox"/> Annual	Applicant	Applicant's current spouse/partner	Child(ren) for whom maintenance is sought or payable	Other persons for whom maintenance is sought or payable
2. National/Federal tax				
3. State/Provincial tax				
4. City/Local tax				
5. Insurance premiums				
6. Mandatory pension contributions				
7. Union/professional dues				
8. Other deductions *				
9. TOTAL				

\* Please list specifically each additional item.

**C. Applicant's expenses**

1. <input type="checkbox"/> Monthly <input type="checkbox"/> Annual	Applicant	Applicant's current spouse/partner	Child(ren) for whom maintenance is sought or payable	Other persons for whom maintenance is sought or payable
2. Rent or mortgage				
3. Household costs				
4. Food and house supplies				
5. Clothing				
6. Medical/dental/optical fees				
7. Maintenance paid				
8. Insurance (other than under Part V.B)				
9. Transportation expenses				
10. Child care				
11. Education for children				
12. Extracurricular activities for children				
13. Yearly savings				
14. Debt-repayment				
15. Other expenses *				
16. TOTAL				

**D. Value of applicant's assets<sup>1</sup>**

1. House – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	2. (location and / or registration number)
3. Other real estate – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	4. (location and / or registration number, description)
5. Motor vehicle(s) – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	6. (location and / or registration number, model, year)
7. Caravans/boats – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	8. (location and / or registration number, model, year)
9. Furniture and household effects – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	10. (location and description)
11. Bank account(s)	12. (institution(s) and account number(s))
13. Life insurance and buy back value	14. (insurance company, policy number)
15. Other assets * – Value:	16. (institutions and account numbers)

<sup>1</sup> Do not complete this table if the person identified under III is the applicant as this information would be the same as the one found under Section IV.A.

\* Please list specifically each additional item.

**E. Value of applicant's debts<sup>2</sup>**

Credit provider	Amount	Payment Rate	Encumbered property
1.			
2.			
3.			
4.			

**VI. MEDICAL INSURANCE**

**A. Is debtor required by a maintenance decision to provide medical insurance for the child(ren)?**

Yes  No

**B. Is debtor required by a maintenance decision to provide medical insurance for the creditor?**

Yes  No

**C. Medical coverage for child(ren) for whom maintenance is sought and/or the creditor is provided by:**

**D. Insurance coverage**

Coverage provided by:	For child(ren)	For creditor	
1. Creditor	<input type="checkbox"/>	<input type="checkbox"/>	9. Creditor's Insurance Company: Policy number:
2. Debtor	<input type="checkbox"/>	<input type="checkbox"/>	
3. State Medicare	<input type="checkbox"/>	<input type="checkbox"/>	10. Debtor's Insurance Company: Policy number:
4. Creditor's employer	<input type="checkbox"/>	<input type="checkbox"/>	
5. Debtor's employer	<input type="checkbox"/>	<input type="checkbox"/>	11. Other Insurance Company: Policy number:
6. Other:	<input type="checkbox"/>	<input type="checkbox"/>	
7. Unknown	<input type="checkbox"/>	<input type="checkbox"/>	
8. No coverage	<input type="checkbox"/>	<input type="checkbox"/>	

**This Financial Circumstances Form was completed by the applicant and reviewed by the requesting Central Authority.**

**The information contained in this Financial Circumstances Form corresponds to and is in conformity with the information and documents provided by the applicant to the requesting Central Authority. The Financial Circumstances Form is forwarded by the Central Authority on behalf of and with the consent of the applicant.**

**Name:** \_\_\_\_\_ **(in block letters)**  
**Authorised representative of the Central Authority**

**Date:** \_\_\_\_\_  
**(dd/mm/yyyy)**

<sup>2</sup> Do not complete this table if the person identified under III is the applicant as this information would be the same as the one found under Section IV.B.



## Restricted Information on the Applicant

### Financial Circumstances Form

**N.B. The requesting Central Authority has determined that information under items V.D. 2, 4, 6, 8, 10, 12, 14 and 16 and VI.D. 9 and 11 on this page shall not be disclosed or confirmed for the protection of the health, safety or liberty of a person. Such a determination shall according to Article 40(2) be taken into account by the requested Central Authority.**

**1. Requesting Central Authority file reference number:** \_\_\_\_\_

#### V.D. Value of applicant's assets

1. House – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	2. (location and / or registration No)
3. Other real estate – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	4. (location and / or registration No)
5. Motor vehicle(s) – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	6. (location and / or registration No)
7. Caravans/boats – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	8. (location and / or registration No)
9. Furniture and household effects – Market value: Ownership: <input type="checkbox"/> self <input type="checkbox"/> joint (specify):	10. (location and description)
11. Bank account(s)	12. (institution(s) and account number(s))
13. Life insurance and buy back value	14. (insurance company, policy number)
15. Other assets * – Value:	16. (institution(s) and account number(s))

#### VI.D. Insurance coverage

9. Creditor's Insurance Company: Policy number:	11. Other Insurance Company: Policy number:
--	--

- This Financial Circumstances Form was completed by the applicant and reviewed by the requesting Central Authority**
- The information contained in this Financial Circumstances Form corresponds to and is in conformity with the information and documents provided by the applicant to the requesting Central Authority. The Financial Circumstances Form is forwarded by the Central Authority on behalf of and with the consent of the applicant**

**Name:** \_\_\_\_\_ **(in block letters)**  
**Authorised representative of the Central Authority**

**Date:** \_\_\_\_\_  
**(dd/mm/yyyy)**

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

\* Please list specifically each additional item.

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance***Statement of Enforceability of a Decision**

(Article 25(1) b))

1. **Name of the State of origin of the decision:** \_\_\_\_\_  
**(identify territorial unit if applicable)** \_\_\_\_\_

2. **Competent authority issuing the Statement**

2.1 **Name:** \_\_\_\_\_

2.2 **Address:** \_\_\_\_\_

\_\_\_\_\_

2.3 **Telephone number:** \_\_\_\_\_

2.4 **Fax number:** \_\_\_\_\_

2.5 **E-mail:** \_\_\_\_\_

3. **The decision<sup>1</sup>**

3.1 **Type of authority:**  **judicial authority** or  **administrative authority<sup>2</sup>**

3.2 **Name and place of authority:** \_\_\_\_\_

3.3 **(address if applicable)** \_\_\_\_\_

\_\_\_\_\_

3.4 **Date of the decision:** \_\_\_\_\_ **(dd/mm/yyyy)**

3.5 **Date of effect of the decision:** \_\_\_\_\_ **(dd/mm/yyyy)**

3.6 **Reference number of the decision:** \_\_\_\_\_

3.7 **Names of the parties to the decision:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4.  **The decision is enforceable in the State of origin.**

**Name:** \_\_\_\_\_ **(in block letters)** **Date:** \_\_\_\_\_

**Name of the official from the competent authority of the State of origin** **(dd/mm/yyyy)**

**This Statement of Enforceability of a Decision was completed by the official from the competent authority of the State of origin whose name appears above and is transmitted by the requesting Central Authority.**

**Name:** \_\_\_\_\_ **(in block letters)** **Date:** \_\_\_\_\_

**Authorised representative of the Central Authority** **(dd/mm/yyyy)**

**Requesting Central Authority reference number:** \_\_\_\_\_  
**(For Central Authority use only)**

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 0.17 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

<sup>1</sup> For the definition of decision see Article 19(1).

<sup>2</sup> The Administrative Authority referred to in this Statement meets the requirements of Article 19(3).

Convention on the International Recovery of Child Support and Other Forms of Family Maintenance

Statement of Proper Notice<sup>1</sup>

(Article 25(1) c)

1. Name of the State of origin of the decision: \_\_\_\_\_  
(identify territorial unit if applicable) \_\_\_\_\_

2. Competent authority issuing the Statement

2.1 Name: \_\_\_\_\_

2.2 Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2.3 Telephone number: \_\_\_\_\_

2.4 Fax number: \_\_\_\_\_

2.5 E-mail: \_\_\_\_\_

3. The decision<sup>2</sup>

3.1 Type of authority:  judicial authority or  administrative authority<sup>3</sup>

3.2 Name and place of authority: \_\_\_\_\_

3.3 (address if applicable) \_\_\_\_\_  
\_\_\_\_\_

3.4 Date of the decision: \_\_\_\_\_ (dd/mm/yyyy)

3.5 Date of effect of the decision: \_\_\_\_\_ (dd/mm/yyyy)

3.6 Reference number of the decision: \_\_\_\_\_

3.7 Names of the parties to the decision: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Name of the respondent: \_\_\_\_\_

<sup>1</sup> A Statement of Proper Notice should be provided if the Respondent did not appear and was not represented in the proceedings in the State of origin.

<sup>2</sup> For the definition of decision see Article 19(1).

<sup>3</sup> The Administrative Authority referred to in this Statement meets the requirements of Article 19(3).

**5. Proper notice to the respondent**

- The respondent had proper notice of the proceedings and an opportunity to be heard ( Certificate of Service attached if applicable\*)
- The respondent had proper notice of the decision and an opportunity to challenge or appeal it on fact and law ( Certificate of Service attached if applicable\*)

Name: \_\_\_\_\_ (in block letters)      Date: \_\_\_\_\_  
Name of the official from the competent authority of the State of origin      (dd/mm/yyyy)

- This Statement of Proper Notice was completed by the official from the competent authority of the State of origin whose name appears above and is transmitted by the requesting Central Authority.

Name: \_\_\_\_\_ (in block letters)      Date: \_\_\_\_\_  
Authorised representative of the Central Authority      (dd/mm/yyyy)

Requesting Central Authority reference number: \_\_\_\_\_  
(For Central Authority use only)

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 0.5 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

\* For example, a certificate issued under domestic law or, where appropriate, a certificate issued under an international instrument. Reference Page 164

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

## Status of Application Report – Article 12<sup>1</sup>

(Application for Establishment of a Decision ( Article 10(1) c)  Article 10(1) d)))

**CONFIDENTIALITY AND PERSONAL DATA PROTECTION NOTICE**

*Personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted. Any authority processing such information shall ensure its confidentiality, in accordance with the law of its State.*

*An authority shall not disclose or confirm information gathered or transmitted in application of this Convention if it determines that to do so could jeopardise the health, safety or liberty of a person in accordance with Article 40.*

*A determination of non-disclosure has been made by a Central Authority in accordance with Article 40.*

<p><b>1. Requested Central Authority</b></p>  <p><b>a. Address</b></p>  <p><b>b. Telephone number</b></p>  <p><b>c. Fax number</b></p>  <p><b>d. E-mail</b></p>  <p><b>e. Reference number</b></p>	<p><b>2. Contact person in Requested State</b></p>  <p><b>a. Address (if different)</b></p>  <p><b>b. Telephone number (if different)</b></p>  <p><b>c. Fax number (if different)</b></p>  <p><b>d. E-mail (if different)</b></p>  <p><b>e. Language(s)</b></p>
<p><input type="checkbox"/> First Report / <input type="checkbox"/> Subsequent Report – Date of last Report: _____ (dd/mm/yyyy)</p>	

**3. File identification**

**a. Requesting Central Authority file reference number:** \_\_\_\_\_

**b. Family name(s) of applicant:** \_\_\_\_\_

**c. Family name(s) of the person(s) for whom maintenance is sought or payable:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**d. Family name(s) of debtor:** \_\_\_\_\_

\_\_\_\_\_

---

<sup>1</sup> The Status of Application Report can be used for the purpose of Article 12(3), (4) and (5). If the Report is being used to provide updates, only include additional information that was not included in the previous reports.

**4. Status of the application**

**4.1 Status of the application for Establishment of a decision for maintenance in the requested State**

- a.  On \_\_\_\_\_ (dd/mm/yyyy) the application was sent to the competent authority responsible for establishment (name) \_\_\_\_\_ (address) \_\_\_\_\_ (reference number) \_\_\_\_\_
- b.  On or by \_\_\_\_\_ (dd/mm/yyyy) the competent authority is due to issue a decision for maintenance
- c.  On \_\_\_\_\_ (dd/mm/yyyy) the competent authority issued a decision for maintenance ( decision attached for information purposes only;  service or notice of the decision has been effected on the applicant ( certificate of service\* attached if applicable);  service or notice of the decision will be effected on the applicant)
- d.  On \_\_\_\_\_ (dd/mm/yyyy) the competent authority has decided against establishing a decision for maintenance ( decision attached for information purposes only;  service or notice of the decision has been effected on the applicant ( certificate of service\* attached if applicable);  service or notice of the decision will be effected on the applicant)
- e.  On \_\_\_\_\_ (dd/mm/yyyy) the debtor has lodged a challenge or an appeal against the maintenance decision
- f.  On \_\_\_\_\_ (dd/mm/yyyy) the maintenance decision is final
- g.  On \_\_\_\_\_ (dd/mm/yyyy) the maintenance decision is enforceable
- h.  Application is still pending before the Central Authority

**4.2 Status of establishment of parentage**

- a.  Establishment of parentage not necessary
- b.  On \_\_\_\_\_ (dd/mm/yyyy) the debtor contested parentage
- c.  On \_\_\_\_\_ (dd/mm/yyyy) the request for establishment of parentage was sent to the competent authority responsible (name) \_\_\_\_\_ (address) \_\_\_\_\_ (reference number) \_\_\_\_\_
- d.  Genetic testing for the purpose of establishing parentage has been scheduled on \_\_\_\_\_ (dd/mm/yyyy)
- e.  Genetic testing for the purpose of establishing parentage was scheduled on \_\_\_\_\_ (dd/mm/yyyy) but the debtor failed to appear
- f.  Genetic testing for the purpose of establishing parentage has been performed on \_\_\_\_\_ (dd/mm/yyyy). Results are attached
- g.  Please provide assistance with genetic testing. See attached information
- h.  On or by \_\_\_\_\_ (dd/mm/yyyy) the competent authority is due to determine parentage

---

\* For example, a certificate issued under domestic law or, where appropriate, a certificate issued under an international instrument.

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

- i.  On \_\_\_\_\_ (dd/mm/yyyy) the competent authority determined parentage:  positive /  negative ( decision attached for information purposes only;  service or notice of the decision has been effected on the applicant ( certificate of service\* attached if applicable);  service or notice of the decision will be effected on the applicant)
  - j.  On \_\_\_\_\_ (dd/mm/yyyy) the competent authority decided to reject the request to establish parentage ( decision attached for information purposes only;  service or notice of the decision has been effected on the applicant ( certificate of service\* attached if applicable);  service or notice of the decision will be effected on the applicant)
  - k.  On \_\_\_\_\_ (dd/mm/yyyy) the debtor lodged a challenge or an appeal against the decision establishing parentage
  - l.  Application is still pending before the Central Authority
5.  The following steps have been taken (past):
- a.  Debtor located
  - b.  Debtor contacted for settlement
  - c.  Voluntary payment secured (no enforcement measures were necessary) ( documentation attached to this Report if applicable)
  - d.  Information concerning the financial circumstances of the debtor gathered
  - e.  Assets of the debtor located
  - f.  Enforcement and other measures initiated
    - Provisional measures
    - Wage withholding
    - Garnishment from bank account or other sources
    - Deductions from social security payments
    - Lien on or forced sale of property
    - Tax refund withholding
    - Withholding or attachment of pension benefits
    - Credit bureau reporting
    - Denial, suspension or revocation of licenses or passport
    - Mediation, conciliation or similar processes
    - Seizure of lottery or gambling winnings
    - Prohibition from leaving the requested State
    - Incarceration
    - Other: \_\_\_\_\_
  - g.  Payments were secured (enforcement measures were necessary)
  - h.  Record of payments made by the debtor as of \_\_\_\_\_ (dd/mm/yyyy) attached
  - i.  Other: \_\_\_\_\_
6.  The following steps are being taken (present):
- a.  Locating the debtor
  - b.  Contacting the debtor for settlement
  - c.  Securing voluntary payment (no enforcement measures are necessary)
  - d.  Gathering of information concerning the financial circumstances of the debtor
  - e.  Locating the assets of the debtor
  - f.  Initiating enforcement measures
  - g.  Securing payments (enforcement measures are necessary)
  - h.  Other: \_\_\_\_\_

\* For example, a certificate issued under domestic law or, where appropriate, a certificate issued under an international instrument.

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

7.  The following steps will be taken (future):
- a.  Debtor to be located
  - b.  Debtor to be contacted for settlement
  - c.  Voluntary payment to be sought (no enforcement measures will be necessary)
  - d.  Information to be gathered concerning the financial circumstances of the debtor
  - e.  Assets of the debtor to be located
  - f.  Enforcement measures to be initiated
  - g.  Payments to be sought (enforcement measures will be necessary)
  - h.  Other: \_\_\_\_\_
8.  Please provide the following additional information and / or documentation:
- \_\_\_\_\_
- \_\_\_\_\_
9.  The requested Central Authority has refused to process the application for the following reason(s):
- a.  Requesting Central Authority did not produce the additional documents or information within the period provided under Article 12(9)
  - b.  Requirements of the Convention manifestly not fulfilled ( reasons attached)
10.  The competent authority has refused to establish a maintenance decision for the following reason(s):
- a.  Other requirements of the Convention not fulfilled
  - b.  Debtor not located in the requested State
  - c.  Other: \_\_\_\_\_

Name: \_\_\_\_\_ (in block letters)  
Authorised representative of the Central Authority

Date: \_\_\_\_\_  
(dd/mm/yyyy)

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 0.33 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.



*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

## Status of Application Report – Article 12<sup>1</sup>

(Application for Recognition or Recognition and Enforcement  
 Article 10(1) a)  Article 10(2) a)  Article 30))

**CONFIDENTIALITY AND PERSONAL DATA PROTECTION NOTICE**

*Personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted. Any authority processing such information shall ensure its confidentiality, in accordance with the law of its State.*

*An authority shall not disclose or confirm information gathered or transmitted in application of this Convention if it determines that to do so could jeopardise the health, safety or liberty of a person in accordance with Article 40.*

*A determination of non-disclosure has been made by a Central Authority in accordance with Article 40.*

<p><b>1. Requested Central Authority</b></p> <p><b>a. Address</b></p> <p><b>b. Telephone number</b></p> <p><b>c. Fax number</b></p> <p><b>d. E-mail</b></p> <p><b>e. Reference number</b></p>	<p><b>2. Contact person in requested State</b></p> <p><b>a. Address (if different)</b></p> <p><b>b. Telephone number (if different)</b></p> <p><b>c. Fax number (if different)</b></p> <p><b>d. E-mail (if different)</b></p> <p><b>e. Language(s)</b></p>
<p><input type="checkbox"/> First Report / <input type="checkbox"/> Subsequent Report – Date of last Report: _____ (dd/mm/yyyy)</p>	

**3. File identification**

**a. Requesting Central Authority file reference number:** \_\_\_\_\_

**b. Family name(s) of applicant:** \_\_\_\_\_

or

**b. Name of public body:** \_\_\_\_\_

and

**c. Family name(s) of the person(s) for whom maintenance is sought or payable:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**d. Family name(s) of debtor:** \_\_\_\_\_

\_\_\_\_\_

<sup>1</sup> The Status of Application Report can be used for the purpose of Article 12(3), (4) and (5). If the Report is being used to provide updates, only include additional information that was not included in the previous reports.

4. Status of the application in the requested State
- a.  On \_\_\_\_\_ (dd/mm/yyyy) the competent authority declared the decision enforceable or registered the decision for enforcement ( declaration or registration attached for information purposes only;  applicant has been notified of the declaration or registration;  applicant will be notified of the declaration or registration)
  - b.  On or by \_\_\_\_\_ (dd/mm/yyyy) the competent authority is due to declare whether the decision is enforceable or is to be registered for enforcement
  - c.  On \_\_\_\_\_ (dd/mm/yyyy) the respondent lodged a challenge or an appeal against the declaration or registration
  - d.  On \_\_\_\_\_ (dd/mm/yyyy) the competent authority issued a decision refusing recognition and enforcement ( decision attached for information purposes only;  applicant has been notified of the decision;  applicant will be notified of the decision)
  - e.  On \_\_\_\_\_ (dd/mm/yyyy) the competent authority refused recognition and enforcement as a result of a reservation under Article 20(2). On \_\_\_\_\_ (dd/mm/yyyy) a decision was established for the benefit of the creditor in accordance with Article 20(4).
  - f.  On \_\_\_\_\_ (dd/mm/yyyy) the respondent lodged a further appeal.
  - g.  On \_\_\_\_\_ (dd/mm/yyyy) the application / decision was sent to the enforcement authority
  - h.  Application is still pending before the Central Authority
  - i.  Application / decision sent to enforcement authority and enforcement is impossible in the foreseeable future because:
    - Debtor without necessary resources
    - Debtor incarcerated
    - Other: \_\_\_\_\_
5.  The following steps have been taken (past):
- a.  Debtor /  creditor located
  - b.  Voluntary payment secured (no enforcement measures were necessary)
  - c.  Information concerning the financial circumstances of the debtor gathered
  - d.  Assets of the debtor located
  - e.  Enforcement and other measures initiated
    - Provisional measures
    - Wage withholding
    - Garnishment from bank account or other sources
    - Deductions from social security payments
    - Lien on or forced sale of property
    - Tax refund withholding
    - Withholding or attachment of pension benefits
    - Credit bureau reporting
    - Denial, suspension or revocation of licenses or passport
    - Mediation, conciliation or similar processes
    - Seizure of lottery or gambling winnings
    - Prohibition from leaving the requested State
    - Incarceration
    - Other: \_\_\_\_\_
  - f.  Payments were secured (enforcement measures were necessary)

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

- g.  Record of payments made by the debtor as of \_\_\_\_\_  
(dd/mm/yyyy) attached
- h.  Other: \_\_\_\_\_
6.  The following steps are being taken (present):
- a.  Locating the  debtor /  creditor
  - b.  Securing voluntary payment (no enforcement measures are necessary)
  - c.  Gathering of information concerning the financial circumstances of the debtor
  - d.  Locating the assets of the debtor
  - e.  Initiating enforcement measures
  - f.  Securing payments (enforcement measures are necessary)
  - g.  Other: \_\_\_\_\_
7.  The following steps will be taken (future):
- a.   Debtor /  creditor to be located
  - b.  Voluntary payment to be sought (no enforcement measures will be necessary)
  - c.  Information to be gathered concerning the financial circumstances of the debtor
  - d.  Assets of the debtor to be located
  - e.  Enforcement measures to be initiated
  - f.  Payments to be sought (enforcement measures will be necessary)
  - g.  Other: \_\_\_\_\_
8.  Please provide the following additional information and / or documentation:
- \_\_\_\_\_
- \_\_\_\_\_
9.  The application has been examined by the competent authority and is being returned because a declaration or registration has been refused on the ground that recognition and enforcement of the decision is manifestly incompatible with the public policy ("*ordre public*") of the State addressed.<sup>2</sup>
10.  A challenge or an appeal has been lodged on the following grounds:
- a.  There are no bases for recognition and enforcement under Article 20
  - b.  Recognition or enforcement of the decision is manifestly incompatible with the public policy ("*ordre public*") of the State addressed
  - c.  The decision was obtained by fraud in connection with a matter of procedure
  - d.  Proceedings between the same parties and having the same purpose are pending before an authority of the State addressed and those proceedings were the first to be instituted
  - e.  The decision is incompatible with a decision rendered between the same parties and having the same purpose, either in the State addressed or in another State, and this latter decision fulfils the conditions necessary for recognition and enforcement in the State addressed
  - f.  In a case where the respondent has neither appeared nor was represented in proceedings in the State of origin, the respondent had neither proper notice of the proceedings and an opportunity to be heard, nor proper notice of the decision and the opportunity to challenge or appeal it on fact and law

<sup>2</sup> This Section is limited to the *ex officio* review as provided under Article 23. Additional reasons should be added to this list for the purpose of the *ex officio* review under Article 24.

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

- g.  The decision was made in violation of Article 18
  - h.  The authenticity or integrity of any document transmitted in accordance with Article 25(1) *a*, *b* or *d* or (3) *b*
  - i.  The debt for past due payments has been fulfilled.
11.  The requested Central Authority has refused to process the application for the following reason(s):
- a.  Requesting Central Authority did not produce the additional documents or information within the period provided under Article 12(9)
  - b.  Requirements of the Convention manifestly not fulfilled ( reasons attached)

Name: \_\_\_\_\_ (in block letters)  
Authorised representative of the Central Authority

Date: \_\_\_\_\_  
(dd/mm/yyyy)

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

## Status of Application Report – Article 12<sup>1</sup>

(Application for Enforcement – Article 10(1) b))

### CONFIDENTIALITY AND PERSONAL DATA PROTECTION NOTICE

*Personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted. Any authority processing such information shall ensure its confidentiality, in accordance with the law of its State.*

*An authority shall not disclose or confirm information gathered or transmitted in application of this Convention if it determines that to do so could jeopardise the health, safety or liberty of a person in accordance with Article 40.*

*A determination of non-disclosure has been made by a Central Authority in accordance with Article 40.*

<b>1. Requested Central Authority</b>  a. Address  b. Telephone number  c. Fax number  d. E-mail  e. Reference number	<b>2. Contact person in requested State</b>  a. Address (if different)  b. Telephone number (if different)  c. Fax number (if different)  d. E-mail (if different)  e. Language(s)
<input type="checkbox"/> First Report / <input type="checkbox"/> Subsequent Report – Date of last Report: _____ (dd/mm/yyyy)	

**3. File identification**

a. Requesting Central Authority file reference number: \_\_\_\_\_

b. Family name(s) of applicant: \_\_\_\_\_

c. Family name(s) of the person(s) for whom maintenance is sought or payable: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

d. Family name(s) of debtor: \_\_\_\_\_

**4. Status of the application in the requested State**

a.  On \_\_\_\_\_ (dd/mm/yyyy) the application was sent to the competent authority responsible for enforcement (name) \_\_\_\_\_ (address) \_\_\_\_\_ (reference number) \_\_\_\_\_

<sup>1</sup> The Status of Application Report can be used for the purpose of Article 12(3), (4) and (5). If the Report is being used to provide updates, only include additional information that was not included in the previous reports.

- b.  On \_\_\_\_\_ (dd/mm/yyyy) the competent authority issued a decision allowing enforcement ( decision attached for information purposes only;  service or notice of the decision has been effected on the applicant ( certificate of service\* attached if applicable);  service or notice of the decision will be effected on the applicant)
- c.  On \_\_\_\_\_ (dd/mm/yyyy) the debtor lodged a challenge or an appeal against enforcement
- d.  On \_\_\_\_\_ (dd/mm/yyyy) the competent authority issued a decision refusing enforcement ( decision attached for information purposes only;  service or notice of the decision has been effected on the applicant ( certificate of service\* attached if applicable);  service or notice of the decision will be effected on the applicant)
- e.  Application is still pending before the Central Authority
- f.  Application sent to enforcement authority and enforcement is impossible in the foreseeable future because:
- Debtor without necessary resources
  - Debtor incarcerated
  - Other: \_\_\_\_\_
5.  The following steps have been taken (past):
- a.  Debtor located
  - b.  Voluntary payment secured (no enforcement measures were necessary)
  - c.  Information concerning the financial circumstances of the debtor gathered
  - d.  Assets of the debtor located
  - e.  Enforcement and other measures initiated
    - Provisional measures
    - Wage withholding
    - Garnishment from bank account or other sources
    - Deductions from social security payments
    - Lien on or forced sale of property
    - Tax refund withholding
    - Withholding or attachment of pension benefits
    - Credit bureau reporting
    - Denial, suspension or revocation of licenses or passport
    - Mediation, conciliation or similar processes
    - Seizure of lottery or gambling winnings
    - Prohibition from leaving the requested State
    - Incarceration
    - Other: \_\_\_\_\_
  - f.  Payments were secured (enforcement measures were necessary)
  - g.  Record of payments made by the debtor as of \_\_\_\_\_ (dd/mm/yyyy) attached
  - h.  Other: \_\_\_\_\_
6.  The following steps are being taken (present):
- a.  Locating the debtor
  - b.  Securing voluntary payment (no enforcement measures are necessary)
  - c.  Gathering of information concerning the financial circumstances of the debtor

---

\* For example, a certificate issued under domestic law or, where appropriate, a certificate issued under an international instrument.

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

- d.  Locating the assets of the debtor
  - e.  Initiating enforcement measures
  - f.  Securing payments (measures of enforcement are necessary)
  - g.  Other: \_\_\_\_\_
7.  The following steps will be taken (future):
- a.  Debtor to be located
  - b.  Voluntary payment to be sought (no enforcement measures will be necessary)
  - c.  Information to be gathered concerning the financial circumstances of the debtor
  - d.  Assets of the debtor to be located
  - e.  Enforcement measures to be initiated
  - f.  Payments to be sought (enforcement measures will be necessary)
  - g.  Other: \_\_\_\_\_
8.  Please provide the following additional information and / or documentation:
- \_\_\_\_\_
- \_\_\_\_\_
9.  The requested Central Authority has refused to process the application for the following reason(s):
- a.  Requesting Central Authority did not produce the additional documents or information within the period provided under Article 12(9)
  - b.  Requirements of the Convention manifestly not fulfilled ( reasons attached)
10.  The competent authority has refused to enforce the decision for the following reason(s):
- a.  Requirements of the Convention not fulfilled
  - b.  Debtor not located in the requested State
  - c.  Decision has not been recognised in the requested State
  - d.  Decision is no longer in force
  - e.  Decision is incompatible with a later decision
  - f.  Decision has been modified
  - g.  Other: \_\_\_\_\_

Name: \_\_\_\_\_ (in block letters)  
Authorised representative of the Central Authority

Date: \_\_\_\_\_  
(dd/mm/yyyy)

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance*

## Application for Recognition or Recognition and Enforcement

( Article 10(1) a)  Article 10(2) a)  Article 30)

### CONFIDENTIALITY AND PERSONAL DATA PROTECTION NOTICE

*Personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted. Any authority processing such information shall ensure its confidentiality, in accordance with the law of its State.*

*An authority shall not disclose or confirm information gathered or transmitted in application of this Convention if it determines that to do so could jeopardise the health, safety or liberty of a person in accordance with Article 40.*

*A determination of non-disclosure has been made by a Central Authority in accordance with Article 40. If this box is ticked, information under sections 2 d, e, f and g and 5 should only be provided in the Restricted Information on the Applicant page of this form.*

1. Requesting Central Authority file reference number: \_\_\_\_\_

2. Particulars of the applicant

The applicant is:

- The person for whom maintenance is sought or payable  
 The representative of the person for whom maintenance is sought or payable  
 The debtor  
 The representative of the debtor

a. Family name(s): \_\_\_\_\_

b. Given name(s): \_\_\_\_\_

c. Date of birth:<sup>1</sup> \_\_\_\_\_ (dd/mm/yyyy)

or

a. Name of the public body: \_\_\_\_\_

b. Family name(s) of the contact person: \_\_\_\_\_

c. Given name(s) of the contact person: \_\_\_\_\_

and

d. Address: \_\_\_\_\_  
 \_\_\_\_\_

e. Telephone numbers: \_\_\_\_\_  
 \_\_\_\_\_

f. Fax number: \_\_\_\_\_

g. E-mail: \_\_\_\_\_

<sup>1</sup> It is not necessary to provide a date of birth in the case of a representative.



**3. Particulars of the person(s) for whom maintenance is sought or payable**

**3.1  Maintenance is sought or payable for the applicant named above**

**Maintenance basis:**

- parentage  *in loco parentis* or equivalent relationship  
 marriage  analogous relationship to marriage  
 affinity (please identify): \_\_\_\_\_  
 grandparent  sibling  grandchild  
 other: \_\_\_\_\_

**3.2  Maintenance is sought or payable for the following child(ren)**

**a. Family name(s):** \_\_\_\_\_

**Given name(s):** \_\_\_\_\_

**Date of birth** \_\_\_\_\_ (dd/mm/yyyy)

**Maintenance basis:**

- parentage  *in loco parentis* or equivalent relationship

**b. Family name(s):** \_\_\_\_\_

**Given name(s):** \_\_\_\_\_

**Date of birth** \_\_\_\_\_ (dd/mm/yyyy)

**Maintenance basis:**

- parentage  *in loco parentis* or equivalent relationship

**c. Family name(s):** \_\_\_\_\_

**Given name(s):** \_\_\_\_\_

**Date of birth** \_\_\_\_\_ (dd/mm/yyyy)

**Maintenance basis:**

- parentage  *in loco parentis* or equivalent relationship

**3.3  Maintenance is sought or payable for the following person**

**Family name(s):** \_\_\_\_\_

**Given name(s):** \_\_\_\_\_

**Date of birth** \_\_\_\_\_ (dd/mm/yyyy)

**Maintenance basis:**

- marriage  analogous relationship to marriage  
 affinity (please identify): \_\_\_\_\_  
 grandparent  sibling  grandchild  
 other: \_\_\_\_\_

**3.4  Maintenance is sought or payable for additional children or persons, additional particulars are attached**

**4.1 Particulars (if known) of the debtor**

- The person is the same as the applicant named above
- a. Family name(s): \_\_\_\_\_
- b. Given name(s): \_\_\_\_\_
- c. Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- d. Residential address: \_\_\_\_\_  
\_\_\_\_\_
- e. Postal address: \_\_\_\_\_  
\_\_\_\_\_

**4.2 If the debtor is the applicant, particulars (if known and applicable) of the representative of the person(s) for whom maintenance is sought or payable**

- a. Family name(s): \_\_\_\_\_
- b. Given name(s): \_\_\_\_\_
- c. Address: \_\_\_\_\_  
\_\_\_\_\_
- d. Telephone numbers: \_\_\_\_\_  
\_\_\_\_\_
- e. Fax number: \_\_\_\_\_
- f. E-mail: \_\_\_\_\_

**4.3 Information that may assist with the location of the respondent**

- a. Personal identification number: \_\_\_\_\_  
(include name of country or territorial unit that issued the number)
- b. Any other information that may assist with the location of the respondent  
\_\_\_\_\_

**5. Payments**

**a. Details for electronic transfer of payments (if applicable)**

- Name of the bank: \_\_\_\_\_
- NBIC:<sup>2</sup> \_\_\_\_\_
- SWIFT-address: \_\_\_\_\_
- IBAN:<sup>3</sup> \_\_\_\_\_
- Account number: \_\_\_\_\_
- Name of account holder: \_\_\_\_\_
- Reference:<sup>4</sup> \_\_\_\_\_

<sup>2</sup> National Bank Identification Code.

<sup>3</sup> International Bank Account Number.

<sup>4</sup> Where needed to effect payment.

**b. Details for payments by cheques (if applicable)**

**Cheque payable to:** \_\_\_\_\_

**Cheque to be sent to:** \_\_\_\_\_

**(address)** \_\_\_\_\_

**Reference:**<sup>5</sup> \_\_\_\_\_

6.  **This is an application for recognition only; do not initiate enforcement measures**

**7. Bases for recognition and enforcement (Article 20) (please tick all relevant boxes)**

**Date of decision:** \_\_\_\_\_ **(dd/mm/yyyy)** **State of origin:** \_\_\_\_\_

**The respondent was habitually resident in the State of origin at the time proceedings were instituted;**

**The respondent has submitted to the jurisdiction either expressly or by defending on the merits of the case without objecting to the jurisdiction at the first available opportunity;**

**The creditor was habitually resident in the State of origin at the time proceedings were instituted;**

**The child for whom the maintenance was ordered was habitually resident in the State of origin at the time proceedings were instituted, provided that the respondent has lived with the child in that State or has resided in that State and provided support for the child there;**

**There has been agreement to the jurisdiction by the parties in writing or evidenced by writing (except in disputes relating to maintenance obligations in respect of children);**

**The maintenance decision was made by an authority exercising jurisdiction on a matter of personal status or parental responsibility and that jurisdiction was not based solely on the nationality of one of the parties; or**

**In a case where the State addressed has made a reservation in accordance with Article 20(2), there are factual circumstances in which the law of that State in similar circumstances would confer or would have conferred jurisdiction on its authorities to make such a decision. Please specify:**

\_\_\_\_\_  
\_\_\_\_\_

**8. Appearance of the respondent**

**The respondent appeared or was represented in the proceedings in the State of origin**

**The respondent did not appear and was not represented in the proceedings in the State of origin (see attached Statement of Proper Notice (Art. 25(1) c))**

9.  **Financial Circumstances Form attached (Art. 11(2) a) and b))**

<sup>5</sup> Where needed to effect payment.

10.  Where the application is for the recovery of maintenance other than maintenance obligations arising from a parent-child relationship towards a person under the age of 21 years, the applicant (creditor) has benefited from legal assistance in the State of origin (Articles 17 and 25(1) f))
- Where the application is for the recovery of maintenance including maintenance obligations arising from a parent-child relationship towards a person under the age of 21 years, the applicant (debtor) has benefited from legal assistance in the State of origin (Articles 17 and 25(1) f))

\* See Transmittal Form for the list of documents in support of the application.

11. Other information: \_\_\_\_\_  
\_\_\_\_\_

12. Attestations

- This application was completed by the applicant and reviewed by the requesting Central Authority.
- This application complies with the requirement of the Convention (Article 12(2)). The information contained in this application and the attached documents correspond to and are in conformity with the information and documents provided by the applicant to the requesting Central Authority. The application is forwarded by the Central Authority on behalf of and with the consent of the applicant.

Name: \_\_\_\_\_ (in block letters)  
Authorised representative of the Central Authority

Date: \_\_\_\_\_  
(dd/mm/yyyy)

## Restricted Information on the Applicant

### Application for Recognition or Recognition and Enforcement

Article 10(1) a)  Article 10(2) a)  Article 30)

**N.B.** The requesting Central Authority has determined that information under sections 2 d, e, f and g and 5 on this page shall not be disclosed or confirmed for the protection of the health, safety or liberty of a person. Such a determination shall according to Article 40(2) be taken into account by the requested Central Authority.

1. Requesting Central Authority file reference number: \_\_\_\_\_

2. Particulars of the applicant

- a. Family name(s): \_\_\_\_\_
- b. Given name(s): \_\_\_\_\_
- c. Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- d. Address: \_\_\_\_\_  
\_\_\_\_\_
- e. Telephone numbers: \_\_\_\_\_  
\_\_\_\_\_
- f. Fax number: \_\_\_\_\_
- g. E-mail: \_\_\_\_\_

5. Payments

- a. Details for electronic transfer of payments (if applicable)
  - Name of the bank: \_\_\_\_\_
  - NBIC: \_\_\_\_\_
  - SWIFT-address: \_\_\_\_\_
  - IBAN: \_\_\_\_\_
  - Account number: \_\_\_\_\_
  - Name of account holder: \_\_\_\_\_
  - Reference: \_\_\_\_\_
- b. Details for payments by cheques (if applicable)
  - Cheque payable to: \_\_\_\_\_
  - Cheque to be sent to: \_\_\_\_\_
  - (address) \_\_\_\_\_  
\_\_\_\_\_
  - Reference: \_\_\_\_\_

- This application was completed by the applicant and reviewed by the requesting Central Authority.
- This application complies with the requirement of the Convention (Article 12(2)). The information contained in this application and the attached documents correspond to and are in conformity with the information and documents provided by the applicant to the requesting Central Authority. The application is forwarded by the Central Authority on behalf of and with the consent of the applicant.

Name: \_\_\_\_\_ (in block letters) Date: \_\_\_\_\_  
Authorised representative of the Central Authority (dd/mm/yyyy)

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)  
Public reporting burden for this collection of information is estimated to average 0.5 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.  
An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

*Convention on the International Recovery of Child Support and Other Forms of Family Maintenance***Abstract of a Decision**

(Article 25(3) b))

1. **Name of the State of origin of the decision:** \_\_\_\_\_  
**(identify territorial unit if applicable)** \_\_\_\_\_
2. **Competent authority issuing the Abstract**
- 2.1 **Name:** \_\_\_\_\_
- 2.2 **Address:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- 2.3 **Telephone number:** \_\_\_\_\_
- 2.4 **Fax number:** \_\_\_\_\_
- 2.5 **E-mail:** \_\_\_\_\_
3. **The decision<sup>1</sup>**
- 3.1 **Type of authority:**  **judicial authority** or  **administrative authority<sup>2</sup>**
- 3.2 **Name and place of authority:** \_\_\_\_\_
- 3.3 **(address if applicable)** \_\_\_\_\_  
 \_\_\_\_\_
- 3.4 **Date of the decision:** \_\_\_\_\_ **(dd/mm/yyyy)**
- 3.5 **Date of effect of the decision:** \_\_\_\_\_ **(dd/mm/yyyy)**
- 3.6 **Reference number of the decision:** \_\_\_\_\_
- 3.7 **Names of the parties to the decision:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- 3.8 **Decision results from:**  **Divorce or legal separation proceedings**  
 **Parentage establishment proceedings**  
 **Maintenance proceedings**  
 **Parental responsibility proceedings**  
 **Other:** \_\_\_\_\_
4. **Name of the debtor:** \_\_\_\_\_

<sup>1</sup> For the definition of decision see Article 19(1).<sup>2</sup> The Administrative Authority referred to in this Statement meets the requirements of Article 19(3).

5. Terms of decision

5.1 Maintenance payable for one person or a group of persons (specify currency<sup>3</sup> for each amount)

Name(s) and date(s) of birth of the person(s) entitled to support / maintenance, arrears and other payments

- a. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- b. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)
- c. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)

5.1.1 Terms of payment of support / maintenance

- <sup>4</sup> Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay support / maintenance in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     other (specify): \_\_\_\_\_  
This payment includes     arrears     retroactive maintenance  
 interest     health insurance     school fees     other payments, arrangements or conditions (specify\*): \_\_\_\_\_

5.1.2 Terms of payment of arrears

- As of \_\_\_\_\_ (dd/mm/yyyy) the total amount of arrears is in the amount of \_\_\_\_\_. Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay arrears in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     single payment     other (specify): \_\_\_\_\_

5.1.3 Terms of payment of retroactive maintenance

- As of \_\_\_\_\_ (dd/mm/yyyy) the total amount of retroactive maintenance is in the amount of \_\_\_\_\_. Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay retroactive maintenance in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     single payment     other (specify): \_\_\_\_\_

<sup>3</sup> Currency should be specified using the ISO code.

<sup>4</sup> Where different payments are provided for different periods please replicate this information for such periods with the understanding that at the new beginning date the former amount is replaced by the new one.

\* Include extract of the decision if necessary.

**5.1.4 Other payments as provided in the decision**

- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay interest in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay health insurance in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay school fees in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall make other payments, arrangements or conditions (specify\*): \_\_\_\_\_  
\_\_\_\_\_ to be paid in the amount of \_\_\_\_\_ every:  
 week       two weeks     month       3 months     6 months  
 year       other (specify): \_\_\_\_\_

**5.1.5 Lump sum**

The debtor shall pay the lump sum amount of \_\_\_\_\_ on

- Due date \_\_\_\_\_ (dd/mm/yyyy)
- Another frequency (specify): \_\_\_\_\_



5.2 Maintenance payments for more than one person on an individual basis (specify currency<sup>5</sup> for each amount)

a. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)

- <sup>6</sup> Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay support / maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_  
This payment includes       arrears       retroactive maintenance  
 interest       health insurance       school fees       other payments, arrangements or conditions (specify\*): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay arrears in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       single payment       other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay retroactive maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       single payment       other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay interest in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay health insurance in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay school fees in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall make other payments, arrangements or conditions (specify\*): \_\_\_\_\_  
\_\_\_\_\_ to be paid in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_

**Lump sum**

The debtor shall pay the lump sum amount of \_\_\_\_\_ on  
 Due date \_\_\_\_\_ (dd/mm/yyyy)  
 Another frequency (specify): \_\_\_\_\_

<sup>5</sup> Currency should be specified using the ISO code.

<sup>6</sup> Where different payments are provided for different periods please replicate this information for such periods with the understanding that at the new beginning date the former amount is replaced by the new one.

\* Include extract of the decision if necessary.

b. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)

<sup>7</sup> Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay support / maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_  
This payment includes       arrears       retroactive maintenance  
 interest       health insurance       school fees       other payments, arrangements or conditions (specify\*): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay arrears in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       single payment       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay retroactive maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       single payment       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay interest in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay health insurance in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay school fees in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall make other payments, arrangements or conditions (specify\*): \_\_\_\_\_  
\_\_\_\_\_ to be paid in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other: \_\_\_\_\_

**Lump sum**

The debtor shall pay the lump sum amount of \_\_\_\_\_ on

Due date \_\_\_\_\_ (dd/mm/yyyy)

Another frequency (specify): \_\_\_\_\_

<sup>7</sup> Where different payments are provided for different periods please replicate this information for such periods with the understanding that at the new beginning date the former amount is replaced by the new one.

\* Include extract of the decision if necessary.

c. Family name(s): \_\_\_\_\_  
Given name(s): \_\_\_\_\_  
Date of birth: \_\_\_\_\_ (dd/mm/yyyy)

<sup>8</sup> Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay support / maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_  
This payment includes       arrears       retroactive maintenance  
 interest       health insurance       school fees       other payments, arrangements or conditions (specify\*): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay arrears in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       single payment       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay retroactive maintenance in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       single payment       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay interest in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay health insurance in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay school fees in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_

Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall make other payments, arrangements or conditions (specify\*): \_\_\_\_\_  
\_\_\_\_\_ to be paid in the amount of \_\_\_\_\_ every:  
 week       two weeks       month       3 months       6 months  
 year       other (specify): \_\_\_\_\_

**Lump sum**

The debtor shall pay the lump sum amount of \_\_\_\_\_ on  
 Due date \_\_\_\_\_ (dd/mm/yyyy)  
 Another frequency (specify): \_\_\_\_\_

<sup>8</sup> Where different payments are provided for different periods please replicate this information for such periods with the understanding that at the new beginning date the former amount is replaced by the new one.

\* Include extract of the decision if necessary.

5.3 Maintenance payments directed to a public body (specify currency<sup>9</sup> for each amount)

- a. Name of the public body: \_\_\_\_\_
- b. Family name(s) of the contact person: \_\_\_\_\_
- c. Given name(s) of the contact person: \_\_\_\_\_
- d. Address: \_\_\_\_\_
- e. Telephone numbers: \_\_\_\_\_
- f. Fax number: \_\_\_\_\_
- g. E-mail: \_\_\_\_\_

- <sup>10</sup> Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay support / maintenance in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     other (specify): \_\_\_\_\_  
This payment includes     arrears     retroactive maintenance  
 interest     health insurance     school fees     other payments, arrangements or conditions (specify\*): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay arrears in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     single payment     other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay retroactive maintenance in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     single payment     other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay interest in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay health insurance in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall pay school fees in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     other (specify): \_\_\_\_\_
- Beginning \_\_\_\_\_ (dd/mm/yyyy) the debtor shall make other payments, arrangements or conditions (specify\*): \_\_\_\_\_  
\_\_\_\_\_ to be paid in the amount of \_\_\_\_\_ every:  
 week     two weeks     month     3 months     6 months  
 year     other (specify): \_\_\_\_\_

**Lump sum**

The debtor shall pay the lump sum amount of \_\_\_\_\_ on

- Due date \_\_\_\_\_ (dd/mm/yyyy)
- Another frequency (specify): \_\_\_\_\_

<sup>9</sup> Currency should be specified using the ISO code.

<sup>10</sup> Where different payments are provided for different periods please replicate this information for such periods with the understanding that at the new beginning date the former amount is replaced by the new one.

\* Include extract of the decision if necessary.

**6. Indexation of maintenance**

- The decision is silent about indexation
- The maintenance is indexed by operation of law.
- The maintenance should be indexed every year by 0.00% %
- The maintenance should be indexed as follows: \_\_\_\_\_

**7. Interest where maintenance payments are late**

- The decision is silent about interest where maintenance payments are late
- The interest on late payments is by operation of law.
- Unpaid amounts generate interest where payments are late at the following rate:  
0.00% % per  month  3 months  6 months  year
- The interest is:  simple or  compound

**8. Effect of the decision**

This decision shall remain in effect:

- Until the child(ren) has (have) reached the age of: \_\_\_\_\_
- Until the child(ren) is (are) self-supporting
- Until the child(ren) has (have) completed education (specify):
  - Secondary school  High school  Other: \_\_\_\_\_
  - College  University \_\_\_\_\_
- Until the creditor is self-supporting
- Unless and until it is changed or discontinued by further decision or by operation of law
- Other: \_\_\_\_\_

**9. Costs and expenses**

- The decision is silent about costs and expenses
  - The debtor is ordered to pay costs and expenses
  - The creditor is ordered to pay costs and expenses
  - Costs and expenses amount to: \_\_\_\_\_ (specify currency<sup>11</sup>)
- This Abstract accurately reflects the content of the decision, described under item 3 above, in relation to maintenance for the persons listed under items 5.1. and 5.2. a, b and c above.

Name: \_\_\_\_\_ (in block letters) Date: \_\_\_\_\_  
Name of the official from the competent authority of the State of origin (dd/mm/yyyy)

- This Abstract was completed by the official from the competent authority of the State of origin whose name appears above and is transmitted by the requesting Central Authority.

Name: \_\_\_\_\_ (in block letters) Date: \_\_\_\_\_  
Authorised representative of the Central Authority (dd/mm/yyyy)

Requesting Central Authority reference number: \_\_\_\_\_  
(For Central Authority use only)

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

<sup>11</sup> Currency should be specified using the ISO code.