

PARTY WITHOUT ATTORNEY OR ATTORNEY NAME: FIRM NAME: STREET ADDRESS: CITY: TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	STATE BAR NUMBER: STATE: ZIP CODE: FAX NO.:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
PETITIONER: RESPONDENT: OTHER PARTY:		
STIPULATION TO ESTABLISH OR MODIFY CHILD SUPPORT AND ORDER		CASE NUMBER:

INSTRUCTIONS

- Use this form if the parents have an agreement about child support. After this form is completed and signed by both parents, it must be filed and approved by the court. A court case (for example, a divorce case) must already be open before this form can be used.
- If the local child support agency is involved in your case, a lawyer from their office must also approve and sign the agreement.
- If the local child support agency is not involved in your case, each parent must also complete and submit a *Child Support Case Registry Form* when filing this agreement with the court.
- When you file the agreement with the court, the clerk may ask the parents to pay a filing fee. If you cannot afford the fee, you must fill out these forms: *Request to Waive Court Fees* and *Order on Court Fee Waiver (Superior Court)*
- For more information about child support, go to _____, and for help completing this form, talk to the _____ or _____ in your county.

(1) The child support orders below are agreed to by:

- a. (name): _____, who is the Petitioner Respondent Other party , and
 b. (name): _____, who is the Petitioner Respondent Other party .

CHILD SUPPORT

(2) We agree that (name): _____ must pay to (name): _____

child support as listed below, beginning on (date): _____.

- a. The children are:

<u>Name of child</u>	<u>Date of birth</u>	<u>Monthly amount</u>
(1)		
(2)		
(3)		
(4)		
(5) <input type="checkbox"/>	Additional children are listed on an attached page.	

Basic child support. (Add up the monthly amounts for all children listed above.) Total: \$ _____, payable _____.

on the first of the month other (specify): _____.

- b. The parents agree to pay additional child support as follows:

Instructions: For each item you select in the table on page 2, you must also tell the court how the expense will be paid each month.

- **Percentage:** You can select “50% by each parent” or use a different split (for example, Name 1: 70%, Name 2: 30%).
- OR-

- **Dollar amount:** You can input a fixed dollar amount (for example, Name 2 will pay \$150/month for child care costs).

(Note: if the actual monthly cost for that item later changes, you will then also need to change the court order; this will not happen automatically.)

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<input checked="" type="checkbox"/>	Additional child support	Percentage			Dollar amount	
		50% by each parent	(name):	(name):	(name):	(name):
<input type="checkbox"/>	Reasonable uninsured healthcare costs for child	<input type="text"/>	%	%	\$ /month	\$ /month
<input type="checkbox"/>	Childcare costs related to job or job training	<input type="text"/>	%	%	\$ /month	\$ /month
<input type="checkbox"/>	Educational costs for child	<input type="text"/>	%	%	\$ /month	\$ /month
<input type="checkbox"/>	Costs for other special needs of child	<input type="text"/>	%	%	\$ /month	\$ /month
<input type="checkbox"/>	Travel expenses for visitation	<input type="text"/>	%	%	\$ /month	\$ /month
<input type="checkbox"/>	Other (specify):	<input type="text"/>	%	%	\$ /month	\$ /month

(2) c. **Total monthly child support.** (Basic child support + additional child support, if dollar amount selected.)

(name): will pay: \$, payable on the first of the month
 other (specify): .

(3) Health insurance for the child will be provided by (choose one or both parents) (name):

and (name): if available at no or reasonable cost from their job or self-employment.
A parent ordered to provide health insurance must seek continuation of coverage for the child after the child attains the age when the child is no longer considered eligible for coverage as a dependent under the insurance contract, if the child is incapable of self-sustaining employment because of a physically or mentally disabling injury, illness, or condition and is chiefly dependent upon the parent providing health insurance for support and maintenance.

FINANCIAL INFORMATION

(4) We have attached a printout of a computer calculation of our financial information. (If you do not attach a printout, fill out items ⑤ and ⑥, and ⑦ if applicable. A free child support calculator is available at

-OR-

(5) The net monthly disposable income of (name): is: \$, and
the net monthly disposable income of (name): is: \$.

(Note: Child support is based on the *net disposable income* of each parent, which is how much money is left each month after taxes and certain other items like health insurance, union dues, or other child support paid are subtracted from their pay.)

(6) Based on our parenting time arrangement, on average the child is with (name): % of the time and with (name): % of the time each month.

(7) We agree to allow hardships in calculating child support. A hardship is being experienced by one or both parents as follows:
a. (name): : \$ per month because of (specify):
b. (name): : \$ per month because of (specify):

GUIDELINE SUPPORT AMOUNT

(You must complete item ⑧, and item ⑨ or ⑩, as applicable.)

(8) Guideline child support is \$ per month, payable by (name): .

(9) We agree to guideline child support.

(10) We do not agree to guideline child support.

a. We agree to child support in the amount of: \$ per month; the agreement is in the best interest of the children; the needs of the children will be adequately met by the agreed amount; and application of the guideline would be unjust or inappropriate in this case.

b. Other reasons why the guideline amount should not be used (specify):

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OTHER ORDERS

- (11) a. We agree to promptly tell each other our new mailing address if it changes.
 b. We agree to promptly tell each other our new employment information if we change jobs.
- (12) Other agreements related to child support (*specify*):
- (13) a. An earnings assignment order is issued. All child support payments must be made through the State Disbursement Unit.
 b. We agree to stay (stop) the service of the earnings assignment because we have made the following alternative arrangements to ensure payment (*specify*):
- (14) In the event that there is a contract between a parent receiving support and a private child support collector, the parent ordered to pay support must pay the fee charged by the private child support collector. This fee must not exceed 33 1/3 percent of the total amount in arrears nor may it exceed 50 percent of any fee charged by the private child support collector. The money judgment created by this provision is in favor of the private child support collector and the parent receiving support, jointly.
- (15) We agree that we are fully informed of our rights under the California child support guidelines. This agreement is in the best interest of the child. We make this agreement freely without coercion or duress.
- (16) *Notice of Rights and Responsibilities (Health-Care Costs and Reimbursement Procedures) and Information Sheet on Changing a Child Support Order*
 must be attached and is incorporated into this order.
- (17) Has the right to support been assigned to a county or is an application for public assistance pending? Yes No
(If you checked "Yes" a lawyer from the local child support agency must also approve and sign the agreement.)
- (18) The local child support agency has reviewed and approves of this agreement.

Date:



(TYPE OR PRINT NAME)

(SIGNATURE OF ATTORNEY FOR LOCAL CHILD SUPPORT AGENCY)

NOTICE: Any parent required to pay child support must pay interest on overdue amounts at the "legal" rate, which is currently 10 percent per year. If the parents agree to a child support order less than the guideline amount, the order can be modified without showing a change of circumstances. If the order is above the guideline, a change of circumstances will be required to modify the order. This form must be signed by all parties and the court to be effective.

Date:



(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER RESPONDENT OTHER PARTY)

Date:



(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER RESPONDENT OTHER PARTY)

Date:



(TYPE OR PRINT NAME)

(ATTORNEY FOR PETITIONER RESPONDENT OTHER PARTY)

Date:



(TYPE OR PRINT NAME)

(ATTORNEY FOR PETITIONER RESPONDENT OTHER PARTY)**THE COURT ORDERS**

- (19) a. The guideline child support amount in item (8) is rebutted by the factors stated in item (10).
 b. Items (1) through (3) and items (11) through (14) are ordered. All child support payments must continue until further order of the court, or until the child marries, dies, is emancipated, or reaches age 18. The duty of support continues as to an unmarried child who has attained the age of 18 years, is a full-time high school student, and resides with a parent, until the time the child completes the 12th grade or attains the age of 19 years, whichever first occurs. Except as modified by this agreement, all provisions of any previous orders made in this action will remain in effect.

Date:

JUDICIAL OFFICER