| (Name, Address and Phone Number) Petitioner Pro Se | | |
|--|--|--|
| IN THE FAMILY COURT O | F THE SECOND CIRCUIT | |
| STATE OF | F HAWAI`I | |
|) | FCNO | |
| Petitioner(s),) vs.) | ORDER RE: CUSTODY ORDER RE: CUSTODY OVISITATION, SUPPORT AFTER OVIDENTARY ESTABLISHMENT OF PATERNITY | |
| and) CHILD SUPPORT ENFORCEMENT) AGENCY, STATE OF HAWAI'I, Respondents.) | Hearing Date: Hearing Time: Judge: | |
| ORDER RE: CUSTODY, AFTER VOLUNTARY ESTAE | | |
| ☐ The parties appeared at court at the date order without a court hearing. | and time listed above and stipulated to an | |
| $\hfill\Box$ The case came on for hearing, and the fol | llowing parties were present: | |
| □ Petitioner | | |
| □ Mother □ Father □ Caret | aker | |
| ☐ Respondent☐ Mother☐ Father☐ Caretaker | | |
| □ Respondent | ano. | |
| ☐ Mother ☐ Father ☐ Caret | aker | |

General:

Child Support Enforcement Agency (hereafter CSEA) by Deputy Attorney

| | | | , Attorney for Mother | | | |
|-----------------------------|---|---|---|----------|--|--|
| | | | , Attorney for Father | | | |
| | □ Ot | ner: | | | | |
| | | HOUGH DULY NOTIFIED, THE FOLLOWING PARTIES FAILED TO EAR AND THE HEARING PROCEEDED BY DEFAULT: | | | | |
| | | notified, from attending the hearing. | did not appear but s/h | ne was | | |
| | The subject child(ren) of this action is/are: | | | | | |
| Date of Place | e: Male Male of Birth: of Birth: ent of: | Female | Name: Sex: □ Male □ Female Date of Birth: Place of Birth: Resident of: | | | |
| (If add | litional child | ren, attach separate sheet.) | | | | |
| | | A PREPONDERANCE OF TH D DECREED AS FOLLOWS: | E EVIDENCE, IT IS HEREBY O | RDERED, | | |
| PATE | <u>RNITY</u> : Fa | ther is the legal and natural fa | ather of the above named child(r | en). | | |
| recom | nmends tha nild(ren) ref | at the Department of Health parties that the department of Health parties at the section at the natural father as the section of the section | ections 338-21 and 584-23, the 0 repare a new Certificate of Life E ne legal and natural father. nall be changed to: | | | |
| | | 's name sł | nall be changed to: | | | |
| (first) (middl (last) | le) | | | | | |
| (If add | litional child | ren, attach separate sheet.) | | | | |
| The n | atural Fath | er's birth date is | | | | |
| His pla | ace of birth | n was | (city). | (state). | | |

| His et | hnic background: |
|--------|--|
| Prote | TODY AND VISITATION: Custody and visitation rights established in Child ctive Act (HRS Ch. 587) proceedings and in future Domestic Abuse Protective s (HRS Ch. 586) shall supersede the custody and visitation rights established in order. |
| | □ Legal Custody of the child(ren) is granted to: □ Mother. □ Father. □ Mother and Father, jointly. □ Caretaker. □ The issue of legal custody should be reserved for a court of competent jurisdiction. |
| | □ Physical Custody of the child(ren) is granted to: □ Mother. □ Father. □ Mother and Father, jointly. □ Caretaker. □ The issue of physical custody should be reserved for a court of competent jurisdiction. |
| The N | Ion-custodial parent is awarded visitation as follows: Visitation/Time Sharing schedule shall be as follows (attach separate sheet if necessary): |
| | Reasonable visitation as mutually agreed upon by the parties. Supervised visitation at The Non-custodial parent shall have supervised visitation at subject to availability. The telephone number is It is the visiting parent's responsibility to contact and arrange the visitation with |
| | ☐ Mother ☐ Father ☐ Caretaker shall be responsible for the costs of the visitation services. Supervised visitation with third party. The Non-custodial parent shall have supervised visitation in the presence of the following adult(s) only: |
| | There shall be no visitation until further order of the Family Court. The issue of visitation is reserved for a court of competent jurisdiction. |

| <u>CHILI</u> | <u>D SUPPORT</u> : | | | | |
|--------------|--|--|--|--|--|
| | Beginning (month), 20, the Non-custodial parent shall | | | | |
| | pay for the support of the parties' child(ren) \$ per child, for a total of | | | | |
| | \$ per month. | | | | |
| | Child support is reserved for a court of competent jurisdiction. | | | | |
| | Payments of child support shall continue for each child until the child attains the | | | | |
| | age of eighteen years, or graduates from high school, or discontinues high | | | | |
| | school, whichever occurs last. Child support shall further continue uninterrupted | | | | |
| | (including during regular school vacation periods) until the age of 23 as long as the child continues his or her education post-high school on a full-time basis at | | | | |
| | an accredited college or university or in a vocational or trade school. | | | | |
| | The CSEA is made a party for the limited issue of child support. | | | | |
| | The GGE/Clo made a party for the inflited issue of shind support. | | | | |
| PAST | CHILD SUPPORT: | | | | |
| | Judgment shall enter against the Non-custodial parent for the sum of \$ | | | | |
| | for past child support owing to Department of Human Services (hereafter DHS) | | | | |
| | for the period(s),through, | | | | |
| | ☐ The Non-custodial parent shall pay the sum of \$ each and every | | | | |
| | month commencing, 20, until the judgment is fully paid. | | | | |
| | Judgment shall enter against the Non-custodial parent for the sum of \$ | | | | |
| | for past child support owing to the Custodial parent for the period(s), | | | | |
| | through,, ☐ The Non-custodial parent shall pay the sum of \$ each and every month | | | | |
| | commencing, 20, until the judgment is fully paid. | | | | |
| | The issue regarding past child support is reserved. | | | | |
| | The issue regulating past office support is reserved. | | | | |
| BIRTH | H RELATED MEDICAL AND HOSPITAL EXPENSES: | | | | |
| | Judgment shall enter against Father for the sum of \$ for | | | | |
| | reimbursement of said expenses owing to \square DHS \square Mother. | | | | |
| | Father shall pay the sum of \$ each and every month commencing | | | | |
| | , 20 until said expenses have been fully | | | | |
| | reimbursed. | | | | |
| | The issue regarding reimbursement of birth related medical and hospital | | | | |
| | expenses is reserved. | | | | |
| DAVI | MENTS: (solost one method only) | | | | |
| | <u>IENTS</u> : (select <u>one</u> method only) <u>Through CSEA</u> . All payments shall be made payable to and through the Child | | | | |
| | Support Enforcement Agency (CSEA), P.O. Box 1860, Honolulu, Hawai'i 96805- | | | | |
| | 1860, and pursuant to the Order for Income Withholding which shall be filed with | | | | |
| | this decree. | | | | |

When the income withholding is not in effect, Non-custodial Parents shall make payments to CSEA as ordered above until the income withholding is effected, or at any time said withholding ends and support obligation continues. All payments made by the Non-custodial Parent not made by way of income withholdings shall be made by money order, cashier's check or certified check payable to Child Support Enforcement Agency and mailed to the address listed above.

<u>COLLECTION OF SUPPORT, ARREARS OR DEBTS:</u> CSEA can collect 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.

<u>NOTIFICATION TO CSEA</u>: Parties shall notify CSEA in writing at the above address of any change in employment and/or residence address within 10 days of such change.

Direct Payment of Child Support. (This option is not available if the children have ever received any government assistance, if the children are on Quest, or if either parent has outstanding debts to the Department of Human Services or to any other public assistance agency).

All payments shall be made directly from the Non-custodial Parent to the Custodial Parent. In all direct payment cases, either parent may void the direct payment arrangement at any time and apply for services from the CSEA to receive payments through the agency. If the child(ren) of the parties receive(s) public assistance from the Department of Human Services, foster care payments or Social Security or if either parent applies to the CSEA, CSEA may immediately void direct payment arrangement by sending notice by regular mail to both parents at their last known addresses as set forth in this Order.

All payments are deemed child support in accordance with the laws of the State of Hawai'i.

MEDICAL INSURANCE:

| INIEDI(| <u>CAL INSURANCE</u> . |
|---------|--|
| | ☐ Father ☐ Mother will provide medical health insurance coverage for subject |
| | child(ren) and will provide the other parent and CSEA proof of coverage within 30 days of the date of this hearing, if not already provided. |
| | □ 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(ren) when it becomes available through his/her employer or union, as long as it does not reduce his/her ability to pay child support. |
| | Both parents are equally responsible for all unreimbursed extraordinary medical and dental expenses of said child (ren) |

| OTHE | ER PROVISIONS: | | | | |
|--------|-----------------------------------|--|---------------------------|--|---------------------|
| | | | | en) with all available eof to the other pare | |
| | Except as amend force and effect. | led herein, all ex | sisting orders | s of this Court shall | remain in full |
| | future hearing/triatime Mother | al on □ Father □ Cal xpense Stateme ts for the last thr | retaker shallent and Asse | | m. □ at which g: |
| | FURTHER ORDE | ERS: | | | · |
| | DATED: Wailuku | , Maui, Hawai`i, | | | |
| | | | JUDGE C | F THE ABOVE-EN | TITLED COURT |
| APPI | ROVED AS TO FORI | M AND CONTEN | T: | | |
| Fath | er | Date | M | other | Date |
| ——Atto | orney for Father | Date | $\frac{1}{A}$ | ttorney for Mother | Date |