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

Non-IV-D Case: [ ]

File Stamp

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

[ ] **Obligee** [ ] **Obligor**

Tribal Affiliation (if applicable)

Responding IV-D Case Identifier: _____

Responding Tribunal Number: _____

Initiating IV-D Case Identifier: _____

Initiating Tribunal Number: _____

Note:

[ ] **Nondisclosure Finding/Affidavit attached**

[ ] **This form sent through EDE**

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

[ ] Acknowledgment of parentage

[ ] Documentation regarding military service

[ ] Other: _____

[ ] Declaration in Support of Establishing Parentage

[ ] Birth certificate/record of the child

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, information, and belief.

Date	Printed name	[ ] Signature of petitioner [ ] 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.

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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).

> *CSENet and EDE transactions are the recommended methods 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 or information provided on the form.*
>
> *Supporting documentation should be sent through EDE, whenever possible.*

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://scra-w.dmdc.osd.mil/scra/#/home) 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 under penalty of perjury and dated. 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. By this signature, the individual is confirming that the information and facts provided in the petition are true to the best of his/her knowledge and belief. 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 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 0.06 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.