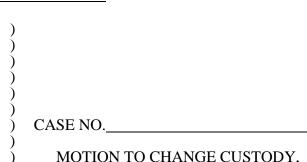
Daytime Telephone No.

#### TYPE OR HAND PRINT NEATLY, USING BLACK INK ONLY

List court location, names of parties and case number exactly as shown on original court order.

## IN THE SUPERIOR COURT FOR THE STATE OF ALASKA

AT



#### MOTION TO CHANGE CUSTODY, SUPPORT OR VISITATION

#### 1. **PARENT INFORMATION**

**NOTE:** If for any reason you do not want the other parent to know your current address or employer, you need not provide that information. However, you must provide a mailing address that will allow the court and the other parent to mail you required documents. That address may be in care of another person as long as you will receive all papers sent to you.

<b>Father:</b> Full name:	Date of Birth:
Mailing address:	
Residence address (if different):	
Daytime phone number:	
Most recent employer:	
Dates of employment	
Employer's address:	
<b>Mother:</b> Full name:	Date of Birth:
Mailing address:	
Residence address (if different):	
Daytime phone number:	
Most recent employer:	
Dates of employment:	
Employer's address:	
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MOTION TO CHANGE CUSTODY, SUPPORT OR VISITATION

# **<u>Custodian (other than parent)</u>:**

Full name:	_ Date of Birth:
Mailing address:	
Residence address (if different):	
Daytime Phone number:	_

## 2. <u>CHILDREN</u>

## List the names of all children covered by your most recent court order.

	vv	
Child's Name	Date of Birth	Who is Child Living With?
	f	:
[Attach extra p	bages for any add	itional children.]
Is the custody and visitation arrang in its most recent order?		hild the same as ordered by the court
		il how the child's current custody and ourt ordered. [ <i>Attach extra pages if</i>

## 3. <u>CHANGE IN CUSTODY OR VISITATION</u>

NOTE: A change in custody will not be granted unless t	here has been a substantial
change in circumstances since the last order was entered.	Also, the requested change
must be in the best interests of the children. See page 3 of	the Instructions about "best
interests."	

Do you want the custody or visitation order changed? (Check all that apply.)

custody visitation

**no change in custody or visitation** 

Explain in detail what changes you want the court to order and why. [Attach extra pages if necessary.]

**Notice to Parties**: If there is a change in custody or visitation, the court is required to consider whether the child support order must also be changed.

**Travel Expenses**. Travel expenses necessary to exercise visitation should be allocated between the parties as follows:

### 4. <u>CHANGE IN CHILD SUPPORT</u>

**NOTE:** In order to obtain an increase or decrease in support payments because of a change in income of the person making the payments, the change in income must be both long term and significant. The court will not modify a support order because of a minor or temporary increase or decrease in income. The general guideline for determining whether a change in income is significant is if the change is enough to raise or lower the support payments by 15% or more. You must attach any documentation you have that supports your request. Examples include pay stubs, tax returns, and proof of social security or disability benefits.

Do you want the support payments for the above children to be:

increased	decreased	no change in support payments
Check all of the followidecrease. [Attach extra p	ng boxes that exages if necessary	xplain why you are requesting an increase or .]
or decreased. (If you ch	neck this box, atte	king the child support payments has <b>increased</b> ach documentation of the increase or decrease
where the children are l	living. (If you o explain what the c	changed because there has been a change in check this box, list the dates when the living urrent living arrangements are, and attach any .)
availability or cost of me the children have increased	dical insurance for sed or decreased	changed because there has been a change in the or the children or because medical expenses for . ( <i>If you check this box, attach all available</i>
documents that support th	ie requested chan	nge.)

Other (Be specific and attach any supporting documents.)\_\_\_\_\_

d.

**Income Withholding.** If your current support order in this case does not require immediate income withholding but CSSD is enforcing the order, the court will be required to order immediate income withholding in its modification order unless one of the three exceptions authorized by Alaska Statute 25.27.062(m) applies. For an explanation of those exceptions, see form DR-10, pages 13-14 (available at the court).

Is CSSD currently enforcing your support order	Yes	🗌 No	
If yes, is there a reason why the court should not o	order immedi	ate income withh	olding?

5.	<b><u>REQUIRED ATTACHMENTS</u></b> . Each of the items listed below MUST be attached to this
	motion. Check each box to indicate that you have completed and attached the item.

Child Custody Jurisdiction Affidavit (form DR-150)

- Child Support Guidelines Affidavit (form DR-305)
- Shared Custody Child Support Calculation (form DR-306) (required only if shared custody has been ordered or is being requested) or form DR-307 (for divided custody) or form DR-308 (for hybrid custody).
- All documentation needed to support your request for a change in custody, visitation or support.

# **OATH OR AFFIRMATION**

**NOTE**: You must sign this in front of a notary. A court clerk can provide this notary service for you at no charge. Bring a photo ID with you for the notarization.

I swear or affirm that the above statements and any attachments are true to the best of my knowledge and belief.

Date

Signature of Person Filing Motion

Printed Name

Subscribed and sworn to or affirmed before me at \_\_\_\_\_, Alaska

on \_\_\_\_\_

Date

Clerk of Court, Notary Public or other person authorized to administer oaths. My commission expires: \_\_\_\_\_

(SEAL)

[You must complete the Certificate of Service on the next page.]

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#### <u>CERTIFICATE OF SERVICE</u> [MUST BE COMPLETED]

I certify that I served a copy of this motion and all the documents checked in paragraph 5 as shown below:

<u>**On Other Parent**</u> (Instructions: You must also send a Response Packet to the other parent.)

I mailed (first class mail) hand delivered to the other parent a copy of (1) this motion and all documents checked in paragraph 5 and (2) a Response Packet.

Name of Other Parent:	
Address:	
Date mailed or delivered:	

<u>On Other Parent's Attorney</u> (Instructions: If the other parent was represented by an attorney within the last year, you must send the attorney a copy of this motion and all the documents checked in paragraph 5.)

Ι	mailed (#	first class mail)		hand delive	ered		

to the attorney a copy of this motion and all the documents checked in paragraph 5.

Name of Other Party's Attorney:	
Address:	
Date mailed or delivered:	

<u>On the Child Support Services Division</u> (Instructions: If the Child Support Services Division (CSSD) is enforcing this order, you must send a copy of this motion and all the documents checked in paragraph 5 to the Attorney General's Office.)

I		mailed (first class mail)		] hand de	elivered	
a co	py	of this motion and all the documents	che	ecked in	paragrap	h 5 to:

Attorney General's Office Collections and Support Section 1031 West Fourth Avenue, Suite 200 Anchorage, AK 99501

Date mailed or delivered:

Signature of Person Filing Motion