

<b>Plaintiff</b>	<b>VS</b>	<b>Defendant</b>	<b>Superior Court of New Jersey</b> <b>Chancery Division – Family Part</b> <b>Civil Action Order</b>
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<input type="checkbox"/> Obligor <input type="checkbox"/> Obligee	<input type="checkbox"/> Obligor <input type="checkbox"/> Obligee	County _____	Docket # _____
<b>Hearing Date</b> / /	<b>Welfare / U.I.F.S.A. #</b>	CS # _____	

With appearance by:  **PL**     **Atty for PL** \_\_\_\_\_     **DEF**     **Atty for DEF** \_\_\_\_\_  
 **IV-D Atty** \_\_\_\_\_     **County Probation Division** \_\_\_\_\_

This matter having been opened to the court by:  Plaintiff     Defendant     County Welfare Agency     Probation Division     Family Division  
 for an **ORDER** for:  **Paternity**     **Support**     **Visitation**     **Custody**     **Enforcement**     **Modification/Increase/Decrease**  
 **Termination/Continuation**     **Status Review**

1. State with **Continuing Exclusive Jurisdiction**:

Child's Name	Birth Date	Child's Name	Birth Date
2A.	/ /	2E.	/ /
2B.	/ /	2F.	/ /
2C.	/ /	2G.	/ /
2D.	/ /	2H.	/ /

3.  **PATERNITY** of child(ren) (# above) \_\_\_\_\_ is hereby established and an **ORDER** of paternity is hereby entered.

4.  A Certificate of Parentage has been filed for child(ren) # \_\_\_\_\_ above.

5.  **It Is Hereby ORDERED That:** The obligor shall pay support to the New Jersey Family Support Payment Center in the amount of:

	+		+		=		<b>payable</b>		<b>effective</b>	/ /
<b>Child Support</b>		<b>Spousal Support</b>		<b>Arrears Payment</b>		<b>Total</b>		<b>Frequency</b>		<b>Date</b>

**NOTE: Child support is subject to a biennial cost-of-living adjustment in accordance with R. 5:6B**

6.  Child Support Guidelines Order     Deviation reason: \_\_\_\_\_

6A.  Worksheet attached.

7.  Support order shall be administered and enforced by the Probation Division in the county of Venue, \_\_\_\_\_.

8.  **ARREARS** calculated at establishment hearing are based upon amounts and effective date noted above and total \$ \_\_\_\_\_.

9.  **ARREARS** indicated in the records of the Probation Division, are \$ \_\_\_\_\_ as of \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

10.  **GROSS WEEKLY INCOMES** of the parties, as defined by the Child Support Guidelines, upon which this **ORDER** is based:  
**OBLIGEE \$** \_\_\_\_\_    **OBLIGOR \$** \_\_\_\_\_

11.  **INCOME WITHHOLDING** is hereby **ORDERED** on current and future income sources, including:  
 Name of Income Source: \_\_\_\_\_    Address of Income Source: \_\_\_\_\_

**OBLIGOR SHALL, however, make payments AT ANY TIME** that the full amount of support and arrears is not withheld.

12.  **Medical Support** coverage as available at reasonable cost shall be provided for the  **child(ren)**     **spouse**,  
 by  Obligor     Obligee     Both

The parties shall pay unreimbursable health care expenses of the child(ren) which exceed \$250.00 per child per year as follows:  
 \_\_\_\_\_% Obligor    \_\_\_\_\_% Obligee  
**Pursuant to R 5:6A the obligee shall be responsible for the first \$250.00 per child per year.**

If coverage is available, Medical Insurance I.D. card(s) as proof of coverage for the child(ren)/spouse shall be provided immediately upon availability to the Probation Division by the:

Obligee     Obligor

12A.  Insurance currently provided by a non-party: \_\_\_\_\_

12B.  Health insurance benefits are to be paid directly to the health care provider by the insurer.

13.  **GENETIC TESTING** to assist the court in determining paternity of the child(ren) (# \_\_\_\_\_) is hereby **ORDERED**.  
 The county welfare agency or the foreign jurisdiction in the county of residence of the child shall bear the cost of said testing, without prejudice to final allocation of said costs. If defendant is later adjudicated the father of said child(ren), defendant shall reimburse the welfare agency for the costs of said tests, and pay child support retroactive to \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

13A.  Issues of reimbursement reserved.

13B.  Issue of retroactive order reserved.

14.  This matter is hereby **RELISTED** for a hearing on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ before \_\_\_\_\_. A copy of this **ORDER** shall serve as the summons for the hearings. **No further notice for appearance shall be given.** Failure to appear may result in a default order, bench warrant, or dismissal. Reason for relist:

15.  **AN EMPLOYMENT SEARCH MUST BE CONDUCTED BY THE OBLIGOR.** Written records of at least #\_\_\_\_ employment contacts per week must be presented to the Probation Division. If employed, proof of income and the full name and address of employer must be provided immediately to the Probation Division.

16.  **SERVICE** upon which this order is based:  **Diligent Effort**  
 **Personal Service**  **Certified Mail:**  **Refused**  **Regular Mail (not returned)**  
Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  **Signed by:** \_\_\_\_\_  **Returned Unclaimed**  **Other** \_\_\_\_\_

17.  **A BENCH WARRANT** for the arrest of the obligor is hereby **ORDERED.** The obligor was properly served with notice for court appearance on \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_, and failed to appear. (Service noted above). An amount of \$ \_\_\_\_\_ shall be required for release.  
 **THE OBLIGOR IS HEREBY INCARCERATED** in the \_\_\_\_\_ County Jail until the obligor pays \$ \_\_\_\_\_ or until further notice of this court. The obligor was found to be not indigent and had the ability to pay the support order for reasons indicated below.

18.  **EFFECTIVE** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ **FUTURE MISSED PAYMENT(S)** numbering \_\_\_\_\_ or more may result in the issuance of a warrant, without further notice.

19.  **A LUMP SUM PAYMENT OF \$** \_\_\_\_\_ must be made by the obligor by \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_, or a bench warrant may be issued without further notice.

20.  This complaint / motion is hereby **DISMISSED:** (reason) \_\_\_\_\_.

21.  Order of Support is hereby **TERMINATED** effective \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_, as \_\_\_\_\_. Arrears accrued prior to effective date, if any, shall be paid at the rate and frequency noted on page number one of this **ORDER.**

22.  **THIS ORDER IS ENTERED BY DEFAULT.** The  obligor  obligee was properly served to appear for a hearing on \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ and failed to appear. **22A.**  Affidavit of Non-Military Service is filed.

23.  It is further **ORDERED:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Except as Provided Herein, All Prior Orders of the Court Remain in Full Force and Effect.**

I hereby declare that I understand all provisions of this **ORDER** recommended by a Hearing Officer and I waive my right to an immediate appeal to a Superior Court Judge:

**Plaintiff** \_\_\_\_\_ **Defendant** \_\_\_\_\_

**Attorney for Plaintiff** \_\_\_\_\_ **Attorney for Defendant** \_\_\_\_\_

24.  **INTAKE CONFERENCE BY AUTHORIZED COURT STAFF:**  
 **PROBATION PREPARED CHILD SUPPORT ORDER**

25.  The parties request the termination of all Title IV-D services and consent to direct payment of support. They are advised that all monitoring, collection, enforcement and location services available under Title IV-D of the Social Security Act are no longer in effect. I understand I may reapply for Title IV-D services.  
\_\_\_\_\_ obligee \_\_\_\_\_ obligor

26.  Copies provided at hearing to  obligee  obligor **26A.**  Copies to be mailed to  obligee  obligor

**TAKE NOTICE that the attached New Jersey Uniform Support Notices are incorporated into this Order by reference and are binding on all parties.**

So **Recommended** to the Court by the Hearing Officer:  
Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ H.O. \_\_\_\_\_ Signature \_\_\_\_\_

So **Ordered** by the Court:  
Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ Judge \_\_\_\_\_ Signature \_\_\_\_\_, J.S.C.