

<p>STATE OF HAWAI‘I FAMILY COURT OF THE FIRST CIRCUIT</p>		
<p>This document is prepared by <input type="checkbox"/> Self-Represented <input type="checkbox"/> Petitioner/Plaintiff <input type="checkbox"/> Respondent/Defendant <input type="checkbox"/> Attorney for <input type="checkbox"/> Petitioner/Plaintiff <input type="checkbox"/> Respondent/Defendant</p> <p>_____</p> <p>Name (and if applicable, Attorney No.)</p> <p>_____</p> <p>Address</p> <p>_____</p> <p>City, State, Zip Code</p> <p>_____</p> <p>Telephone Number</p> <p>_____</p> <p>E-Mail Address</p>		
<p>CASE NAME</p>	<p>CASE ID/NUMBER</p>	
<p>TITLE OF DOCUMENT</p>		

FAMILY COURT FIRST JUDICIAL CIRCUIT STATE OF HAWAI'I	ORDER REGARDING MOTION TO MODIFY CHILD SUPPORT	CASE NUMBER FC- ____ NO. _____
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CHILD SUPPORT ENFORCEMENT AGENCY,
 STATE OF HAWAI'I, and

 MOTHER FATHER

PETITIONER(S)/
 PLAINTIFF(S),

 vs.

MOTHER FATHER CARETAKER

 MOTHER FATHER CARETAKER

 and CHILD SUPPORT ENFORCEMENT
 AGENCY, STATE OF HAWAI'I,

DEFENDANT(S).

This document was prepared by:

Petitioner/Plaintiff
 Defendant, _____
 Attorney for Petitioner/Plaintiff Defendant

Name _____

Address _____

City, State, Zip Code _____

Telephone Number _____

Motion Filed On:	Presiding Judge:	Date of Hearing:
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The parties, without a hearing, STIPULATE/AGREE to the following:
 The case came on for hearing, and the following parties were present at the hearing:
 Mother Attorney for Mother _____
 Father Attorney for Father _____
 Attorney for CSEA _____ Other _____
 Although duly notified, _____ failed to appear and the hearing proceeded by default.

(Name)

CHILDREN: This order applies to the following child(ren):

<u>NAME (First and Last)</u>	<u>SEX</u>	<u>DATE OF BIRTH</u>
1. _____	<input type="checkbox"/> M <input type="checkbox"/> F	_____
2. _____	<input type="checkbox"/> M <input type="checkbox"/> F	_____
3. _____	<input type="checkbox"/> M <input type="checkbox"/> F	_____
4. _____	<input type="checkbox"/> M <input type="checkbox"/> F	_____

Based upon the representations of the parties and the legal record, **IT IS HEREBY ORDERED** that the Motion be:

granted denied granted/denied in part.

1. **CURRENT CHILD SUPPORT:** Father Mother shall pay child support in the amount of \$ _____ per child, per month, for a total of \$ _____ per month, starting from _____ and continuing until the subject child(ren) become(s) 18 years old or until age 23, so long as said child(ren) is/are still in high school or enrolled full-time in an accredited educational or vocational institution, or until further order of the Court. The parent making the payments is called the "Payor Parent."

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2. Father's Mother's current child support obligation for (write child(ren)'s name(s)) _____ shall be **SUSPENDED** as of _____

3. Father's Mother's current child support obligation for (write child(ren)'s name(s)) _____ shall be **TERMINATED** as of _____

4. The issue regarding current child support obligation for (write child(ren)'s name(s)) _____ shall be **RESERVED** as of _____

5. This child support order is **TEMPORARY** until further order of the Court.

6. **PAST CHILD SUPPORT:**

6a. **OWING TO THE MOTHER/FATHER:** Judgment shall enter against Father Mother for the sum of \$ _____ for past child support owing to Father Mother for the period(s) _____ through _____. Father Mother shall pay the sum of \$ _____ each and every month commencing _____ until the judgment is fully paid.

6b. **OWED TO THE DEPARTMENT OF HUMAN SERVICES (DHS):**

Judgment shall enter against Father for the sum of \$ _____ for past child support owing to the Department of Human Services (hereinafter "DHS") for the period(s) _____ through _____. In addition to any current child support ordered, Father shall pay the sum of \$ _____ each and every month commencing _____ until the judgment is fully paid.

Judgment shall enter against Mother for the sum of \$ _____ for past child support owing to the Department of Human Services (hereinafter "DHS") for the period(s) _____ through _____. In addition to any current child support ordered, Mother shall pay the sum of \$ _____ each and every month commencing _____ until the judgment is fully paid.

6c. The issue regarding past child support owed by one parent to the other is **RESERVED**.

7. **MEDICAL INSURANCE:**

7a Father Mother shall provide medical health insurance coverage for the subject child(ren) and shall provide the other parent with proof of coverage within 30 days of the date of this hearing, if not already provided.

7b Father Mother does not have the present financial capacity of providing medical health insurance coverage for subject child(ren) and is hereby ordered to provide such coverage for said child when it becomes available through that parent's employer or union.

7c The issue regarding medical insurance coverage is **RESERVED**.

8 **FURTHER ORDERS:** _____

9. **PAYMENTS:** All payments are deemed as child support in accordance with the laws of the State of Hawai‘i. All payments ordered herein shall be made payable to and mailed to: **CHILD SUPPORT ENFORCEMENT AGENCY, Lock Box , P.O. Box 1860, Honolulu, Hawai‘i 96805-1860.**
10. **METHOD OF PAYMENT:** All payments for child support shall be made by way of an Order/Notice to Withhold Income for Child Support which shall be served on Payor Parent’s current employer as well as any successor employer.
11. **DIRECT PAYMENT:** Payor Parent shall make support payments, as ordered, directly to the Child Support Enforcement Agency (CSEA) until the Order to Withhold Income for Child Support commences. If for any reason, the withholding of income stops, the Payor Parent must resume payments to the CSEA as long as there is a continuing child support obligation. All payments made to the CSEA by the Payor Parent, shall be made with a money order, cashier’s check or certified check payable to “Child Support Enforcement Agency” and mailed to the address reflected in Paragraph 9 above.
12. **COLLECTION OF SUPPORT, ARREARS OR DEBTS:** In addition to any payment plan to liquidate the amounts owed as ordered in the above-entitled action or related administrative proceeding, CSEA is authorized to collect current support and/or the full amount of any support arrears or support debt through State and Federal tax refund interception, seizure of property, withholding of income, unemployment insurance benefits, worker’s compensation and retirement benefits, or any other lawful means of collection. CSEA’s collection efforts will continue until the support, arrears or debt is paid in full. Information relating to the support, arrears or debt may be disclosed to consumer credit reporting agencies.
13. **NOTIFICATION TO CSEA:** Parties shall notify CSEA, in writing at the address reflected in Paragraph 9, of any change in employment and /or residence address or telephone number, within 10 (ten) days of such change.

DATE	JUDGE’S SIGNATURE
_____ Mother’s Signature	_____ Father’s Signature
_____ Mother’s Name Printed	_____ Father’s Name Printed
_____ Mother’s Address	_____ Father’s Address
_____ City, State, Zip Code	_____ City, State, Zip Code
_____ Mother’s Social Security Number	_____ Father’s Social Security Number
_____ Mother’s Employer’s Name	_____ Father’s Employer’s Name
_____ Mother’s Employer’s Address	_____ Father’s Employer’s Address
_____ City, State, Zip Code	_____ City, State, Zip Code
_____ Signature of Mother’s Attorney	_____ Signature of Father’s Attorney
_____ Name of Attorney for Mother (Print)	_____ Name of Attorney for Father (Print)
_____ Signature of CSEA Attorney	_____ Other