	E ID/NUMBER	
FAMILY COURT FIRST CIRCUIT		
MOTION AND D FOR POST-DEC		
(Full Name) V.	PLAINTIFF,	This document is prepared by [ ] Self-Represented □Plaintiff □ Defendant [ ] Attorney for □Plaintiff □ Defendant
		Name (and if applicable, Attorney No.)
( <b>[</b> ],    <b>b</b>  _, ,, , )		Address
(Full Name)	DEFENDANT.	City, State, Zip Code
		Telephone Number Fax Number
		E-Mail Address
Attachments:  Income and Expense S Asset and Debt Staten Child Support Guidelin Custody/Visitation Staten Continuation Sheet	nent nes Worksheet	
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FOR JEFS USERS:		

FOR JEFS USERS: Document Category: Motion Document Type: Motion For Post Decree Relief

DOCKET CODE: MPOR

I am the [ ]Plaintiff [ ]Defendant in this case. I am referred to as the Movant in this motion. My former spouse is referred to as the Respondent in this motion. Pursuant to Hawai'i Family Court Rule 10, I seek the following relief:

## A. MODIFICATION

**Note:** If modification of custody and/or visitation is requested, a Custody/Visitation Statement <u>must</u> be completed and attached. If modification of alimony, child support or other financial relief is requested, the Movant's completed *Income and Expense Statement* and *Asset and Debt Statement* <u>must</u> be attached and the appropriate box on the Scheduling Order <u>must</u> be checked off.

[ ]1. Legal custody, physical custody and/or visitation should be changed as follows:

A change in custody and/or visitation is appropriate because the circumstances of the subject child(ren) have changed since the last custody order and a change is in their best interest as follows:

[ ]2. Alimony should be modified as follows:

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A. MODIFICATION (continued)					
		A change in alimony is appropriate because since the last alimony order, the circumstances of the parties have materially changed as follows:			
[	] 3.	Child support should be modified as follows:			
		A change in child support is appropriate because since the last child support order, the circumstances of the parties and/or the subject child(ren) have materially changed as follows:			
[	]4.	Other modification of the prior orders is sought as follows:			
		The reason for such other modification is:			

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B. ENFORCEMENT							
[	] 1.	Respondent has failed to pay child support as required by the order(s) and/or decree filed on The arrearage to date totals \$					
[	] 2.	Respondent has failed to pay alimony as required by the order(s) and/or decree filed on The arrearage to date totals \$					
[	] 3.	3. Respondent has failed to make other payments as required by the order(s) and/or Decree filed onas follows:					
[	]4.	] 4. Respondent has otherwise not complied with the order(s) and/or decree filed onas follows:					
5. The enforcement relief I seek is:		cement relief I seek is:					
		[	]	a.	A determination of support arrearages.		
		[	]	b.	The entry of a judgment against the Respondent for arrearages and interest thereon at the statutory rate accruing as of the due date of each past due payment.		
		[	]	C.	An order requiring the Respondent to submit to an examination of judgment debtor under oath.		
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B. ENFORCEMENT (Continued)						
[ ] d.	An order requiring those third partie Respondent's finances to submit to	•				
[ ]e.	An order sequestering, garnishing, security in, specific property.	attaching, executing on, and/or creating				
[] f.	An order assigning and garnishing	the Respondent's income.				
[]g.	An order referring the question of c	riminal contempt to the appropriate agency.				
[]h.	An order finding the Respondent to	be in civil contempt.				
[ ] i.	Attorney's fees and/or legal expense	Ses.				
[ ] j.	Other:					
	to is true, correct, and complete to the	ne information in this motion and all of the ne best of my knowledge and belief.				
DATE	(City) (State)	, (Date)				
		Movant's Signature				
		Printed Name				
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If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as far in advance as possible to allow time to provide an accommodation: Call the ADA Coordinator of the First Circuit Family Court Office at (808)954-8200, fax (808)954-8308, or send an e-mail to adarequest@courts.hawaii.gov. The ADA Coordinator will work to provide, but cannot guarantee your requested auxiliary aid, service, or accommodation.

Please call the Family Court Service Center at (808)954-8290 if you have any questions about forms or procedures.