

SUPERIOR COURT

FAMILY DIVISION

\_\_\_\_\_ Unit

\_\_\_\_\_ Docket No.

Plaintiff

Defendant

Name	DOB	v.	Name	DOB
<input type="checkbox"/> INTERIM <input type="checkbox"/> TEMPORARY <input type="checkbox"/> FINAL <b>CHILD SUPPORT ORDER</b> <input type="checkbox"/> Establishment <input type="checkbox"/> Modification <input type="checkbox"/> Enforcement <input type="checkbox"/> Contempt				
OBLIGOR (Person Who Must Pay Support)			OBLIGOR'S EMPLOYER or Source of Funds	
Last-Name	First Name	Initial	Name	
Mailing Address			Mailing Address	
City	State	Zip Code	City	State                      Zip Code
Telephone Number			Telephone Number	
Social Security Number	Email Address			

OBLIGEE (Person Who Receives Support)			OBLIGEE'S EMPLOYER or Source of Funds	
Last-Name	First Name	Initial	Name	
Mailing Address			Mailing Address	
City	State	Zip Code	City	State                      Zip Code
Telephone Number			Telephone Number	
Social Security Number	Email Address			

CHILDREN WHO ARE SUBJECT OF THIS ORDER					
Last Name	First Name	M.	Date of Birth	Grade	Social Security Number

**I. TYPE OF HEARING, DEFAULT OR STIPULATION**

This order is entered:	<input type="checkbox"/> after default hearing (when one or more parties fail to appear) <input type="checkbox"/> after hearing (when parties are/or their attorneys are present) <input type="checkbox"/> upon approval of the parties (stipulation filed) <input type="checkbox"/> pursuant to 15 V.S.A. § 660(d)	
<b>Parties Present:</b>	<input type="checkbox"/> Obligor <input type="checkbox"/> Obligee <input type="checkbox"/> OCS	<input type="checkbox"/> Obligor's Attorney <input type="checkbox"/> Obligee's Attorney <input type="checkbox"/> Other: _____
	<input type="checkbox"/> Obligor was not present, but	<input type="checkbox"/> Received notice by personal service on: _____ <input type="checkbox"/> Received notice by certified mail restricted delivery on _____ <input type="checkbox"/> Signed an acceptance of service on _____
	<input type="checkbox"/> Obligee was not present, but	<input type="checkbox"/> Received notice by personal service on: _____ <input type="checkbox"/> Received notice by certified mail restricted delivery on _____ <input type="checkbox"/> Signed an acceptance of service.

**FINDINGS AND BASIS OF ORDER**
**II. PARENTAGE**

Parentage has been established as follows:

The following child(ren) was/were born or adopted during the marriage: \_\_\_\_\_

A Parentage Order for the following children: \_\_\_\_\_  
 was issued on \_\_\_\_\_ by the Vermont Superior Court  \_\_\_\_\_

There is a legal presumption of parentage for the following child(ren) \_\_\_\_\_

Basis for the presumption:

The alleged parent failed to submit without good cause to court ordered genetic testing.

The alleged parents have voluntarily acknowledged parentage under the laws of this state or any other state, by filling out and signing a voluntary acknowledgement of parentage form and filing the completed and witnessed form with the department of health.

The probability that the alleged parent is the biological parent exceeds 98 percent as established by a scientifically reliable genetic test.

**III. PARENTAL RESPONSIBILITIES**

A. Physical responsibility for the child(ren) for the purpose of child support is:

<input type="checkbox"/> Primarily with	<input type="checkbox"/> Obligor	<input type="checkbox"/> Obligee	
<input type="checkbox"/> Split as follows:	Child(ren) with Obligor:		
	Child(ren) with Obligee:		
<input type="checkbox"/> Shared as follows:	%	of time with Obligor.	
	%	of time with Obligee.	

B. Physical Responsibility is based on:  a stipulation of the parties dated \_\_\_\_\_  
 an Order of the Court dated \_\_\_\_\_

C.  The following child(ren) is/are in the custody of others: First M. Last \_\_\_\_\_

D. Additional information:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

IV. MEDICAL SUPPORT

This is the result of a medical support worksheet which is attached and incorporated as findings in this order.

A. The parties are ordered to pay medical support as follows:

- The Obligor Obligee is ORDERED to provide and maintain private health insurance for the minor child(ren) as long as the cost of health insurance is deemed reasonable.
- Private health insurance is currently unavailable to either party. The obligor shall pay a cash contribution toward the cost of health coverage as follows: \$  Per  Beginning:
- Private health insurance is currently unavailable to either parent at a reasonable cost. If private health insurance becomes available to either parent at a reasonable cost, that parent shall be responsible for providing and maintaining health insurance for the minor child(ren). Either parent may request a hearing to determine whether the cost of health insurance is reasonable.

B. Current Medical Support Coverage

Private health insurance:

Policy or Certificate Number	Name of Subscriber and Relationship to Children
Plan Name and Address	Subscriber ID Number

C. Child(ren)'s Out of Pocket Medical Expenses

Medical or other health expenses that are unreimbursed by insurance (including but not limited to expenses for eye, dental, mental health, health plan deductible) shall be shared as follows:

- 1) Obligee is solely responsible for the first \$200 annually of the children's out of pocket health expenses beginning Month, Day, Year
- 2) The parties shall share unreimbursed expenses as follows: Obligor % Obligee %
- 3) Additional Provisions:

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D. Additional Medical Support Provisions

1. If employed, a parent under a medical support order shall notify his/her employer of such obligation, in writing, within 10 days of the date of this order.
2. If self-employed or unemployed, a parent under a medical support order shall notify his/her health care insurer of such obligation in writing within 10 days of the date of this order.
3. A parent is liable for any unreimbursed health care costs of the child(ren) that result from that parent's failure to give notice/obtain insurance as ordered above, which accrues between the date of this order and the date that the order is modified by the Court.
4. If a parent has health insurance through an entity other than his/her employer, that parent shall be responsible for maintaining that insurance and complying with any notice requirements under the policy in effect. Failure to do so will make the parent liable for paying any unreimbursed health care expenses that accrue between the date of this order and the date this order is modified by the Court.
5. If a parent pays a health expense of a child subject to this order and the other parent receives reimbursement from insurance for the expense, the reimbursement shall be sent to the parent who advanced payment, within 30 days of receipt. If the child(ren) also have Medicaid coverage, payment is to be sent to: Office of Health Access, 312 Hurricane Drive, Suite 201, Williston, VT 05495-2806, within 30 days.
6. The parties shall provide each other with copies of bills for health expenses and documentation of insurance determination within 30 days of receipt. The parent who maintains insurance shall also provide the other parent with a health insurance card, claim forms and a list of benefits and restrictions within 10 days of the date of this order.

**V. CURRENT CHILD SUPPORT**

This is the result of a child support worksheet which is attached and incorporated as findings in this order and includes information on other child support related costs, such as child care, extraordinary medical and/or educational expenses.

**A. Child Support: Obligor shall pay child support as follows:**

Beginning Date	Amount	per	Time Period	Annual Amount
	\$			\$

**B. Child Support Maintenance Supplement: Obligor shall pay maintenance supplement as follows:**

Beginning Date	Amount	per	Time Period
	\$		

**C. Spousal Maintenance: Obligor shall pay spousal maintenance as follows:**

Beginning Date	Amount	per	Time Period
	\$		

**VI. ARREARS ON PAST DUE CHILD SUPPORT/REPAYMENT PROVISIONS**

**A. Arrears Owed to Office of Child Support**  
 Obligor shall pay the office of Child Support as follows:

Beginning Date	Amount	per	Time Period	on a	Judgment Amount	as of	Date
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The judgment consists of the following past due amounts:

Child Support	Service fees	Civil Penalty	Cash Contribution towards Medical	Other:	Amount of Other
\$	\$	\$	\$		\$

**B. Arrears Owed to the Oblige**  
 Obligor shall pay the Oblige as follows:

Beginning Date	Amount	per	Time Period	on a	Judgment Amount	as of	Date
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The judgment consists of the following past due amounts:

Past due support	Surcharge	Service fees	Civil Penalty	Attorney Fees
\$	\$	\$	\$	\$
Medical Expenses	Cash Contribution towards Medical	Other:	Amount of Other	
\$	\$		\$	

**C. Arrears Owed to Another Person or Agency**  
 obligor shall pay to Name of Other Person or Agency

Beginning Date	Amount	per	Time Period	on a	Judgment Amount	as of	Date
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**D. Surcharge of Interest**  
 SURCHARGE OR INTEREST ACCRUES ON THE UNPAID BALANCE OF SUPPORT AT THE RATE OF 1% PER MONTH OR 12% PER YEAR UNTIL THE SUPPORT ARREARS ARE PAID IN FULL - EVEN IF THE OBLIGOR IS MAKING MONTHLY ARREARS PAYMENTS IN CONFORMITY WITH THIS ORDER. 15 V.S.A § 606.

**E. Arrears owed to the Oblige shall be paid first unless the Oblige is a recipient of federal public assistance benefits.**

**F. Additional Arrears Provisions:**

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**IX. DURATION OF CHILD SUPPORT**

- A. This order shall remain in effect unless and until it is changed or discontinued by further order of the Court or by operation of law pursuant to the law of the issuing state of XXX.
- B. if Vermont is the issuing state, an Obligor's support obligation will continue beyond a child's eighteenth birthday if the child is enrolled in, but has not completed high school, unless otherwise specified.
- C. If wage withholding is ordered and an arrearage exists when the support obligation terminates, the current monthly payment and any arrearage repayment plan shall not be reduced until the amount is satisfied.

**The above is stipulated to by the parties:**

Signature of Obligor	Date	Signature of obligee	Date
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**Approved as to Form:**

Signature of Obligor's Attorney	Date	Signature of Obligee's Attorney	Date
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OCS Representative

Date

**It is so ORDERED:**

Signature of Magistrate or Superior Court Judge

Date

Printed Name of Magistrate or Superior Court Judge

Assistant Judge

Date

Assistant Judge

Date

**ACCEPTANCE OF SERVICE**

I have received a copy of this order and I waive all other service.

Obligor

Date

Obligee

Date

**NOTICE OF RIGHT TO APPEAL**

An order signed by a Magistrate or Presiding Judge may be appealed by filing a Notice of Appeal with the Clerk of the Family Division within 30 days of the filing of this order.

**Additional Conditions of Order & Important Notices****A. THIS IS A COURT ORDER**

All parties are expected to comply with all terms of this order.

The address provided to the court shall remain the same for service of future actions and/or orders unless a parent notifies the court of a change.

**B. A PARTY HAS THE RIGHT TO SEEK MODIFICATION OF THE ORDER BY FILING AN ACTION IN COURT**

A parent or any other person to whom support has been granted, or any person charged with support, may file a motion for a modification of a child support order under 15 v.s.a. § 660. **A modification may be granted upon a real, substantial, and unanticipated change of circumstances**, including loss of employment or a considerable reduction or increase in salary or wages. An obligor is responsible for any required payments set forth in an order unless the order is vacated or modified by a court. Thus, any subsequent agreement between the parties that differs from the order is not legally binding, and the obligor is still legally required to pay the amount ordered by the court. (15 V.S.A. § 663 (e)).

If a child turns 18 and has completed secondary school, and a parent wants to have support changed, s/he must file a motion to modify child support with the court.

**C. RIGHT TO SEEK ENFORCEMENT OF THE ORDER**

1. A party may place liens on real or personal property.

2. A party may request the court to:

- » place assets in escrow.
- » grant a civil penalty when noncompliance of the support is willful.
- » order wage withholding if the support amount is at least 7 days delinquent.
- » find the Obligor in Contempt if there is willful noncompliance with this order.
- » impose surcharges on past due child support.

**IN ADDITION TO THE REMEDIES LISTED ABOVE:**

A party has the right to request assistance from the Vermont Office of Child Support in the effort to enforce this order. If the Office of Child Support is or becomes involved in this case, based either on a current or future request for their services, or otherwise, the Office is not limited to but may take the following steps when appropriate:

1. Use any lawful collection remedies to collect any outstanding balance from the Obligor, regardless of any repayment plan on any unpaid debts.
2. Certify all qualifying child support debts to the Vermont Tax Department and/or the Federal Treasury Offset Program for the purpose of intercepting tax returns and/or other payments (i.e., vendor payments, passport denial, etc.)
3. Report an Obligor's account balance to consumer credit reporting agencies and/or request a copy of the report.
4. Administratively issue a wage withholding order for current support and/or arrearages in excess of 1/12 of the annual support obligation.
5. Freeze bank accounts and take the proceeds to satisfy past due support.
6. Administratively suspend any and all licenses owned by the Obligor. This may include, but is not limited to, professional, hunting, fishing, or motor vehicle driver's licenses.

