

CONTESTED CHANGE OF CUSTODY

A change of custody is allowed when the parent(s) can prove that there are substantial changes affecting the welfare and best interests of the child(ren).

When a parent sues the other parent to change custody, the Court has the power to award sole custody, joint custody, joint legal custody, and joint physical custody. Additionally, the Court may award custody to a third person when both parents are proved to be unfit. The Judge has the power to Order a psychological evaluation of the family, an independent medical evaluation, or an investigation by the local family and children services agency.

A complaint for change of custody brought by the non-custodial parent must be brought in the county in which the legal custodian of the child or children. A complaint for change of custody brought by the legal custodian must be brought in the county in which the Defendant resides. **If the custodial parent and the children live in another state, the rules of jurisdiction and venue are governed by the Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA), which is quite complicated.** The UCCJEA has been adopted by forty-four states. You may read Georgia's version of this law at O.C.G.A. § 19-9-40 through § 19-9-104.

In a multi-state case, you are **strongly encouraged** to get an attorney.

A Judge may consider the desire of a child who is at least eleven years of age, but not yet fourteen. However, the child's desire by itself is not a material change of conditions or circumstances. The wishes of a child aged fourteen or older is controlling unless the parent whom the child chooses is unfit. During a custody hearing, the Court may Order the parents to leave the courtroom when a child testifies.

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____, §
Plaintiff,
v. § Civil Action
§ File No. _____
_____, §
Defendant. §

COMPLAINT FOR CHANGE OF CUSTODY

Now comes the Plaintiff, _____, and states his/her claim against the Defendant, _____, for a change of custody as follows:

1.

Jurisdiction and Venue (choose a or b)

a) The Defendant, a Georgia resident, is the custodial parent and may be served at his or her address: _____

b) The Defendant, a Georgia resident, is the non-custodial parent and may be served at his or her address: _____

2.

Current Custody Arrangement (choose a or b)

a) The Defendant presently has legal custody of the minor child(ren), _____, age(s) _____, by virtue of a Final Order and decree of divorce in Civil Action No. _____, entered on the _____ day of _____, 20 _____, in the Superior Court of _____ County, Georgia.

b) The Defendant presently has legal custody of the minor child(ren), _____, age(s) _____, by virtue of an Order of Legitimation in Civil Action No. _____, entered on the _____ day of _____, 20 _____.

3.

Change in Circumstances

There has been a change in circumstances materially affecting the welfare of the minor child(ren) as follows: _____

4.

Proposed New Custody Arrangement

As a result of such change of circumstances, the Plaintiff asks that custody be changed as follows: _____

5.

Plaintiff's Ability to be Custodial Parent

The Plaintiff is a fit and capable parent and is otherwise qualified to assume full custody of the minor child(ren).

6.

Visitation

a) Plaintiff requests that the Defendant be awarded visitation with the minor child(ren) as follows (or attach a schedule): _____

b) The proposed visitation schedule is attached as Exhibit “_____.”

7.

Child Support Amount

Please go to <http://www.georgiacourts.org/csc/> and complete the Child Support Worksheet.

The Plaintiff asks that Defendant be required to pay to the Plaintiff, as support of the minor child(ren), the sum of \$ _____ * per week/bi-weekly/ month, starting on _____, and continuing per week/bi-weekly/month thereafter until each respective child reaches the age of eighteen (18), or so long as the child is enrolled in and attending secondary school (not to exceed age twenty (20)), marries, dies, or becomes otherwise emancipated. The Plaintiff asks that the child support obligation be reduced as follows as each child becomes emancipated: _____

*This amount was derived from line 13 of the Child Support Worksheet, which is attached hereto as Exhibit 1.

8.

Child Support Method of Payment (Check a or b)

a) The Plaintiff asks that all payments of child support shall be paid directly to the Plaintiff at the following address: _____

b) The Plaintiff ask that all child support payments shall be paid to Georgia Child Support Enforcement pursuant to an Income Deduction Order.

9.

Health Insurance

The Plaintiff asks that _____ shall be required to maintain a policy of medical, dental, and hospitalization insurance for the benefit of the minor child(ren) for so long as the child support obligation set forth herein exists. The Plaintiff asks that costs not covered under the insurance policy shall be divided between the parties as follows:

The Plaintiff further asks that _____ shall provide him/her with an insurance identification card or such other acceptable proof of insurance coverage and shall cooperate with the Plaintiff in submitting claims under the policy.

THEREFORE, Plaintiff prays:

(a) That custody of the minor child(ren) be changed as follows: _____

_____;

(b) That the Plaintiff have such additional relief as the Court may consider equitable and appropriate.

Plaintiff *pro se*

Address: _____

Telephone number(s): _____

Email Address: _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

VERIFICATION

Personally appeared before me the undersigned who on oath states that the facts set forth in this Complaint are true and correct to the best of his/her knowledge and belief.

Plaintiff *pro se*

Sworn to and subscribed before me
this _____ day of _____, 20 _____.

Notary Public, State of Georgia

My Commission Expires: _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

CERTIFICATE OF SERVICE

I hereby certify that I have this day served the foregoing **Complaint for Change of Custody** upon the following counsel for party OR party by delivering or causing to be delivered by hand a copy of same as follows: _____

[Name and address of counsel of record, or of parties if no counsel of record.]

and upon the following counsel for party OR party by depositing or causing to be deposited a copy of same in the United States mail in an envelope with sufficient postage thereon addressed as follows: _____

[Name and address of counsel of record, or of parties if no counsel of record.]

This _____ day of _____, 20 _____.

Plaintiff pro se

Address: _____

Telephone number(s): _____

Email Address: _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

RULE NISI TEMPORARY RESTRAINING ORDER

The within and foregoing Complaint having been read and considered, the same is Allowed, Ordered and Filed.

Let the Defendant be served with a copy of this Complaint and a copy of this Order, and let the Defendant show cause before the Honorable _____
[name] at _____ .M., on the _____ day of _____,
20 _____, then and there to be heard, why the prayers of the Plaintiff's Complaint should not be granted.

In the meantime and until further Order of this Court, the Defendant is restrained and enjoined from: molesting, harassing, or harming the Plaintiff or the minor child(ren), born as a result of this marriage in any way; from following the Plaintiff; from interfering with the personal property held by the Plaintiff; or from entering the Plaintiff's dwelling house.

This _____ day of _____, 20_____.

JUDGE, Superior Courts
Southern Judicial Circuit

Presented by:

Plaintiff *pro se*

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

PLAINTIFF'S AFFIDAVIT REQUIRED BY O.C.G.A. § 19-9-69

State of Georgia
County of _____

Personally before the undersigned officer authorized to administer oaths appeared
_____, who, being duly sworn,
does state on oath the following:

1.

That Affiant, _____, is the plaintiff
named in the above- styled action.

2.

The above-styled action concerns the custody of:

Name: _____	DOB: _____	Sex: _____
Name: _____	DOB: _____	Sex: _____
Name: _____	DOB: _____	Sex: _____
Name: _____	DOB: _____	Sex: _____
Name: _____	DOB: _____	Sex: _____

3.

The present address of the child(ren) is: _____

_____.

4.

For the past five years, the children lived at the following addresses with the following persons:

Address	Dates	Lived With

5.

The child(ren) presently live/lives with _____.

6.

Other Cases Concerning the Child(ren) (Choose a or b)

(The Court wants to know about the following types of actions: custody, visitation, family violence, protective orders, termination of parental rights, and adoption.)

a) Plaintiff asserts that he/she has not participated as a party or a witness or in any other capacity in any other litigation concerning the children named above, and knows of no other proceeding concerning the minor children in this or any other state. No person other than the parties to this action has physical custody of the minor children or any claim to custody or visitation with the minor children.

b) The minor children have been involved in the following actions:

Court	Type of Action	Date Filed	Status

7.

Others with a Custody/Visitation Claim (Choose a or b)

a) I know of no other person, not a party to this proceeding, who has physical custody of the children or claims to have custody or visitation rights with respect to the minor children.

b) The following persons who are not a party to this proceeding have custody or visitation rights with the minor children:

<u>Name</u>	<u>Claim</u>
_____	_____
_____	_____
_____	_____
_____	_____

Affiant/Plaintiff

Sworn to and subscribed before me this _____ day
of _____, 20 _____.

Notary Public

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

ELECTION OF _____.

This Affidavit is given by _____ who, after being duly sworn before an officer authorized in the State of Georgia to administer oaths, states the following:

1.

My name is _____, and I am the son or daughter of _____ and _____. I was born on _____ and am currently _____ years old.

2.

I sign this Affidavit to inform the Court that I wish to live and elect to live with my mother/father/other _____ on a permanent and full-time basis. I understand that my mother/father/other _____ may ask the Court to be made my custodial parent and desire that he be designated as my custodial parent.

3.

I wish my _____ [non-custodial parent] to have reasonable visitation rights.

4.

I hereby affirm that I have given this Affidavit under oath and that the statements contained herein are true and accurate.

5.

I have made this election voluntarily and not because of any pressure or duress or because of any problems made known to me by either of my parents or any other person.

Affiant

Sworn to and subscribed before me this _____ day
of _____, 20 _____.

Notary Public

My Commission Expires: _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

MOTION FOR CUSTODY INVESTIGATION

COMES NOW the Plaintiff, _____, and respectfully requests the Court pursuant to O.C.G.A. § 19-9-4 to issue an Order referring the case for a custody investigation:

1.

There has been actual abuse, neglect, and/or other overt acts which have adversely affected the health and welfare of the child(ren). More specifically: _____

WHEREFORE, Plaintiff requests:

That the Court direct the appropriate family and children services agency or any other appropriate entity to investigate the home life and home environment of each of the parents in order to provide information which will be useful in determining placement or custody of the child(ren).

This _____ day of _____, 20 _____.

Plaintiff pro se

Address: _____

Telephone number(s): _____

Email Address: _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

CERTIFICATE OF SERVICE

I hereby certify that I have this day served the foregoing Motion for Custody Investigation upon the following counsel for party OR party by delivering or causing to be delivered by hand a copy of same as follows: _____

[Name and address of counsel of record, or of parties if no counsel of record.]

and upon the following counsel for party OR party by depositing or causing to be deposited a copy of same in the United States mail in an envelope with sufficient postage thereon addressed as follows:

[Name and address of counsel of record, or of parties if no counsel of record.]

This _____ day of _____, 20 _____.

Plaintiff *pro se*

Address: _____

Telephone number(s): _____

Email Address: _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

ORDER FOR CUSTODY INVESTIGATION

Upon the foregoing Complaint to Change Custody of Minor Children, it is HEREBY ORDERED that _____ investigate the matters concerning custody of _____, and furnish its report to this Court with regard to the issue of custody as soon as reasonably possible. The parties are directed and Ordered to cooperate with said investigation. Each party shall furnish to _____ the names of witnesses which are requested to be interviewed, providing also a copy of such witness list to opposing counsel.

SO ORDERED, this _____ day of _____, 20 _____.

JUDGE, Superior Courts
Southern Judicial Circuit

VISITATION SCHEDULE

The non-custodial parent is _____.
The custodial parent is _____.

The non-custodial parent shall be entitled to exercise reasonable visitation with the minor child with the following minimum provisions:

- (a) On every 1st, 3rd, and 5th Friday at 6:00 p.m. until the following Sunday at 6:00 p.m.;
- (b) During even numbered years (2008, 2010, etc.), the non-custodial parent shall have the right of visitation on the holidays delineated below:
 - 1. Martin Luther King’s Birthday
 - 2. Memorial Day
 - 3. Labor Day
 - 4. Thanksgiving
 - 5. Second week of Christmas Vacation from 2:00 p.m. on December 25 until New Year’s Eve.
- (c) During odd numbered years (2009, 2011, etc.), the non-custodial parent shall have the right of visitation on the holidays delineated below:
 - 1. New Year’s Day
 - 2. Easter or Spring Break
 - 3. July 4th
 - 4. Halloween
 - 5. First Week of Christmas vacation, including Christmas Day until 2:00 p.m. on December 25.
- (d) During even numbered years (2008, 2010, etc.), the custodial parent shall have the minor child on the holidays delineated below:
 - 1. New Year’s Day
 - 2. Easter or Spring Break
 - 3. July 4th
 - 4. Halloween
 - 5. First week of Christmas vacation, including Christmas Day until 2:00 p.m. on December 25.
- (e) During odd numbered years (2009, 2011, etc.), the custodial parent shall have the right of visitation on the holidays delineated below:
 - 1. Martin Luther King’s Birthday
 - 2. Memorial Day

3. Labor Day
4. Thanksgiving
5. Second week of Christmas vacation from 2:00 p.m. on December 25 until New Year's Eve.

- (f) The Mother shall have the minor child on Mother's Day.
- (g) The Father shall have the minor child on Father's Day.
- (h) The non-custodial parent shall have the right to visit with the minor child for two consecutive weeks in the summer between June 15 and August 15. During this period, the custodial parent shall have the minor child on the first (1st) weekend from 6:00 p.m. Friday until 6:00 p.m. Sunday. The non-custodial parent shall give the custodial parent a minimum of thirty (30) days written notice of the intent to exercise this visitation.
- (i) Holiday visitation shall take precedence over week-end visitation.

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

DOMESTIC RELATIONS FINANCIAL AFFIDAVIT OF PLAINTIFF

1. AFFIANT'S NAME: _____ Age _____

Spouse's Name: _____ Age _____

Date of Marriage: _____ Date of Separation _____

Names and birth dates of children for whom support is to be determined in this action:

_____	_____	_____
Name	Date of Birth	Resides with

Names and birth dates of affiant's other children:

_____	_____	_____
Name	Date of Birth	Resides with

2. SUMMARY OF AFFIANT'S INCOME AND NEEDS

(a) Gross monthly income (from item 3A) \$ _____

(b) Net monthly income (from item 3C) \$ _____

(c) Average monthly expenses (item 5A) \$ _____

Monthly payments to creditors + _____
Total monthly expenses and payments to credits (item 5C) \$ _____
(subsections (d) & (e) deleted)

3. A AFFIANT'S GROSS MONTHLY INCOME
(complete this section or attach Child Support Schedule A)
(All income must be entered based on monthly average regardless of date of receipt.)

Salary or Wage \$ _____
ATTACH COPIES OF 2 MOST RECENT WAGE STATEMENTS

Commissions, Fees, Tips \$ _____

Income from self-employment, partnership, close corporations,
and independent contracts (gross receipts minus ordinary and
necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Rental Income (gross receipts minus ordinary and
necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Bonuses \$ _____

Overtime Payments \$ _____

Severance Pay \$ _____

Recurring Income from Pensions or Retirement Plans \$ _____

Interest and Dividends \$ _____

Trust Income \$ _____

Income from Annuities \$ _____

Capital Gains \$ _____

Social Security Disability or Retirement Benefits \$ _____

Workers' Compensation Benefits \$ _____

Unemployment Benefits \$ _____

Judgments from Personal Injury or Other Civil Cases \$ _____

Gifts (cash or other gifts that can be converted to cash) \$ _____

Prizes/Lottery Winnings \$ _____

Alimony and maintenance from persons not in this case \$ _____

Assets which are used for support of family \$ _____

Fringe Benefits (if significantly reduce living expenses) \$ _____

Any other income (do NOT include means-tested
Public assistance, such as TANF or food stamps) \$ _____

GROSS MONTHLY INCOME \$ _____
(prior section B deleted)

3. B Affiant's Net Monthly Income from employment
(deducting only state and federal taxes and FICA) \$ _____

Affiant's pay period (i.e., weekly, monthly, etc.) _____

Number of exemptions claimed _____

4. ASSETS

(If you claim or agree that all or part of an asset is non-marital, indicate the non-marital portion under the appropriate spouse's column and state the amount and the basis: premarital, gift, inheritance, source of funds, etc.)

Description	Value	Separate Asset of the Husband	Separate Asset of the Wife	Basis of the Claim
Cash	\$ _____	_____	_____	_____
Stocks, bonds	\$ _____	_____	_____	_____
CD's/Money Market Accounts	\$ _____	_____	_____	_____
Bank Accounts (list each account):				
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____

Retirement Pensions,

401K, IRA, or Profit Sharing	\$ _____	_____	_____
Money owed you:	\$ _____	_____	_____
Tax Refund owed you:	\$ _____	_____	_____
Real Estate:			
home:	\$ _____	_____	_____
debt owed:	\$ _____		
other:	\$ _____	_____	_____
debt owed:	\$ _____		
Automobiles/Vehicles:			
Vehicle 1:	\$ _____	_____	_____
debt owed:	\$ _____		
Vehicle 2:	\$ _____	_____	_____
debt owed:	\$ _____		
Life Insurance (net cash value):	\$ _____	_____	_____
Furniture/furnishings:	\$ _____	_____	_____
Jewelry:	\$ _____	_____	_____
Collectibles:	\$ _____	_____	_____
Other Assets:	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
Total Assets:	\$ _____	_____	_____

5. A AVERAGE MONTHLY EXPENSES

HOUSEHOLD

Mortgage or rent payments	\$ _____	Cable TV	\$ _____
Property taxes	\$ _____	Misc. household and grocery items	\$ _____
Homeowner/Renter Insurance	\$ _____	Meals outside the home	\$ _____
Electricity	\$ _____	Other	\$ _____
Water	\$ _____	AUTOMOBILE	
Garbage and Sewer	\$ _____	Gasoline and Oil	\$ _____
Telephone:	\$ _____	Repairs	\$ _____
residential line:	\$ _____	Auto Tags and license	\$ _____
cellular telephone:	\$ _____	Insurance	\$ _____
Gas	\$ _____	OTHER VEHICLES	
Repairs and maintenance:	\$ _____	(boats, trailers, RVs, etc.)	
Lawn Care	\$ _____	Gasoline and oil	\$ _____
Pest Control	\$ _____	Repairs	\$ _____
		Tags and license	\$ _____
		Insurance	\$ _____

CHILDREN'S EXPENSES

Child care (<u>total monthly cost</u>)	\$ _____
School tuition	\$ _____
Tutoring	\$ _____
Private lessons (e.g., music, dance)	\$ _____
School supplies/expenses	\$ _____
Lunch Money	\$ _____
Other Educational Expenses (list)	
_____	\$ _____
_____	\$ _____
Allowance	\$ _____

AFFIANT'S OTHER EXPENSES

Dry cleaning/laundry	\$ _____
Clothing	\$ _____
Medical, dental, <u>prescription</u> (out of pocket/uncovered expenses)	\$ _____
Affiant's gifts (special holidays)	\$ _____
Entertainment	\$ _____
Recreational Expen. (e.g., <u>fitness</u>)	\$ _____
Vacations	\$ _____
Travel Expenses	\$ _____
Visitation	\$ _____
Publications	\$ _____
Dues, clubs	\$ _____

Clothing	\$ _____	Religious and charities \$ _____
Diapers	\$ _____	Pet expenses \$ _____
Medical, dental, prescription (out of pocket/uncovered expenses)	\$ _____	Alimony paid to former spouse \$ _____
Grooming, hygiene	\$ _____	Child support paid for other children \$ _____
Gifts from children to others	\$ _____	Date of initial Order: _____
Entertainment	\$ _____	Other (attach sheet) \$ _____
Activities (including extra-curricular, school, religious, cultural, etc.)	\$ _____	
Summer Camps	\$ _____	
OTHER INSURANCE		
Health	\$ _____	
Child(ren)'s portion:		\$ _____
Dental	\$ _____	
Child(ren)'s portion:		\$ _____
Vision	\$ _____	
Child(ren)'s portion:		\$ _____
Life	\$ _____	
Relationship of Beneficiary:		_____
Disability	\$ _____	
Other(specify):	\$ _____	
TOTAL ABOVE EXPENSES	\$ _____	

B. PAYMENTS TO CREDITORS
(please check one)

To Whom:	Balance Due	Monthly Payment	Joint	(please check one)	
				Plaintiff	Defendant
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

TOTAL MONTHLY PAYMENTS TO CREDITORS: \$ _____

C. TOTAL MONTHLY EXPENSE: \$ _____

This _____ day of _____, 20 _____.

Affiant

Notary Public

My Commission expires: _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____, §
Plaintiff,
v. § Civil Action
§ File No. _____
_____, §
Defendant. §

FINAL JUDGMENT AND DECREE
MODIFICATION OF CUSTODY

The original Order for custody, Civil Action File No. _____, which was issued on the _____ day of _____, 20 _____, is hereby modified as follows:

Legal Custody is awarded to: _____.

Physical Custody is awarded to: _____.

Visitation is awarded as follows: _____

Based on the evidence presented, including the Child Support Worksheet, Schedules “A” through “E,” incorporated by reference, and specifically the Child Support Worksheet and Schedule “E” attached hereto, and where applicable, Special Interrogatories also attached hereto, the Court finds as follows:

1. Children for whom support is being determined:

Child	Date of Birth

2. (a) For purposes of Calculating Child Support, the Court Orders that the Custodial Parent shall be _____.

(b) For purposes of Calculating Child Support the Court Orders that the Non-custodial Parent shall be _____.

(c) The Court finds that the amount of the Non-custodial Parent's parenting time as set forth in the Order of Visitation is _____ days.

3. (a) The Court finds as set on Schedule "A," the gross income of the father is \$ _____

(b) The Court finds as set on Schedule "A," the gross income of the Mother is \$ _____

4. (a) The Court finds as set on the "Child Support Worksheet" and Schedule "B" the Non-custodial Parent's Adjusted Income is \$ _____

(b) The Court finds as set on the "Child Support Worksheet" and Schedule "B," the Custodial Parent's Adjusted Income is \$ _____

(c) The Court finds as set on the "Child Support Worksheet" and Schedule "B," the Parties' Total Adjusted Income is \$ _____

5. The Court finds as set by the "Child Support Obligation Schedule Table" and as listed on the "Child Support Worksheet" the Basic Child Support Obligation is \$ _____

6. (a) The Court finds as set on the "Child Support Worksheet," the Basic Child Support Obligation for the Custodial Parent is: \$ _____ %

(b) The Court finds as set on the "Child Support Worksheet," the Basic Child Support Obligation for the Non-custodial Parent is: \$ _____ %

7. The Court finds that health insurance that provides for the health care needs of the child **is/is not** reasonably available at a reasonable cost. If provided, it will be provided by _____.

8. (a) The Court finds as set on the "Child Support Worksheet" and Schedule "D," the Presumptive Amount of Child Support for the Custodial Parent is \$ _____

(b) The Court finds as set on the "Child Support Worksheet" and Schedule "D," the Presumptive Amount of Child Support due to the Custodial Parent is \$ _____

(c) The Court finds as set on the "Child Support Worksheet" and Schedule "D," the Presumptive Amount of Child Support due to the Custodial Parent is \$_____

9. The Court finds that the child receives benefits under Title II of the Federal Social Security Act on the obligor's account and the amount the child receives on a monthly basis is \$_____

10. The Court has considered the existence of special circumstances and as set forth on the "Child Support Worksheet" and Schedule "E," has found the following special circumstances marked with an ["X"] to be present in this case.

Note: Refer to Schedule "E" and, where applicable, "Special Interrogatories" attached hereto for an explanation for the reasons for the deviation, how the application of the Presumptive Amount of Child Support would have been unjust and how the best interest of the child for whom support is being determined will be served by a deviation from the Presumptive Amount of Child Support.

- _____ A. High Income
- _____ B. Low Income
- _____ C. Other Health-Related Insurance
- _____ D. Life Insurance
- _____ E. Child and Dependent Care Tax Credit
- _____ F. Travel Expenses
- _____ G. Alimony
- _____ H. Mortgage
- _____ I. Permanent Plan or Foster Care Plan
- _____ J. Extraordinary Expenses
- _____ K. Parenting Time
- _____ L. Non-Specific Deviations (Other)

11. (a) The Court finds as set on the "Child Support Worksheet" the Final Amount of Child Support for the Custodial Parent is \$_____

(b) The Court finds as set on the "Child Support Worksheet" the Final Amount of Child Support for the Non-custodial Parent is \$_____

(c) The Court finds as set on the "Child Support Worksheet" the Final Amount of Child Support the Non-custodial Parent shall Pay the Custodial Parent is \$_____

12. (a) The Court finds as set on the "Child Support Worksheet" that the Custodial Parent's allocated Uninsured Health Care Expenses based on their pro rata responsibility is \$_____ %

(b) The Court finds as set on the "Child Support Worksheet" that the Non-custodial Parent's allocated Uninsured Health Care Expenses based on their pro rata responsibility is \$ _____ %

The Non-custodial parent, _____, shall pay Child Support for each of the _____ minor child(ren) at \$ _____ per month, for a total of \$ _____ per month to the Custodial parent, starting _____, and continuing until each minor child reaches the age of majority, dies, marries, becomes emancipated, whichever first occurs, provided however, the Court, in the exercise of its sound discretion, directs (or does not direct) the Non-custodial Parent to continue to pay child support for a Child who has not previously married or become emancipated, who is enrolled in and attending a secondary school, and who has attained the age of majority before completing his or her secondary school education, until that child graduates from high school, or until the child attains _____ years of age (not to exceed 20 years), whichever first occurs.

As each child becomes ineligible for child support, the total amount owed shall be reduced by \$ _____, which is _____%.

_____ shall be required to maintain a health insurance policy for the benefit of the minor children. Any health-care costs which are not covered by health insurance shall be divided as follows: _____

_____ shall furnish to _____ health insurance card(s) and the parties shall cooperate in filing health insurance claims.

Each party is hereby restrained and enjoined from molesting or harrassing the other party.

SO ORDERED, this _____ day of _____, 20_____.

JUDGE, Superior Courts
_____ Judicial Circuit

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____, §
Plaintiff, §
v. § Civil Action
§ File No. _____
_____, §
Defendant. §

INCOME DEDUCTION ORDER

The above-styled matter was heard by the Court on _____,
20 _____. The _____ was properly served and present and
represented by counsel. This Court having entered an Order requiring the _____
to pay child support to the _____, this Income Deduction Order
is entered pursuant to O.C.G.A. § 19-6- 32(a.1)(1).

☐ Defendant shall pay child support of \$ _____ ☐ weekly ☐ bi-weekly
☐ semi-monthly ☐ monthly with the next
payment due on _____, 20 _____.

☐ Defendant shall pay \$ _____ ☐ weekly ☐ bi-weekly ☐ semi-monthly
☐ monthly with the next payment due on _____, 20 _____.

☐ The total amount to be withheld is \$ _____ ☐ weekly ☐ bi-weekly
☐ semi-monthly ☐ monthly. This amount shall be made payable to
_____ forwarded within two (2) business days of
each payment date. Payments shall be made by cash, cashier's check, or money order,
personally or by mailing it to: _____.

The maximum amount to be deducted shall not exceed the amounts allowed under §
303(b) of the Consumer Credit Protection Act, 15 U. S. C. § 1673(b), as amended. This Order
applies to current and subsequent employers and periods of employment, and may only be
contested on the grounds of mistake of fact regarding the amount of support owed pursuant to a
support Order, the arrearage, or the identity of the obligor. The obligor shall notify the
_____ within seven (7) days of any change of address,
employer or employer's address. A copy of this Order shall be served on the obligor and the
employer.

☐ Other: _____

This Order shall become effective immediately upon signing and shall remain in full force and effect until modified, suspended, or terminated by Order of this Court.

SO ORDERED this _____ day of _____, 20____.

JUDGE, Superior Court

Judicial Circuit

Notice To: Employer or any other person, private entity, Federal or State Government, or any unit of local government providing or administering income due to Defendant.

Re: Income Deduction Order

DATE: _____

Attached you will find an Income Deduction Order. Please read this Order carefully and follow the instructions as written. If you have any questions you should contact your attorney. Employers are required by law to deduct from income due and payable an employee the amount designated by the Court to meet support obligations. Income includes wages, salary, bonuses, commissions, compensation as an independent contractor, workers' compensation, disability benefits, annuities and retirement benefits, pensions, dividends, royalties, or any other payment to an employee. **FAILURE TO DEDUCT THE AMOUNT DESIGNATED BY THE COURT MAKES THE EMPLOYER LIABLE FOR THE AMOUNT THAT SHOULD HAVE BEEN DEDUCTED, PLUS COSTS, INTEREST AND REASONABLE ATTORNEYS' FEES.**

Payments must begin no later than the first pay period after fourteen (14) days following the postmark of the notice. You are required to forward to the person or entity specified in the Income Deduction Order within two (2) days after each payment date the amount deducted from the employee's income and a statement as to whether the amount forwarded totally or partially satisfies the periodic amount specified in the Income Deduction Order.

This deduction has priority over all other legal processes under Georgia law pertaining to the same income and the payment required by the Income Deduction Order. It is a complete defense against any claims of the employee or the employee's creditors as to the sum paid.

Employers must continue to deduct the child support amount and send it to the person or entity specified in the Income Deduction Order until further notice by the Court or until the income is no longer provided to the employee. In the event the income is no longer provided, the employer is required to notify the person or entity specified in the Income Deduction Order immediately of such and to give the employee's last known address and to provide a name and address of any new employer of this employee if known. **FAILURE TO DO THIS WILL RESULT IN A CIVIL PENALTY BEING IMPOSED, NOT TO EXCEED \$250.00 FOR THE FIRST VIOLATION OR \$500.00 FOR A SUBSEQUENT VIOLATION.**

Employers may not discharge an employee by reason of the entry of an Income Deduction Order. If an employee is discharged because of this reason, **A FINE OF NOT MORE THAN \$250.00 FOR THE FIRST VIOLATION AND \$500.00 FOR A SUBSEQUENT VIOLATION WILL BE IMPOSED AGAINST THE EMPLOYER.**

Employers should contact their attorney if more than one Income Deduction Order is received against the same employee.

Employers may send a single payment if multiple employees have Income Deduction Orders to pay to the same depository provided the amount attributed to each employee is identified.

An employer may collect up to \$25.00 against the employee's income to reimburse for the administrative costs of the first income deduction and up to \$3.00 for each subsequent income deduction.