

# ATTENTION

PLEASE READ ALL FORMS AND INSTRUCTIONS VERY CAREFULLY. WE ARE NOT ATTORNEY'S AND WE CAN NOT AND WILL NOT PROVIDE YOU WITH ANY LEGAL ASSISTANCE OR ANSWER ANY QUESTIONS. WE WILL ONLY PROVIDE THE FORMS TO YOU AS A COURTESY AND IF YOU PROCEED IN PRO-SE FORM YOU ARE ACTING AS YOUR OWN ATTORNEY. IF YOU DO NOT UNDERSTAND OR NEED HELP YOU MUST CONSULT AN ATTORNEY. PLEASE UNDERSTAND THAT THIS MAY NOT BE ALL YOU NEED AND A JUDGE MAY REQUIRE OTHER DOCUMENTATION OR REQUIREMENTS BEFORE AN ORDER CAN BE GRANTED. YOU CAN GO TO [WWW.GEORGIALEGALAID.COM](http://WWW.GEORGIALEGALAID.COM) FOR FURTHER ASSISTANCE IF NEEDED.

FILING A CIVIL CASE IS \$210.00 CASH W/OUT SERVICE AND IF YOU HAVE TO SERVE THE OTHER PARTY IT IS \$260.00. IF YOU HAVE TO RUN A PUBLICICATION IN THE NEWS PAPER THAT IS AN ADDITIONAL COST THAT MUST BE PAID TO THE ROME NEWS TRIBUNE AND YOU MUST DISCUSS THE PUBLICATION FEE WITH THEM.

BARBARA PENSON  
CLERK OF COURT

## LEGITIMATION PACKET

### FAQ

#### **Why should children be legitimated?**

The law encourages the fathers of children to legally recognize them. The legitimization process is a way for them to do this. It gives the father and the child certain rights. Legitimization means that a child may inherit from the father and the father may inherit from the child.

#### **How may a child born out of wedlock be legitimated?**

There are three ways to legitimate a child. The first way is for the mother and the reputed father to marry and for the father to then recognize the child as his.

The second way is for the mother and father to sign a voluntary acknowledgement of paternity. According to O.C.G.A. § 19-7-22(g)(2), "In any voluntary acknowledgment of paternity which has been made and has not been rescinded pursuant to Code Section 19-7-46.1, when both the mother and father freely agree and consent, the child may be legitimated by the inclusion of a statement indicating a voluntary acknowledgment of legitimation.." For more information on how to sign a voluntary acknowledgement of paternity or call the Georgia Paternity Acknowledgement program at 1-866-296-8262.

The third way to legitimate a child is for the father to file a legitimization petition in Superior Court.

#### **How do I get a certified copy of my child's signed voluntary acknowledgement of paternity?**

Write to the Georgia Department of Vital Records at 2600 Skyland Dr. NE, Atlanta, GA 30319. The following items must be included with your request:

1. Full name of person shown on the birth certificate (last name at birth if female)
2. Date of Birth (month, day, year)
3. Place of Birth (city, county),
4. Current age
5. Sex
6. Race (optional)
7. Full name of mother (include mother's maiden last name)
8. Full name of father

9. Relationship to the person named on the birth certificate requested
10. The number of certified copies requested
11. A copy of the birth certificate
12. A photocopy of the requestor's driver's license
13. A money order in the amount of \$10 per certified copy requested.

**How does a man go about filing for legitimization in the superior or state court?**

The first step is for the father to file a petition in "the county of the residence of the child's mother or other party having legal custody or guardianship of the child; provided, however, that if the mother or other party having legal custody or guardianship of the child resides outside the state or cannot, after due diligence, be found within the state, the petition may be filed in the county of the father's residence or the county of the child's residence. If a petition for the adoption of the child is pending, the father shall file the petition for legitimization in the county in which the adoption petition is filed." (OCGA 19-7-22). The mother of the child must be named as a party, served with a copy of the petition, and given an opportunity to be heard.

The father has no absolute right to legitimate a child. The Court will consider the best interest of the minor in determining whether the legitimization should be awarded. Sometimes a Court will deny a legitimization petition if the Court believes that it has been filed to harass or interfere with the life of the mother.

**What effect does a legitimization have?**

The Court will pass an order declaring the child legitimate and capable of inheriting from the father just as if the child had been born during a marriage.

At the time of the legitimization, the Judge will determine the duty of the father to support the child. Additionally, the Court may order visitation and/or custody based on the best interests of the child. The Court may also change the child's name to that of the father but the Court has wide discretion as to whether or not it will do so.

**When the father files for legitimization, may he also ask for custody?**

Until July 1, 2005, the father could only get custody in a legitimization action if the mother consented. The Georgia Legislature changed O.C.G.A. § 19-7-22 effective July 1, 2005 to allow a father to ask for custody in a legitimization suit.

**What if paternity has been established—isn't that enough for legitimization?**

No, a finding in a paternity action that a person is the father of a child is not a legitimization. Paternity establishes the identity of the biological father and it establishes the father's duty to support the child. After July 1, 2005, it can also establish custody.

O.C.G.A. § 19-7-22 provides that the petition for legitimization may be brought in “the county of the residence of the child’s mother or other party having legal custody or guardianship of the child; provided, however, that if the mother or other party having legal custody or guardianship of the child resides outside the state or cannot, after due diligence, be found within the state, the petition may be filed in the county of the father’s residence or the county of the child’s residence. If a petition for the adoption of the child is pending, the father shall file the petition for legitimization in the county in which the adoption petition is filed.”

O.C.G.A. § 19-7-40(a) gives the superior and state courts concurrent jurisdiction in all proceedings for the determination of paternity of children who are Georgia residents.

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_)  
\_\_\_\_\_)  
Plaintiff, \_\_\_\_\_) )  
\_\_\_\_\_) )  
v. \_\_\_\_\_) )  
\_\_\_\_\_) ) Civil Action File No. \_\_\_\_\_  
Defendant \_\_\_\_\_) )  
\_\_\_\_\_) )  
\_\_\_\_\_)

**PETITION FOR LEGITIMATION, CUSTODY, AND/OR VISITATION**

Plaintiff files this Petition and shows the following:

1.

**Plaintiff's Residence**

Plaintiff is a resident of \_\_\_\_\_ County, Georgia.

2.

**Information about child(ren)**

Plaintiff is the father of the following child(ren):

<b>Name</b>	<b>Date of Birth</b>	<b>Place of Birth</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3.

**Jurisdiction and Venue (Choose only one: a, b, c, or d)**

a) The mother of said child(ren) is \_\_\_\_\_, who now resides in \_\_\_\_\_ County, Georgia, and is subject to the jurisdiction of this Court.

b) The child(ren)'s \_\_\_\_\_ (relationship), whose name is \_\_\_\_\_ has  custody/

guardianship of the child(ren).  He/  She lives in \_\_\_\_\_  
County, Georgia.

c) The mother or other party having custody or guardianship,  
\_\_\_\_\_ (state name  
and relationship to the child) resides outside the state of Georgia and cannot, after due  
diligence, be found within the state.

d) A petition for adoption for the child(ren) is pending in  
\_\_\_\_\_ County, Georgia. Therefore, venue is proper in that  
county.

4.

#### **Service of Process (Choose a, b or c)**

a) The mother or other legal custodian or guardian has signed an  
Acknowledgment of Service form.

b) The mother or other legal custodian or guardian has signed the  
Defendant's Acknowledgment of Service, Affidavit of Waiver of Venue and Personal  
Jurisdiction.

c) The mother or other legal custodian or guardian may be personally served  
at his/her work/residence address of \_\_\_\_\_

d) While the mother or other legal custodian or guardian resides in Georgia,  
his or whereabouts of the mother are unknown and s/he must be served by publication as  
provided by O.C.G.A. § 9-11-4(f)(1)(A).

e) The mother or other legal custodian or guardian reside outside the state of  
Georgia. However, his or her whereabouts are unknown and s/he must be served by  
publication as provided by O.C.G.A. § 9-11-4(f)(1)(A).

5.

#### **Mother's Consent (Choose a , b, c, d, or e)**

a) The mother of said child(ren) has consented in writing to the legitimation  
of said child (ren) and to the  legal and/or  physical custody being awarded to the  
Plaintiff. Her consent is attached hereto as Exhibit "\_\_\_\_\_."

b) The mother of said child(ren) has consented in writing to the legitimation  
of said child(ren) and to visitation by the Plaintiff

c) The mother of said child(ren) is deceased, having died on \_\_\_\_\_.  
A copy of her death certificate is attached hereto as Exhibit "\_\_\_\_\_."

d) There is no other legal parent of the child(ren), and the child(ren) have no  
legal guardian.

e) The mother of said child(ren) is opposing the legitimation of said  
child(ren).

6.

**Plaintiff's desire to legitimate child(ren) and change surname(s)**

This Petition is brought pursuant to O.C.G.A. § 19-7-22 to legitimate said child(ren) and to change his/her/their surname(s) from \_\_\_\_\_ to \_\_\_\_\_.

7.

**Current Custody Arrangement (Choose a or b)**

a) The Defendant, \_\_\_\_\_, presently has legal custody of the minor child(ren). They have lived with him/her since \_\_\_\_\_ (date).

b) The  legal custodian/  legal guardian of the minor child(ren) is \_\_\_\_\_ (name), who is related to the children as follows:

\_\_\_\_\_  
The legal custodian, \_\_\_\_\_, has the following type of legal custody or guardianship:

\_\_\_\_\_  
(temporary guardianship, permanent guardianship, permanent custody, etc.). S/he has had this legal custody or guardianship since \_\_\_\_\_ (date).

8.

**Future Custody Arrangement**

It is in the best interest(s) of the child(ren) for the custody to be as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9.

**Visitation (Choose a or b)**

a) It is in the best interest(s) of the child(ren) that the following visitation schedule be established:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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b) It is in the best interest(s) of the child(ren) that the visitation schedule in the forms packet on page thirty (30) be adopted.

WHEREFORE, Plaintiff demands the following:

- (a) That the name of said child be changed from \_\_\_\_\_ to \_\_\_\_\_;
- (b) That said child be legitimized by (his) (her) new name as the legitimate (son) (daughter) of petitioner;
- (c) That the petitioner be granted visitation rights;
- (d) That the petitioner be awarded custody as follows: \_\_\_\_\_

(c) If necessary, rule nisi issue directing the said \_\_\_\_\_ to appear before the Court to show cause why the relief demanded by this petition should not be granted.

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Plaintiff *pro se*

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_



IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_)  
Plaintiff, )  
v. )  
\_\_\_\_\_) Civil Action File No. \_\_\_\_\_  
Defendant )  
)  
)  
)

**VERIFICATION**

Personally appeared before the undersigned officer, duly authorized to administer oaths in the state of Georgia, \_\_\_\_\_, who after being duly sworn, deposes and states that s/he is the Plaintiff in the above-styled action and verifies that the facts contained in the within and foregoing Petition for Legitimization are true and correct to the best of her information, knowledge, and belief.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Plaintiff *pro se*

Sworn 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 No. _____
	)	
	)	
_____	)	
	)	
Defendant.	)	

**PLAINTIFF'S AFFIDAVIT REQUIRED BY O.C.G.A. § 19-7-43(d)**

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 to legitimate the following child(ren) who were born to the affiant and to \_\_\_\_\_:

Name	Date of Birth	Place of Birth

2.

The present address of the Plaintiff is \_\_\_\_\_.

3.

The present address of the Defendant is \_\_\_\_\_.

4.

I attest that the defendant and I had sexual intercourse at or about the time of the child(ren)'s conception, which would have been approximately the following dates:

\_\_\_\_\_ ; \_\_\_\_\_ ; \_\_\_\_\_ ; \_\_\_\_\_.

5.

I attest that I was the sole sexual partner of the Defendant at the time her child(ren), \_\_\_\_\_, was/were conceived.

6.

I attest that based upon my knowledge and belief, as well as the defendant's statements to me that I was the defendant's sole sexual partner.

7.

I attest that the Defendant has admitted to me that her child(ren), \_\_\_\_\_ is /are my biological child(ren), and the product of our sexual intercourse during our relationship.

8.

I attest that our child(ren), \_\_\_\_\_ currently reside(s) at \_\_\_\_\_ (address).

9.

I attest that the minor child(ren), \_\_\_\_\_ is/are my biological child(ren).

\_\_\_\_\_  
Affiant/Plaintiff/Father  
Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_,  
Plaintiff,  
v.  
\_\_\_\_\_,  
Defendant  
)  
)  
)  
)  
) Civil Action File No. \_\_\_\_\_  
)  
)  
)  
)

**ACKNOWLEDGMENT OF SERVICE AND CONSENT TO LEGITIMATION**

1.

**Acknowledgement of Service**

\_\_\_\_\_, the natural mother of \_\_\_\_\_, hereby acknowledges that she has received a copy of the foregoing Petition to Legitimate the said \_\_\_\_\_ and to change his/her name from \_\_\_\_\_ to \_\_\_\_\_, and she hereby waives any and all further service or notice of any nature in this proceeding.

2.

**Consent to legitimation and change of name**

The mother hereby consents to the judicial legitimization of \_\_\_\_\_ and the change of his/her/their surname(s) from \_\_\_\_\_ to \_\_\_\_\_.

**Non-interference with affection toward either parent**

3.

The parties agree that the welfare of the child(ren) is of paramount importance and each agrees to foster and encourage a feeling of affection between themselves and the child(ren). Neither party shall do anything to hamper the natural development of the children's love and respect for the other party.

4.

**Custody (Check a, b, or c)**

a) The  Father/  Mother shall have the temporary and permanent legal and physical custody of the minor child (ren).

b) The Father and Mother shall share joint legal custody of the minor child(ren). The parties shall share decision-making concerning the children; however, the  Father/  Mother shall have the right to make the final decision in the event the parties cannot agree.

Primary physical custody of the minor child (ren) shall be with the  Father/  
Mother as follows:

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Secondary physical custody shall be with the  Father/  Mother as follows:

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c) The Father and Mother shall share joint legal custody and joint physical custody of the minor child (ren).

Physical custody shall be shared by the parties as follows:

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The parties shall share decision making concerning the child (ren); however, in the event the parties cannot decide, the  Father/  Mother shall have the final decision concerning

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5.

**Visitation (Choose a or b)**

a) The  Father/  Mother shall have the right of visitation with the minor children as follows:

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[OR]

- b) The visitation schedule is attached hereto and incorporated herein.

**Child Support**

**Please go to <http://www.georgiacourts.org/csc/> and complete the Child Support Worksheet. Your papers will NOT be accepted for filing unless you complete and attach the Child Support Worksheet.**

6.

- The  Father/ Mother shall pay to the  Father/ Mother, 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 child support obligation shall be reduced as follows as each child becomes emancipated:

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

6.

**Manner of Payment of Child Support (Check a or b)**

- a) All payments of child support shall be paid directly to the  Father/ Mother at the following address:

---

No Income Deduction Order will be entered into at this time. However, when ever, in violation of the terms of this Agreement, there shall have been a failure to make the support payments due hereunder so that the amount unpaid is equal to or greater than the amount payable for one (1) month, the payments required to be made may be collected by

the process of continuing garnishment for support. In the event  Father/  Mother fails to pay any child support obligation in this Agreement on a timely fashion on any three (3) occasions in any twelve (12) month period, the parties agree that an income deduction order shall then be entered.

b) All payments of child support shall be paid to Georgia Child Support Enforcement pursuant to an Income Deduction Order.

7.

**Health Insurance**

The  Father/  Mother shall 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. Costs not covered under the insurance policy shall be divided between Father and Mother as follows:

\_\_\_\_\_  
\_\_\_\_\_

The  Father/  Mother shall provide the  Husband/  Wife with an insurance identification card or such other acceptable proof of insurance coverage and shall cooperate with the  Husband/  Wife in submitting claims under the policy.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
MOTHER

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
FATHER

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_  
Plaintiff,

v.

\_\_\_\_\_  
Defendant

)  
)  
)  
)  
) Civil Action File No. \_\_\_\_\_  
)  
)  
)  
)

**AFFIDAVIT SUPPORTING ACKNOWLEDGEMENT OF SERVICE AND  
CONSENT TO LEGITIMATION**

STATE OF GEORGIA  
COUNTY OF \_\_\_\_\_

Personally appeared before the undersigned officer authorized to administer oaths,  
\_\_\_\_\_, who states under oath that she is the natural  
mother of \_\_\_\_\_, a child born out of  
wedlock on \_\_\_\_\_, 20\_\_, in \_\_\_\_\_, \_\_\_\_\_ County,  
State of \_\_\_\_\_. The natural father of said child is \_\_\_\_\_,  
who is the petitioner named in the Petition to Legitimate the said \_\_\_\_\_

The above Acknowledgment of Service and Consent to Legitimation was voluntarily  
and freely made by me on \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Affiant Mother

\_\_\_\_\_  
Notary Public

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



IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_, )  
Plaintiff, )  
v. ) Civil Action No. \_\_\_\_\_  
\_\_\_\_\_, )  
Defendant. )

CERTIFICATE OF SERVICE

I hereby certify that I have this day served the foregoing **Petition for Legitimation** upon the following counsel for [party] [or party if no counsel of record] 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.]

\_\_\_\_\_  
\_\_\_\_\_

This \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Plaintiff *pro se*

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_)  
\_\_\_\_\_)  
Plaintiff, \_\_\_\_\_) )  
\_\_\_\_\_) )  
v. \_\_\_\_\_) )  
\_\_\_\_\_) ) Civil Action File No. \_\_\_\_\_  
Defendant \_\_\_\_\_) )  
\_\_\_\_\_) )  
\_\_\_\_\_)

**RULE NISI**

The above Petition to Legitimate \_\_\_\_\_ having been read and considered, let the same be filed and let \_\_\_\_\_, the natural mother of said child appear before this Court on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ o'clock, \_\_.m., to show cause, if any she have, why the relief demanded in said Petition should not be granted.

Let the said \_\_\_\_\_ be served with a copy of said Petition and this Order as provided by law.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
JUDGE, Superior Courts  
\_\_\_\_\_  
Judicial Circuit

Presented by:

\_\_\_\_\_  
Petitioner *pro se*

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_, )  
Plaintiff, )  
v. ) Civil Action No. \_\_\_\_\_  
\_\_\_\_\_, )  
Defendant. )

**DEFENDANT'S ACKNOWLEDGEMENT OF SERVICE  
AFFIDAVIT OF WAIVER OF VENUE AND PERSONAL JURISDICTION**

I, \_\_\_\_\_, the named Defendant in the above-styled case, after being duly sworn do hereby depose and say that I am a resident of \_\_\_\_\_ County, \_\_\_\_\_ (state), and that the Plaintiff in the above-styled case is a resident of \_\_\_\_\_ County, Georgia. I affirm that I have received a copy of said Petition/Complaint, and I hereby waive any and all further notice, service, and issuance of process.

After being duly informed that I have a constitutional right to a trial by Judge or jury on the above matter in the county of my residence, and with that knowledge, I hereby expressly waive my right to venue in the county of my residence, and consent to venue and personal jurisdiction in the county of this Superior Court.

This \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Affiant

\_\_\_\_\_  
Notary Public

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

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_)  
Plaintiff, )  
v. )  
\_\_\_\_\_) Civil Action File No. \_\_\_\_\_  
Defendant )  
)  
)  
)

**MOTION FOR SERVICE BY PUBLICATION**

Comes plaintiff, pursuant to O.C.G.A. § 9-10-71, and moves the Court for an order directing that service on the defendant be made by publication upon the grounds that he/she cannot, after due diligence, be found within the state, as more fully appears from the affidavit filed herewith and attached hereto.

\_\_\_\_\_  
Plaintiff *pro se*

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_)  
\_\_\_\_\_)  
Plaintiff, \_\_\_\_\_) )  
v. \_\_\_\_\_) )  
\_\_\_\_\_ ) Civil Action File No. \_\_\_\_\_  
Defendant \_\_\_\_\_) )  
\_\_\_\_\_ )  
\_\_\_\_\_ )

**AFFIDAVIT--SERVICE BY PUBLICATION—O.C.G.A. §9-11-4(e)**

Personally appeared \_\_\_\_\_, who, after being duly sworn, states:  
That the Defendant resides outside the State of Georgia, and his/her last known  
address is \_\_\_\_\_.

--or--

That the Defendant has departed from the State of Georgia or cannot after due  
diligence be found within the state. The Defendant's last known address is  
\_\_\_\_\_.

--or--

The last known residence of the Defendant was outside the State of Georgia at  
\_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_.  
The Defendant no longer resides at the foregoing address, nor within the State of Georgia,  
to the best of Affiant's knowledge, and the present address or whereabouts of the Defendant  
is unknown to the Affiant.

--or--

The affiant has made a diligent effort to locate defendant by:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

And cannot find defendant within this state for the reason that defendant has  
concealed himself by:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Affiant has no knowledge as to the present residence or whereabouts of the defendant.

The affiant has made the following efforts to find the Defendant (check all that apply)

Checking with the Defendant's friends and relatives

Names, addresses, and telephone numbers of everyone plaintiff contacted:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contacting the Defendant's former landlord

Name, address, & telephone number of former landlord:

\_\_\_\_\_  
\_\_\_\_\_

Checking telephone information and directories

List which directories you checked:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attempting to have Defendant served at his/her last known address, which is listed above

Other: \_\_\_\_\_

\_\_\_\_\_  
Plaintiff *pro se*

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 )  
)  
)  
)

**ORDER FOR SERVICE BY PUBLICATION**

Plaintiff having moved the Court for an order directing service to be made upon defendant \_\_\_\_\_ in the above-styled action by publication of summons, and it appearing to the Court from the verified Complaint and Affidavit in support of such motion that defendant is a nonresident and that the action is an action in which a defendant may be served by publication pursuant to O.C.G.A. § 9-10-71, it is

ORDERED, that service upon \_\_\_\_\_ be made by publication as provided by law.

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
JUDGE, Superior Courts  
Judicial Circuit

Presented by:

\_\_\_\_\_  
Plaintiff *pro se*

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_)  
Plaintiff, )  
v. )  
\_\_\_\_\_) Civil Action File No. \_\_\_\_\_  
Defendant )  
)  
)

NOTICE OF SUMMONS

TO: \_\_\_\_\_, Defendant Named Above:  
You are hereby notified that the above-styled action seeking  
\_\_\_\_\_ [state the relief sought]  
was filed against you in said Court on \_\_\_\_\_, 20\_\_\_\_,  
and that by reason of an order for service of summons by publication entered  
by the Court on \_\_\_\_\_, 20\_\_\_\_ you are hereby commanded and  
required to file with the clerk of said Court and serve upon \_\_\_\_\_, plaintiff,  
whose address is \_\_\_\_\_,  
an answer to the complaint within sixty (60) days of the date of the order for service by  
publication. If you fail to do so, judgment by default will be taken against you for the  
relief demanded in the complaint.

Witness the Honorable \_\_\_\_\_, Judge of said Court.

This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Clerk of Court



In the Superior Court of \_\_\_\_\_ County, Georgia

\_\_\_\_\_, Plaintiff )  
vs. ) Civil Action 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	<u>Resides with</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

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 creditors (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 Wages \$ \_\_\_\_\_  
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)

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: pre-marital, gift, inheritance, source of funds, etc.)

Description	Value	Separate Asset of the Husband	Separate Asset of the Wife	<u>Basis of the Claim</u>
Cash	\$ _____	_____	_____	_____
Stocks, bonds	\$ _____	_____	_____	_____
CD's/Money Market Accounts	\$ _____	_____	_____	_____
Bank Accounts (list each account):				
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
<u>Retirement Pensions, 401K, IRA, or Profit Sharing</u>	\$ _____	_____	_____	_____
Money owed you:	\$ _____	_____	_____	_____
<u>Tax Refund</u>				

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	\$ _____	<b>AUTOMOBILE</b>	
		Gasoline and oil	\$ _____
Garbage and Sewer	\$ _____	Repairs	\$ _____
Telephone:		Auto tags and license	\$ _____
<u>residential line:</u>	\$ _____	Insurance	\$ _____
<u>cellular telephone:</u>	\$ _____		
Gas	\$ _____	<b><u>OTHER VEHICLES</u></b>	
		<b><u>(boats, trailers, RVs, etc.)</u></b>	
		<u>Gasoline and oil</u>	\$ _____
Repairs and maintenance:	\$ _____	<u>Repairs</u>	\$ _____
Lawn Care	\$ _____	<u>Tags and license</u>	\$ _____
Pest Control	\$ _____	<u>Insurance</u>	\$ _____

**CHILDREN'S EXPENSES**

**AFFIANT'S OTHER EXPENSES**

Child care ( <u>total monthly cost</u> )	\$ _____	Dry cleaning/laundry	\$ _____
School tuition	\$ _____	Clothing	\$ _____
<u>Tutoring</u>	\$ _____	<u>Medical, dental, prescription</u>	
<u>Private lessons (e.g., music, dance)</u>	\$ _____	<u>(out of pocket/uncovered expenses)</u>	\$ _____
		Affiant's gifts (special holidays)	\$ _____
School supplies/expenses	\$ _____	Entertainment	\$ _____
Lunch Money	\$ _____	<u>Recreational Expenses (e.g.,</u>	\$ _____
		<u>fitness)</u>	
<u>Other Educational Expenses (list)</u>		Vacations	\$ _____
_____	\$ _____	<u>Travel Expenses for Visitation</u>	\$ _____
_____	\$ _____	Publications	\$ _____
Allowance	\$ _____	Dues, clubs	\$ _____
Clothing	\$ _____	Religious and charities	\$ _____
Diapers	\$ _____	<u>Pet expenses</u>	\$ _____
<u>Medical, dental, prescription</u>		Alimony paid to former spouse	\$ _____
<u>(out of pocket/uncovered expenses)</u>	\$ _____	Child support paid <u>for other</u>	

Grooming, hygiene \$ \_\_\_\_\_ 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	Plaintiff	Defendant

TOTAL MONTHLY PAYMENTS TO CREDITORS: \$ \_\_\_\_\_

C. TOTAL MONTHLY EXPENSES: \$ \_\_\_\_\_

This \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Affiant

\_\_\_\_\_  
Notary Public

Exhibit " \_\_\_\_\_ "

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 1<sup>st</sup>, 3<sup>rd</sup>, and 5<sup>th</sup> 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 4<sup>th</sup>
  - 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 4<sup>th</sup>
  - 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 (1<sup>st</sup>) 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.



## Instructions for Using the Pen and Paper EZ Worksheet:

Welcome to the Georgia Child Support Pen and Paper EZ Worksheet. Georgia law (O.C.G.A. § 19-6-15) requires guidelines to be used in establishing new and modified child support obligations in every Georgia court. This pen and paper worksheet provides a manual form with steps to estimate the amount of the child support obligation that a court may order, depending on individual circumstances.

This packet includes the following forms and information in this order:

- a) Instructions for using the Pen and Paper EZ Worksheet;
- b) Guide of Useful Definitions and Information;
- c) The Georgia Pen and Paper EZ Child Support Worksheet (2 page form - may be printed 2-sided);
- d) How to find the Basic Child Support Obligation (BCSO) using an example of the Table; and
- e) The Child Support Obligation Table.

### **General Information: Complete the worksheet form in black or blue ink only.**

Fill in the blanks at the top of the worksheet page to identify the Court, County and Civil Action Case Number (if already known); the name of the Mother, Father and Nonparent Custodian, if applicable; and the name and birth year of each child included in this action. Also, identify which parent is the Noncustodial Parent in this action for the purpose of paying child support. **Note:** Both parents may be identified as noncustodial parents if a Nonparent Custodian is included in the action.

### **Documents or information you need to begin using this form:**

It is recommended that you prepare a first draft of the worksheet in pencil rather than in ink. The final version must be completed in **blue** or **black** ink for filing with the Clerk of Court. **(Do not use red ink.)** Gather the following information or documents before you begin:

*Monthly* income for *both* parents if possible, and if applicable, the amount of any Social Security benefits (i.e., RSDI/SSD for a noncustodial parent's disability/retirement) paid to a child in this action as a dependent on that parent's account.

**Important:** If this worksheet includes a nonparent custodian, do not include income for that person.

You may view the actual child support guidelines statute on the Internet at:  
<http://www.georgiacourts.gov/csc/>.

### Instructions for Calculating Begin Here:

**Line 1** Parents' Monthly Gross Income - Enter each parent's monthly income under appropriate columns (a) and (b). Add (+) incomes together and enter total under column (c).

**Helpful tip:** Countable income includes all income from any source, before deductions for taxes. For more information, see O.C.G.A. § 19-6-15(f)(1)(A) for a list of income sources.

**Example:** (a) Mother's income: \$1017.90 + (b) Father's income: \$1950.00 = (c) Combined income: \$2967.90.

**Line 2** Parents' Percentage of Total Income - Divide (÷) Line 1, column (a) by column (c) for mother's percentage of income, and then divide (÷) Line 1, column (b) by column (c) for the father's percentage of income. Enter percentages (%) for each parent under the appropriate column. Combined percentages must total 100%.

**Helpful tip:** If the calculated percentage is, for example, 0.6570%, you may round to a whole percentage, such as 0.66% rather than 0.6570%.

**Example 1 Mother:**  $\$1017.90 \div \$2967.90 = 0.3430$  or 34%.

**Example 2 Father:**  $\$1950.00 \div \$2967.90 = 0.6570$  or 66%.

**Line 3 Basic Child Support Obligation (BCSO) from Child Support Obligation Table -** Find the amount on the table based on the number of children and the parents' combined gross income (income from Line 1, column (c)) that is closest to the combined adjusted gross income amount set out in the first column of the table.

**Helpful tip:** At the end of this set of forms, you will find the Child Support Obligation Table.

**Line 4 Monthly BCSO Amount for Each Parent -** Multiply each parent's percentage of total income (Line 2) by the amount from the BCSO Table (entered on Line 3). Enter amounts for each parent under the appropriate column.

**Examples:** Amount from BCSO Table is \$868. To find mother's portion of the BCSO, multiply the total BCSO of \$868 X 34% = \$295.12; and to find father's portion of the BCSO, multiply the total BCSO of \$868 X 66% = \$572.88. The two amounts total \$868.

**Note:** Calculations for Lines 5, 6 and 7 may include the nonparent custodian, if that person is a party to the action.

**Line 5 Monthly Work Related Child Care Costs -** Enter total average monthly amount paid, or that will be paid for work related child care, by a parent or nonparent custodian under the appropriate column. Total the amounts in columns (a), (b) and (c) and enter the total in column (d).

**Line 6 Monthly Health Insurance Premium Paid for Children -** Include total average monthly amount of health insurance paid or that will be paid for children included in this action. Enter answers under appropriate columns for each parent and/or nonparent custodian. Total the amounts in columns (a), (b) and (c) and enter the total in column (d).

**Helpful Tip:** Include only the portion of the cost of the premium as it applies to the **children** in the case.

**Note:** The amount one enters is the total amount for all the children in the case. **-Option (A):** If the children's portion of cost is known, total the amount for all children in the case and write the answer on the line for the appropriate parent paying the cost. **Option (B):** If the child's portion of the **cost is not known**, divide the total premium cost by the total number of persons in the policy and multiply that answer by the number of children in the case.

**Example:** Total cost of \$150 divided ( $\div$ ) by 3 (mother and two children) people in the policy = \$50 per person. Two children in the case, multiply 2 X \$50 = \$100.

**Line 7 Total Monthly Work Related Child Care and Health Insurance Costs -** Add (+) Lines 5 and 6 under each column and enter answers on Line 7 under the appropriate column for each parent and/or nonparent custodian. Total the amounts in columns (a), (b) and (c) and enter the total in column (d).

**Example:** Mother's Line 5 monthly amount is \$300.00, and the Line 6 monthly amount is \$100.00, totaling \$400.00 monthly. Enter \$400.00 on Line 7, column (a) for mother. Repeat these steps for father and nonparent custodian, if applicable.

**Line 8 Parents' Percentage (%) of Income from Line 1 -** Enter percentages from Line 2 under the appropriate columns. Amounts must total 100% in column (d).

**Line 9 Parents' Share of Work Related Child Care and Health Insurance Costs -** Multiply the total amount on Line 7, Column (d) by the percentage for each parent on Line 8. Enter amounts under the appropriate column for each parent.

**Example 1:** \$400 (from line 7, column (d)) X 34% (from Line 8, column (a)) = \$136.00 representing Mother's share of Health Insurance/Work Related Child Care costs.

**Example 2:** \$400 (from line 7, column (d)) X 66% (from Line 8, column (b)) = \$264.00 representing Father's share of Health Insurance/Work Related Child Care costs. The two amounts total \$400 (column (d)).

**Line 10** **Parents' Adjusted Child Support Obligation** - To identify each parent's adjusted child support obligation, meaning each parent's share of the monthly BCSO plus health insurance and work related child care costs, find each parent's BCSO on Line 4 (of this worksheet) and add (+) to those amounts each parent's answer from Line 9. Total the sums for each parent and enter amounts under the appropriate columns.

**Example 1:** \$295.12 (from Line 4, column (a)) + \$136.00 (from Line 9, column (a)) = \$431.12 representing Mother's BCSO and share of Health Insurance/Work Related Child Care costs.

**Example 2:** \$572.88 (from line 7, column (b)) + \$264.00 (from Line 9, column (b)) = \$836.88 representing Father's BCSO and share of Health Insurance/Work Related Child Care costs.

**Line 11** **Credit for Monthly Amounts Parents Actually Pay or Will Pay for Work Related Child Care and/or Health Insurance Costs** - Enter mother's amount from Line 7, column (a) on this line. Enter father's amount from Line 7, column (b) on this line.

**Line 12** **Total Parents' Presumptive Child Support Obligation** - Subtract (-) amounts on Line 11 from amounts on Line 10 for each parent and enter those amounts on this line under the appropriate column for each parent. After subtracting credit from each parent's adjusted child support obligation, for amounts actually paid or that will be paid for work related child care and health insurance costs, the resulting amount is known as the Presumptive Amount of Child Support.

**Line 13** **Subtract Social Security** - Write in only the total monthly amount paid by the Social Security Administration (SSA) and received by a child under the appropriate noncustodial parent (NPC) column. The child must be receiving a check on the parent's disability or retirement account that is a Title II Social Security benefit (RSDI/SSD); otherwise leave this line blank. Do not include payments for Supplement Security Income (SSI), as SSI does not count.

**Line 14** **Final Monthly Child Support Obligation Amount** - Subtract (-) amounts on Line 13 from amounts on Line 12 for each parent and enter the amounts on this line under the appropriate column for each parent. This line will show the final monthly child support obligation for the parent or parents designated as the noncustodial parent for the purpose of paying child support.

**Line 15** **Uninsured Health Expenses** - Carry down and enter on this line for each parent the percentage from Line 3 or enter a percentage agreed upon by the parties or ordered by the court. The child(ren)'s future uninsured health care expenses are the financial responsibility of both parents. The final child support order will include requirements for payment of the future uninsured health care expenses.

You will find electronic versions of the Child Support Calculators in an Excel format at this website:  
<http://www.georgiacourts.gov/csc/>.

## Guide of Useful Definitions

*Below are seven useful definitions that may help you better understand terms used in this form:*

1. **"Basic Child Support Obligation"** means the monthly amount of support displayed on the child support obligation table which corresponds to the combined adjusted income and the number of children for whom child support is being determined.
2. **"Health Insurance"** means the cost of premiums for any general health or medical policy paid by the Mother, Father and/or Nonparent Custodian for children included in this action. Costs for vision, dental or life insurance are not considered a part of Health Insurance. If the child's portion of the health insurance premium is not known, divide the total premium cost by the total number of persons included in the policy. Multiply that answer by the total number of children included in the policy to determine a per child premium cost. (Example: Total Monthly Health Insurance Premium of \$200 divided by 4 persons = \$50 per person, multiplied by 2 children covered and included in this action = \$100. Answer - Each child's portion of the health insurance premium is \$50 per month.)

3. **“Imputed Income”** means when establishing the amount of child support, if a parent fails to produce reliable evidence of income such as tax returns for prior years, check stubs, or other information, for determining current ability to pay child support, and the court or the jury has no other evidence of the parent's income or income potential, gross income for the current year will be imputed based on a 40 hour workweek at minimum wage.

4. **“Parents' Monthly Gross Income”** is found at O.C.G.A. § 19-6-15 (f) of the Child Support Guidelines. The gross income of each parent includes all income from any source, before deductions for taxes and other deductions. Gross income does not include:

- A. Child support payments received by either parent for the benefit of a child of another relationship;
- B. Benefits received from public assistance programs such as PeachCare, TANF, food stamps; Supplemental Security Income (SSI) benefits; benefits under Section 402(d) of the Social Security Act for disabled adult children; low-income heating and energy assistance payments;
- C. Foster Care payments; and
- D. Nonparent custodian's income.

5. **“Presumptive Child Support Obligation”** means the basic child support obligation including health insurance and work related child care costs.

#### 6. **“Social Security”**

**Important:** Social Security Benefits as described here only apply to Title II (RSDI/SSD) benefits and not Supplemental Security Income (SSI) benefits received under Title XVI of the federal Social Security Act.

Benefits received by a child on the noncustodial parent's account shall be counted as child support payments and shall be applied against the noncustodial's final child support amount.

If the noncustodial parent's child support obligation is greater than the Social Security benefits paid on behalf of the child, then the noncustodial parent is required to pay the amount exceeding the Social Security benefit as part of the final child support amount in the case. If the countable Social Security benefits are more than or equal to the amount of the noncustodial parent's child support amount, the noncustodial parent's child support responsibility is met and no further child support shall be paid.

Any Social Security benefit amounts sent to the custodial parent or nonparent custodian by the Social Security Administration for the child's benefit that is greater than the final child support amount shall be retained by the nonparent custodian or custodial parent for the child's benefit and may not be used to decrease the final child support order or reduce arrearages. The court will make a written finding of fact in the final child support order regarding the use of Social Security benefits in the calculation of the child support.

7. **“Work Related Child Care”** means expenses for the care of the child for whom support is being determined that are due to employment of either parent. The court may consider the child care costs associated with a parent's job search, job training, or education of a parent that is necessary to obtain a job or enhance earning potential, not to exceed a reasonable time as determined by the court, if the parent proves by evidence that the job search, job training, or education will benefit the child being supported.

## **The Georgia Pen and Paper EZ Child Support Worksheet: Simple Calculations with No Adjusted Income or Deviations**

**Read the following to find out if this is the right worksheet for you to use:**

*If you want to claim any other circumstances, such as preexisting orders, qualified children, self-employment taxes, deviations, you must **STOP** now as you cannot use this form. Please instead use the Standard Child Support Worksheet and Schedules (paper or electronic – see page iii of the Instructions).*

**Advisory:** *To complete this form, use the attached instructions to reach the correct calculation amounts. Also see the Reference Guide attached for definitions of terms, information and helpful tips. Enter all amounts as monthly amounts.*

Type of Court: \_\_\_\_\_

County: \_\_\_\_\_

Court/Civil Action/OSAH Case Number: \_\_\_\_\_

DHS/IV-D Case Number (if applicable) \_\_\_\_\_

Check box if DHS is Petitioner

Mother's name (please print) \_\_\_\_\_

Custodial Parent /  Noncustodial Parent (check one)

Father's name (please print) \_\_\_\_\_

Custodial Parent /  Noncustodial Parent (check one)

Nonparent Custodian's name, if any (please print) \_\_\_\_\_

Initial Action /  Modification Action (check one)

Date of Initial Child Support Order: \_\_\_\_\_

### List Only Children for Whom Support is Being Determined in This Case

Child's Name	Year of Birth	Child's Name	Year of Birth
C1.		C4.	
C2.		C5.	
C3.		C6.	

### Parents' Presumptive Amount of Child Support (Do not include Nonparent Custodian's income)

	(a) Mother	(b) Father	(c) Combined
1. Parents' monthly gross income	\$	\$	\$
2. Parent's percentage of total income (Must total 100%)	%	%	100%
3. Basic Child Support Obligation (BCSO) from attached Child Support Obligation Table			\$
4. Monthly BCSO amount for each parent	\$	\$	

	(a) Mother	(b) Father	(c) Nonparent Custodian	(d) Combined
<b>Additional Expenses</b>				
5. <b>Monthly Work Related Child Care Costs</b> <i>(If none, enter zero)</i>	\$	\$	\$	\$
6. <b>Monthly Health Insurance premium paid for the Children</b> <i>(If none, enter zero)</i>	\$	\$	\$	\$
7. <b>Total Monthly Work Related Child Care and Health Insurance Costs</b> <i>(If none, enter zero)</i>	\$	\$	\$	\$
8. <b>Parents' percentage (%) of Income from Line 2</b>	%	%		100%
9. <b>Parents' share of Work Related Child Care and Health Insurance Costs</b> <i>Multiply % on Line 8 for each parent by total monthly amount on Line 7.</i>	\$	\$		\$
10. <b>Parents' Adjusted Child Support Obligation</b> - <i>Each parent's monthly BCSO from Line 4 plus parent's share of work related child care expenses &amp; health insurance costs.</i>	\$	\$		
11. <b>Credit for Monthly Amounts parents actually pay or will pay for Work-Related Child Care and/or Health Insurance Costs</b>	\$	\$		
12. <b>Total Parents' Presumptive Child Support Obligation</b>	\$	\$		
13. <b>Subtract Social Security offset</b> - <i>If a child receives Title II Social Security benefits (i.e., RSDI/SSD for parent's disability /retirement) as a dependent on noncustodial parent's account, enter monthly amount child receives under that parent's column. If none, enter zero.</i>	\$	\$		
14. <b>Final monthly child support obligation amount for each parent</b> - <i>Only the noncustodial parent(s) will have the duty to pay.</i>	\$	\$		
<b>The amount on Line 14 is the Final Child Support Amount.</b>				
<b>Uninsured Health Expenses</b>				
15. <b>Uninsured Health Expenses</b> - <i>Carry down the percentage from Line 2 or enter a percentage agreed upon by the parties or ordered by the court.</i>		%	%	

## How to find the Basic Child Support Obligation (BCSO) using an example of the Table:

See below an **example** using an excerpt from the Table intended to help one understand how to select the correct BCSO.

The table displays the dollar amount of the BCSO corresponding to various levels of combined adjusted income of the children's parents and the number of children for whom a child support order is being established or modified in the present action. To use the table correctly, one must find the amount of the Combined Adjusted Income on the table that is most closely related to the parents' gross income.

Once you have determined the amount of Total "Combined Adjusted Income" to use, go to the column that represents the number of children included in your worksheet. Follow across the line of income and down the column for the number of children in the action until they intersect. That sum will be used as the Basic Child Support Obligation amount and entered on Line 3 of the worksheet.

<b>Georgia Schedule of Basic Child Support Obligations</b>						
<b>Combined Adjusted Income</b>	<b>One Child</b>	<b>Two Children</b>	<b>Three Children</b>	<b>Four Children</b>	<b>Five Children</b>	<b>Six Children</b>
2,800	583	829	962	1,073	1,180	1,284
2,850	592	842	977	1,089	1,198	1,303
2,900	601	855	992	1,106	1,216	1,323

In this **example**, the parents' Total "Combined Adjusted Income" is \$2867.90 (*found on Line 2*). The amount of income on the table that is closest to the parents' income is \$2,850.00. **Thus, in this example, the correct amount of the Total "Combined Adjusted Income" to use is \$2850.00.**

Why did we choose \$2850.00 and neither of the other two amounts? This can be explained by looking at the difference in the actual gross income of the parents' when compared to the amounts found under the column in the table labeled "Combined Adjusted Income".

The difference between \$2867.90 and \$2800 is \$67.90.

The difference between \$2867.90 and \$2850 is \$17.90. (Most closely related amount.)

The difference between \$2867.90 and \$2900 is \$32.10

Georgia Schedule of Basic Child Support Obligations						
COMBINED ADJUSTED GROSS INCOME	ONE CHILD	TWO CHILDREN	THREE CHILDREN	FOUR CHILDREN	FIVE CHILDREN	SIX CHILDREN
800	197	283	330	367	404	440
850	208	298	347	387	425	463
900	218	313	364	406	447	486
950	229	328	381	425	468	509
1,000	239	343	398	444	489	532
1,050	250	357	415	463	510	554
1,100	260	372	432	482	530	577
1,150	270	387	449	501	551	600
1,200	280	401	466	520	572	622
1,250	291	416	483	539	593	645
1,300	301	431	500	558	614	668
1,350	311	445	517	577	634	690
1,400	321	459	533	594	654	711
1,450	331	473	549	612	673	733
1,500	340	487	565	630	693	754
1,550	350	500	581	647	712	775
1,600	360	514	597	665	732	796
1,650	369	528	612	683	751	817
1,700	379	542	628	701	771	838
1,750	389	555	644	718	790	860
1,800	398	569	660	736	809	881
1,850	408	583	676	754	829	902
1,900	418	596	692	771	848	923
1,950	427	610	708	789	868	944
2,000	437	624	723	807	887	965
2,050	446	637	739	824	906	986
2,100	455	650	754	840	924	1,006
2,150	465	663	769	857	943	1,026
2,200	474	676	783	873	961	1,045
2,250	483	688	798	890	979	1,065
2,300	492	701	813	907	997	1,085
2,350	501	714	828	923	1,016	1,105
2,400	510	727	843	940	1,034	1,125
2,450	519	740	858	956	1,052	1,145
2,500	528	752	873	973	1,070	1,165
2,550	537	765	888	990	1,089	1,184
2,600	547	778	902	1,006	1,107	1,204
2,650	556	791	917	1,023	1,125	1,224
2,700	565	804	932	1,039	1,143	1,244
2,750	574	816	947	1,056	1,162	1,264
2,800	583	829	962	1,073	1,180	1,284
2,850	592	842	977	1,089	1,198	1,303
2,900	601	855	992	1,106	1,216	1,323
2,950	611	868	1,006	1,122	1,234	1,343
3,000	620	881	1,021	1,139	1,253	1,363
3,050	629	893	1,036	1,155	1,271	1,383
3,100	638	906	1,051	1,172	1,289	1,402
3,150	647	919	1,066	1,188	1,307	1,422
3,200	655	930	1,079	1,203	1,323	1,440
3,250	663	941	1,092	1,217	1,339	1,457
3,300	671	952	1,104	1,231	1,355	1,474
3,350	679	963	1,117	1,246	1,370	1,491
3,400	687	974	1,130	1,260	1,386	1,508
3,450	694	985	1,143	1,274	1,402	1,525
3,500	702	996	1,155	1,288	1,417	1,542
3,550	710	1,008	1,168	1,303	1,433	1,559
3,600	718	1,019	1,181	1,317	1,448	1,576
3,650	726	1,030	1,194	1,331	1,464	1,593
3,700	734	1,041	1,207	1,345	1,480	1,610
3,750	741	1,051	1,219	1,359	1,495	1,627
3,800	749	1,062	1,231	1,373	1,510	1,643
3,850	756	1,072	1,243	1,386	1,525	1,659
3,900	764	1,083	1,255	1,400	1,540	1,675
3,950	771	1,093	1,267	1,413	1,555	1,691
4,000	779	1,104	1,280	1,427	1,569	1,707
4,050	786	1,114	1,292	1,440	1,584	1,724
4,100	794	1,125	1,304	1,454	1,599	1,740
4,150	801	1,135	1,316	1,467	1,614	1,756
4,200	809	1,146	1,328	1,481	1,629	1,772
4,250	816	1,156	1,340	1,494	1,643	1,788
4,300	824	1,167	1,352	1,508	1,658	1,804
4,350	831	1,177	1,364	1,521	1,673	1,820
4,400	839	1,188	1,376	1,534	1,688	1,836
4,450	846	1,198	1,388	1,548	1,703	1,853
4,500	853	1,209	1,400	1,561	1,718	1,869

Georgia Schedule of Basic Child Support Obligations						
COMBINED ADJUSTED GROSS INCOME	ONE CHILD	TWO CHILDREN	THREE CHILDREN	FOUR CHILDREN	FIVE CHILDREN	SIX CHILDREN
4,550	861	1,219	1,412	1,575	1,732	1,885
4,600	868	1,230	1,425	1,588	1,747	1,901
4,650	876	1,240	1,437	1,602	1,762	1,917
4,700	883	1,251	1,449	1,615	1,777	1,933
4,750	891	1,261	1,461	1,629	1,792	1,949
4,800	898	1,271	1,473	1,642	1,807	1,966
4,850	906	1,282	1,485	1,656	1,821	1,982
4,900	911	1,289	1,493	1,664	1,831	1,992
4,950	914	1,293	1,496	1,668	1,835	1,997
5,000	917	1,297	1,500	1,672	1,839	2,001
5,050	921	1,300	1,503	1,676	1,844	2,006
5,100	924	1,304	1,507	1,680	1,848	2,011
5,150	927	1,308	1,510	1,684	1,852	2,015
5,200	930	1,312	1,514	1,688	1,857	2,020
5,250	934	1,316	1,517	1,692	1,861	2,025
5,300	937	1,320	1,521	1,696	1,865	2,029
5,350	940	1,323	1,524	1,700	1,870	2,034
5,400	943	1,327	1,528	1,704	1,874	2,039
5,450	947	1,331	1,531	1,708	1,878	2,044
5,500	950	1,335	1,535	1,711	1,883	2,048
5,550	953	1,339	1,538	1,715	1,887	2,053
5,600	956	1,342	1,542	1,719	1,891	2,058
5,650	960	1,347	1,546	1,724	1,896	2,063
5,700	964	1,352	1,552	1,731	1,904	2,071
5,750	968	1,357	1,558	1,737	1,911	2,079
5,800	971	1,363	1,564	1,744	1,918	2,087
5,850	975	1,368	1,570	1,750	1,925	2,094
5,900	979	1,373	1,575	1,757	1,932	2,102
5,950	983	1,379	1,581	1,763	1,939	2,110
6,000	987	1,384	1,587	1,770	1,947	2,118
6,050	991	1,389	1,593	1,776	1,954	2,126
6,100	995	1,394	1,599	1,783	1,961	2,133
6,150	999	1,400	1,605	1,789	1,968	2,141
6,200	1,003	1,405	1,610	1,796	1,975	2,149
6,250	1,007	1,410	1,616	1,802	1,982	2,157
6,300	1,011	1,416	1,622	1,809	1,989	2,164
6,350	1,015	1,421	1,628	1,815	1,996	2,172
6,400	1,018	1,426	1,633	1,821	2,003	2,180
6,450	1,023	1,432	1,639	1,828	2,011	2,188
6,500	1,027	1,437	1,646	1,835	2,018	2,196
6,550	1,031	1,442	1,652	1,841	2,026	2,204
6,600	1,035	1,448	1,658	1,848	2,033	2,212
6,650	1,039	1,453	1,664	1,855	2,040	2,220
6,700	1,043	1,459	1,670	1,862	2,048	2,228
6,750	1,047	1,464	1,676	1,869	2,055	2,236
6,800	1,051	1,470	1,682	1,875	2,063	2,244
6,850	1,055	1,475	1,688	1,882	2,070	2,252
6,900	1,059	1,480	1,694	1,889	2,078	2,260
6,950	1,063	1,486	1,700	1,896	2,085	2,269
7,000	1,067	1,491	1,706	1,902	2,092	2,277
7,050	1,071	1,497	1,712	1,909	2,100	2,285
7,100	1,075	1,502	1,718	1,916	2,107	2,293
7,150	1,079	1,508	1,724	1,923	2,115	2,301
7,200	1,083	1,513	1,730	1,929	2,122	2,309
7,250	1,087	1,518	1,736	1,936	2,130	2,317
7,300	1,092	1,524	1,742	1,943	2,137	2,325
7,350	1,096	1,529	1,748	1,950	2,144	2,333
7,400	1,100	1,535	1,755	1,956	2,152	2,341
7,450	1,104	1,540	1,761	1,963	2,159	2,349
7,500	1,108	1,546	1,767	1,970	2,167	2,357
7,550	1,112	1,552	1,773	1,977	2,175	2,366
7,600	1,116	1,558	1,778	1,983	2,181	2,373
7,650	1,117	1,557	1,779	1,984	2,182	2,375
7,700	1,118	1,559	1,781	1,986	2,184	2,376
7,750	1,119	1,560	1,782	1,987	2,186	2,378
7,800	1,120	1,562	1,784	1,989	2,188	2,380
7,850	1,122	1,563	1,785	1,990	2,189	2,382
7,900	1,123	1,565	1,786	1,992	2,191	2,384
7,950	1,124	1,566	1,788	1,993	2,193	2,386
8,000	1,125	1,567	1,789	1,995	2,194	2,387
8,050	1,127	1,569	1,790	1,996	2,196	2,389
8,100	1,128	1,570	1,792	1,998	2,198	2,391
8,150	1,129	1,572	1,793	1,999	2,199	2,393
8,200	1,130	1,573	1,795	2,001	2,201	2,395
8,250	1,131	1,575	1,796	2,003	2,203	2,397







Georgia Schedule of Basic Child Support Obligations						
COMBINED ADJUSTED GROSS INCOME	ONE CHILD	TWO CHILDREN	THREE CHILDREN	FOUR CHILDREN	FIVE CHILDREN	SIX CHILDREN
23,900	2,065	2,843	3,208	3,577	3,935	4,282
23,950	2,066	2,845	3,210	3,579	3,938	4,284
24,000	2,068	2,847	3,212	3,581	3,940	4,287
24,050	2,069	2,849	3,214	3,583	3,942	4,289
24,100	2,070	2,851	3,216	3,585	3,945	4,292
24,150	2,072	2,852	3,217	3,587	3,947	4,294
24,200	2,073	2,854	3,219	3,589	3,949	4,297
24,250	2,075	2,856	3,221	3,592	3,951	4,299
24,300	2,076	2,858	3,223	3,594	3,954	4,302
24,350	2,077	2,860	3,225	3,596	3,956	4,304
24,400	2,079	2,862	3,227	3,598	3,958	4,307
24,450	2,080	2,864	3,228	3,600	3,961	4,309
24,500	2,082	2,865	3,230	3,602	3,963	4,312
24,550	2,083	2,867	3,232	3,604	3,965	4,314
24,600	2,085	2,869	3,234	3,606	3,967	4,317
24,650	2,086	2,871	3,236	3,608	3,970	4,319
24,700	2,087	2,873	3,238	3,610	3,972	4,322
24,750	2,089	2,875	3,240	3,612	3,974	4,324
24,800	2,090	2,876	3,241	3,614	3,977	4,326
24,850	2,092	2,878	3,243	3,616	3,979	4,329
24,900	2,093	2,880	3,245	3,618	3,981	4,331
24,950	2,094	2,882	3,247	3,620	3,983	4,334
25,000	2,096	2,884	3,249	3,622	3,986	4,336
25,050	2,097	2,886	3,251	3,624	3,988	4,339
25,100	2,099	2,887	3,252	3,626	3,990	4,341
25,150	2,100	2,889	3,254	3,629	3,993	4,344
25,200	2,102	2,891	3,256	3,631	3,995	4,346
25,250	2,103	2,893	3,258	3,633	3,997	4,349
25,300	2,104	2,895	3,260	3,635	3,999	4,351
25,350	2,106	2,897	3,262	3,637	4,002	4,354
25,400	2,107	2,899	3,264	3,639	4,004	4,356
25,450	2,109	2,900	3,265	3,641	4,006	4,359
25,500	2,110	2,902	3,267	3,643	4,009	4,361
25,550	2,111	2,904	3,269	3,645	4,011	4,364
25,600	2,113	2,906	3,271	3,647	4,013	4,366
25,650	2,114	2,908	3,273	3,649	4,015	4,369
25,700	2,116	2,910	3,275	3,651	4,018	4,371
25,750	2,117	2,911	3,276	3,653	4,020	4,374
25,800	2,119	2,913	3,278	3,655	4,022	4,376
25,850	2,120	2,915	3,280	3,657	4,024	4,379
25,900	2,121	2,917	3,282	3,659	4,027	4,381
25,950	2,123	2,919	3,284	3,661	4,029	4,384
26,000	2,124	2,921	3,286	3,663	4,031	4,386
26,050	2,126	2,923	3,287	3,666	4,034	4,389
26,100	2,127	2,924	3,289	3,668	4,036	4,391
26,150	2,128	2,926	3,291	3,670	4,038	4,394
26,200	2,130	2,928	3,293	3,672	4,040	4,396
26,250	2,131	2,930	3,295	3,674	4,043	4,399
26,300	2,133	2,932	3,297	3,676	4,045	4,401
26,350	2,134	2,934	3,299	3,678	4,047	4,403
26,400	2,136	2,935	3,300	3,680	4,050	4,406
26,450	2,137	2,937	3,302	3,682	4,052	4,408
26,500	2,138	2,939	3,304	3,684	4,054	4,411
26,550	2,140	2,941	3,306	3,686	4,056	4,413
26,600	2,141	2,943	3,308	3,688	4,059	4,416
26,650	2,143	2,945	3,310	3,690	4,061	4,418
26,700	2,144	2,947	3,311	3,692	4,063	4,421
26,750	2,145	2,948	3,313	3,694	4,066	4,423
26,800	2,147	2,950	3,315	3,696	4,068	4,426
26,850	2,148	2,952	3,317	3,698	4,070	4,428
26,900	2,150	2,954	3,319	3,701	4,072	4,431
26,950	2,151	2,956	3,321	3,703	4,075	4,433
27,000	2,153	2,958	3,323	3,705	4,077	4,436
27,050	2,154	2,959	3,324	3,707	4,079	4,438
27,100	2,155	2,961	3,326	3,709	4,082	4,441
27,150	2,157	2,963	3,328	3,711	4,084	4,443
27,200	2,158	2,965	3,330	3,713	4,086	4,446
27,250	2,160	2,967	3,332	3,715	4,088	4,448
27,300	2,161	2,969	3,334	3,717	4,091	4,451
27,350	2,162	2,970	3,335	3,719	4,093	4,453
27,400	2,164	2,972	3,337	3,721	4,095	4,456
27,450	2,165	2,974	3,339	3,723	4,098	4,458
27,500	2,167	2,976	3,341	3,725	4,100	4,461
27,550	2,168	2,978	3,343	3,727	4,102	4,463
27,600	2,170	2,980	3,345	3,729	4,104	4,466
27,650	2,171	2,982	3,347	3,731	4,107	4,468
27,700	2,172	2,983	3,348	3,733	4,109	4,471
27,750	2,174	2,985	3,350	3,735	4,111	4,473

Georgia Schedule of Basic Child Support Obligations						
COMBINED ADJUSTED GROSS INCOME	ONE CHILD	TWO CHILDREN	THREE CHILDREN	FOUR CHILDREN	FIVE CHILDREN	SIX CHILDREN
27,800	2,175	2,987	3,352	3,738	4,114	4,475
27,850	2,177	2,989	3,354	3,740	4,116	4,478
27,900	2,178	2,991	3,356	3,742	4,118	4,480
27,950	2,179	2,993	3,357	3,744	4,120	4,483
28,000	2,181	2,994	3,359	3,746	4,122	4,485
28,050	2,182	2,996	3,361	3,748	4,125	4,488
28,100	2,184	2,998	3,363	3,750	4,127	4,490
28,150	2,185	3,000	3,365	3,752	4,129	4,492
28,200	2,186	3,001	3,366	3,754	4,131	4,495
28,250	2,188	3,003	3,368	3,756	4,133	4,497
28,300	2,189	3,005	3,370	3,758	4,136	4,500
28,350	2,190	3,007	3,372	3,759	4,138	4,502
28,400	2,192	3,009	3,374	3,761	4,140	4,504
28,450	2,193	3,010	3,375	3,763	4,142	4,507
28,500	2,194	3,012	3,377	3,765	4,145	4,509
28,550	2,196	3,014	3,379	3,767	4,147	4,512
28,600	2,197	3,016	3,381	3,769	4,149	4,514
28,650	2,199	3,017	3,382	3,771	4,151	4,516
28,700	2,200	3,019	3,384	3,773	4,153	4,519
28,750	2,201	3,021	3,386	3,775	4,156	4,521
28,800	2,203	3,023	3,388	3,777	4,158	4,524
28,850	2,204	3,025	3,390	3,779	4,160	4,526
28,900	2,205	3,026	3,391	3,781	4,162	4,528
28,950	2,207	3,028	3,393	3,783	4,164	4,531
29,000	2,208	3,030	3,395	3,785	4,167	4,533
29,050	2,210	3,032	3,397	3,787	4,169	4,536
29,100	2,211	3,034	3,398	3,789	4,171	4,538
29,150	2,212	3,035	3,400	3,791	4,173	4,540
29,200	2,214	3,037	3,402	3,793	4,175	4,543
29,250	2,215	3,039	3,404	3,795	4,178	4,545
29,300	2,216	3,041	3,406	3,797	4,180	4,548
29,350	2,218	3,042	3,407	3,799	4,182	4,550
29,400	2,219	3,044	3,409	3,801	4,184	4,552
29,450	2,220	3,046	3,411	3,803	4,186	4,555
29,500	2,222	3,048	3,413	3,805	4,189	4,557
29,550	2,223	3,050	3,415	3,807	4,191	4,560
29,600	2,225	3,051	3,416	3,809	4,193	4,562
29,650	2,226	3,053	3,418	3,811	4,195	4,564
29,700	2,227	3,055	3,420	3,813	4,197	4,567
29,750	2,229	3,057	3,422	3,815	4,200	4,569
29,800	2,230	3,058	3,423	3,817	4,202	4,572
29,850	2,231	3,060	3,425	3,819	4,204	4,574
29,900	2,233	3,062	3,427	3,821	4,206	4,576
29,950	2,234	3,064	3,429	3,823	4,208	4,579
30,000	2,236	3,066	3,431	3,825	4,211	4,581

## The Georgia Pen and Paper EZ Child Support Worksheet: Simple Calculations with No Adjusted Income or Deviations

Read the following to find out if this is the right worksheet for you to use:

If you want to claim any other circumstances, such as preexisting orders, qualified children, self-employment taxes, deviations, you must **STOP** now as you cannot use this form. Please instead use the Standard Child Support Worksheet and Schedules (paper or electronic - see page iii of the Instructions).

**Advisory:** To complete this form, use the attached instructions to reach the correct calculation amounts. Also see the Reference Guide attached for definitions of terms, information and helpful tips. Enter all amounts as monthly amounts.

Type of Court: Superior

County: Liberty

CV-12345

N/A

Court/Civil Action/OSAH Case Number:

DHS/IV-D Case Number (if applicable)

Check box if DHS is Petitioner

Mother's Full Name

Father's Full Name

Mother's name (please print)

Father's name (please print)

Custodial Parent /  Noncustodial Parent (check one)

Custodial Parent /  Noncustodial Parent (check one)

N/A

Initial Action /  Modification Action (check one)

Nonparent Custodian's name, if any (please print)

Date of Initial Child Support Order: \_\_\_\_\_

### List Only Children for Whom Support is Being Determined in This Case

Child's Name	Year of Birth	Child's Name	Year of Birth
C1. <i>Child One</i>	2007	C4.	
C2. <i>Child Two</i>	2010	C5.	
C3.		C6.	

### Parents' Presumptive Amount of Child Support (Do not include Nonparent Custodian's income)

	(a) Mother	(b) Father	(c) Combined
1. Parents' monthly gross income	\$1017.90	\$1950.00	\$2967.90
2. Parent's percentage of total income (Must total 100%)	34%	66%	100%
3. Basic Child Support Obligation (BCSO) from attached Child Support Obligation Table			\$868.00
4. Monthly BCSO amount for each parent	\$295.12	\$572.88	

	(a) Mother	(b) Father	(c) Nonparent Custodian	(d) Combined
<b>Additional Expenses</b>				
5. <b>Monthly Work Related Child Care Costs</b> <i>(If none, enter zero)</i>	\$300.00	\$	\$	\$300.00
6. <b>Monthly Health Insurance premium paid for the Children</b> <i>(If none, enter zero)</i>	\$100.00	\$	\$	\$100.00
7. <b>Total Monthly Work Related Child Care and Health Insurance Costs</b> <i>(If none, enter zero)</i>	\$400.00	\$	\$	\$400.00
8. <b>Parents' percentage (%) of Income from Line 2</b>	34%	66%		100%
9. <b>Parents' share of Work Related Child Care and Health Insurance Costs</b> <i>Multiply % on Line 8 for each parent by total monthly amount on Line 7.</i>	\$136.00	\$264.00		\$400.00
10. <b>Parents' Adjusted Child Support Obligation</b> - <i>Each parent's monthly BCSO from Line 4 plus parent's share of work related child care expenses &amp; health insurance costs.</i>	\$431.12	\$836.88		
11. <b>Credit for Monthly Amounts parents actually pay or will pay for Work-Related Child Care and/or Health Insurance Costs</b>	\$400.00	\$ 0.00		
12. <b>Total Parents' Presumptive Child Support Obligation</b>	\$ 31.12	\$836.88		
13. <b>Subtract Social Security offset</b> - <i>If a child receives Title II Social Security benefits (i.e., RSDI/SSD for parent's disability /retirement) as a dependent on noncustodial parent's account, enter monthly amount child receives under that parent's column. If none, enter zero.</i>	\$	\$ 0.00		
14. <b>Final monthly child support obligation amount for each parent</b> - <i>Only the noncustodial parent(s) will have the duty to pay.</i>	\$ 31.12	\$836.88		
<b>The amount on Line 14 is the Final Child Support Amount.</b>				
<b>Uninsured Health Expenses</b>				
15. <b>Uninsured Health Expenses</b> - <i>Carry down the percentage from Line 2 or enter a percentage agreed upon by the parties or ordered by the court.</i>	50%	50%		

**Rule 24.10. Parenting Plans**

In all cases involving permanent custody or custody modification (except when a parent seeks emergency relief for family violence), each parent shall prepare and submit a parenting plan, or the parties may jointly submit a parenting plan, as directed by the judge.

The parenting plan should be tailored to fit the needs of each individual family but must at a minimum contain the information required by OCGA § 19-9-1(b) and be presented in substantially the following form:

\_\_\_\_\_ COUNTY SUPERIOR COURT  
STATE OF GEORGIA

Plaintiff,	:	Civil Action
	:	
v.	:	Case Number _____
	:	
Defendant.	:	

**PARENTING PLAN**

The parties have agreed to the terms of this plan and this information has been furnished by both parties to meet the requirements of OCGA § 19-9-1. The parties agree on the terms of the plan and affirm the accuracy of the information provided, as shown by their signatures at the end of this order.

This plan has been prepared by the judge.

This plan  is a new plan.  
 modifies an existing Parenting Plan dated \_\_\_\_\_.  
 modifies an existing Order dated \_\_\_\_\_.

Child's Name	Year of Birth

**I. Custody and Decision Making:**

**A. Legal Custody shall be (choose one)**

- with the Mother
- with the Father
- Joint

**B. Primary Physical Custodian**

For each of the children named below the primary physical custodian shall be:

	y/o/b	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Joint
	y/o/b	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Joint
	y/o/b	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Joint
	y/o/b	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Joint
	y/o/b	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Joint

WHERE JOINT PHYSICAL CUSTODY IS CHOSEN BY THE PARENTS OR ORDERED BY THE COURT, A DETAILED PLAN OF THE LIVING ARRANGEMENTS OF THE CHILD(REN) SHALL BE ATTACHED AND MADE A PART OF THIS PARENTING PLAN.

**C. Day-To-Day Decisions**

Each parent shall make decisions regarding the day-to-day care of a child while the child is residing with that parent, including any emergency decisions affecting the health or safety of a child.

**D. Major Decisions**

Major decisions regarding each child shall be made as follows:

- |                            |                                 |                                 |                                |
|----------------------------|---------------------------------|---------------------------------|--------------------------------|
| Educational decisions      | <input type="checkbox"/> Mother | <input type="checkbox"/> Father | <input type="checkbox"/> Joint |
| Non-emergency health care  | <input type="checkbox"/> Mother | <input type="checkbox"/> Father | <input type="checkbox"/> Joint |
| Religious upbringing       | <input type="checkbox"/> Mother | <input type="checkbox"/> Father | <input type="checkbox"/> Joint |
| Extracurricular activities | <input type="checkbox"/> Mother | <input type="checkbox"/> Father | <input type="checkbox"/> Joint |
| _____                      | <input type="checkbox"/> Mother | <input type="checkbox"/> Father | <input type="checkbox"/> Joint |
| _____                      | <input type="checkbox"/> Mother | <input type="checkbox"/> Father | <input type="checkbox"/> Joint |

**E. Disagreements**

Where parents have elected joint decision making in Section I.D above, please explain how any disagreements in decision-making will be resolved.

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**II. Parenting Time/Visitation Schedules**

**A. Parenting Time/Visitation**

During the term of this parenting plan the non-custodial parent shall have at a minimum the following rights of parenting time/visitation (choose an item):

- The weekend of the first and third Friday of each month.
- The weekend of the first, third, and fifth Friday of each month.
- The weekend of the second and fourth Friday of each month.
- Every other weekend starting on \_\_\_\_\_.
- Each \_\_\_\_\_ starting at \_\_\_\_\_ a.m./p.m. and ending \_\_\_\_\_ a.m./p.m.
- Other: \_\_\_\_\_
- and weekday parenting time/visitation on (choose an item):
- None
- Every Wednesday evening
- Every other Wednesday during the week prior to a non-visitation weekend.
- Every \_\_\_\_\_ and \_\_\_\_\_ evening.
- Other: \_\_\_\_\_

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For purposes of this parenting plan, a weekend will start at \_\_\_\_\_ a.m./p.m. on [Thursday/Friday/Saturday/Other: \_\_\_\_\_] and end at \_\_\_\_\_ a.m./p.m. on [Sunday/Monday/Other: \_\_\_\_\_].

Weekday visitation will begin at \_\_\_\_\_ a.m./p.m. and will end [\_\_\_\_ p.m. / when the child(ren) return(s) to school or day care the next morning/Other: \_\_\_\_\_].

This parenting schedule begins:

- \_\_\_\_\_ (day and time) **OR**  date of the Court's Order



**B. Major Holidays and Vacation Periods**

**Thanksgiving**

The day to day schedule shall apply unless other arrangements are set forth:

\_\_\_\_\_
\_\_\_\_\_
beginning \_\_\_\_\_.

**Winter Vacation**

The ( ) mother ( ) father shall have the child(ren) for the first period from the day and time school is dismissed until December \_\_\_\_\_ at \_\_\_ a.m./p.m. in ( ) odd numbered years ( ) even numbered years ( ) every year. The other parent will have the child(ren) for the second period from the day and time indicated above until 6:00 p.m. on the evening before school resumes. Unless otherwise indicated, the parties shall alternate the first and second periods each year.

Other agreement of the parents:

**Summer Vacation**

Define summer vacation period: \_\_\_\_\_
The day to day schedule shall apply unless other arrangements are set forth:

\_\_\_\_\_
\_\_\_\_\_
beginning \_\_\_\_\_.

**Spring Vacation (if applicable)**

Define: \_\_\_\_\_
The day to day schedule shall apply unless other arrangements are set forth:

\_\_\_\_\_
\_\_\_\_\_
beginning \_\_\_\_\_.

**Fall Vacation (if applicable)**

Define: \_\_\_\_\_
The day to day schedule shall apply unless other arrangements are set forth:

\_\_\_\_\_
\_\_\_\_\_
beginning \_\_\_\_\_.

**C. Other Holiday Schedule (if applicable)**

- Martin Luther King Day \_\_\_\_\_
- Presidents' Day \_\_\_\_\_
- Mother's Day \_\_\_\_\_
- Memorial Day \_\_\_\_\_
- Father's Day \_\_\_\_\_
- July Fourth \_\_\_\_\_
- Labor Day \_\_\_\_\_
- Halloween \_\_\_\_\_
- Child(ren)'s Birthday(s) \_\_\_\_\_

Mother's Birthday	_____	_____
Father's Birthday	_____	_____
Religious Holidays:	_____	_____
_____		
_____		
Other:	_____	_____
_____	_____	_____
Other:	_____	_____
_____	_____	_____
Other:	_____	_____
_____	_____	_____

**D. Other extended periods of time during school, etc. (refer to the school schedule)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**E. Start and end dates for holiday visitation**

For the purposes of this parenting plan, the holiday will start and end as follows (choose one):

Holidays that fall on Friday will include the following Saturday and Sunday

Holidays that fall on Monday will include the preceding Saturday and Sunday

Other: \_\_\_\_\_

**F. Coordination of Parenting Schedules**

Check if applicable:

The holiday parenting time/visitation schedule takes precedence over the regular parenting time/visitation schedule.

When the child(ren) is/are with a parent for an extended parenting time/visitation period (such as summer), the other parent shall be entitled to visit with the child(ren) during the extended period, as follows:

\_\_\_\_\_

\_\_\_\_\_

**G. Transportation Arrangements**

For visitation, the place of meeting for the exchange of the child(ren) shall be:

\_\_\_\_\_

\_\_\_\_\_

The \_\_\_\_\_ will be responsible for transportation of the child at the beginning of visitation.

The \_\_\_\_\_ will be responsible for transportation of the child at the conclusion of visitation.

Transportation costs, if any, will be allocated as follows:

\_\_\_\_\_

Other provisions: \_\_\_\_\_

#### H. Contacting the Child

When the child or children are in the physical custody of one parent, the other parent will have the right to contact the child or children as follows:

Telephone

Other: \_\_\_\_\_

Limitations on contact:

\_\_\_\_\_

#### I. Supervision of Parenting Time (if applicable)

Check here if applicable

Supervised parenting time shall apply during the day-to-day schedule as

follows: Place: \_\_\_\_\_

Person/Organization supervising: \_\_\_\_\_

Responsibility for cost:

Mother       Father       Both equally

#### J. Communication Provisions

Please check:

Each parent shall promptly notify the other parent of a change of address, phone number or cell phone number. A parent changing residence must give at least 30 days notice of the change and provide the full address of the new residence.

Due to prior acts of family violence, the address of the child(ren) and victim of family violence shall be kept confidential. The protected parent shall promptly notify the other parent, through a third party, of any change in contact information necessary to conduct visitation.

**III. Access to Records and Information**

**Rights of the Parents**

Absent agreement to limitations or court ordered limitations, pursuant to OCGA § 19-9-1 (b) (1) (D), both parents are entitled to access to all of the child(ren)'s records and information, including, but not limited to, education, health, extracurricular activities, and religious communications. Designation as a non-custodial parent does not affect a parent's right to equal access to these records.

Limitations on Access Rights: \_\_\_\_\_  
\_\_\_\_\_

Other Information Sharing Provisions:  
\_\_\_\_\_  
\_\_\_\_\_

**IV. Modification of Plan or Disagreements**

Parties may, by mutual agreement, vary the parenting time/visitation; however, such agreement shall not be a binding court order. Custody shall only be modified by court order.

Should the parents disagree about this parenting plan or wish to modify it, they must make a good faith effort to resolve the issue between them.

**V. Special Considerations**

Please attach an addendum detailing any special circumstances of which the Court should be aware (e.g., health issues, educational issues, etc.)

**VI. Parents' Consent**

Please review the following and initial:

- 1. We recognize that a close and continuing parent-child relationship and continuity in the child's life is in the child's best interest.

Mother's Initials: \_\_\_\_\_ Father's Initials: \_\_\_\_\_

- 2. We recognize that our child's needs will change and grow as the child matures; we have made a good faith effort to take these changing needs into account so that the need for future modifications to the parenting plan are minimized.

Mother's Initials: \_\_\_\_\_ Father's Initials: \_\_\_\_\_

3. We recognize that the parent with physical custody will make the day-to-day decisions and emergency decisions while the child is residing with such parent.

Mother's Initials: \_\_\_\_\_ Father's Initials: \_\_\_\_\_

( ) We knowingly and voluntarily agree on the terms of this Parenting Plan. Each of us affirms that the information we have provided in this Plan is true and correct.

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Father's Signature

**ORDER**

The Court has reviewed the foregoing Parenting Plan, and it is hereby made the order of this Court.

This Order entered on \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
JUDGE

\_\_\_\_\_  
COUNTY SUPERIOR COURT

IN THE SUPERIOR COURT FOR THE COUNTY OF FLOYD  
STATE OF GEORGIA

Plaintiff

CIVIL ACTION

v.

NO. \_\_\_\_\_

Defendant

**CHILD SUPPORT ADDENDUM**

The parties have agreed to the terms of this Order and this information has been furnished by both parties to meet the requirements of OCGA § 19-6-15. The parties agree on the terms of the Order and affirm the accuracy of the information provided, as shown by their signatures at the end of this **addendum**.

This **addendum** includes findings of fact and conclusions of law and fact made by the Court, in compliance with OCGA § 19-6-15.

**Application of Child Support Guidelines.** The statutory requirements of OCGA § 19-6-15 have been applied in reaching the amount of **child support** provided under the Final Order in this action. The specifics are as follows:

1. Gross Income-The Father's gross monthly income (before taxes) is \$ \_\_\_\_\_; the Mother's gross monthly income is \$ \_\_\_\_\_ (before taxes).

2. Number of Children-The number of **children** for whom **support** is being provided under this order is \_\_\_\_\_.

3. Attachments-The *Child Support Worksheet* and *Schedule E* are attached and made a part of this **Addendum**, along with any other applicable schedules.

4. Child Support Amount-The \_\_\_\_\_ shall pay to the \_\_\_\_\_, for the **support** of the minor **children**, the sum of \$ \_\_\_\_\_ per month, beginning on \_\_\_\_\_, 20 \_\_\_\_.

**5. Duration of Child Support**

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*[You must check & complete only one of the following paragraphs.]*

(a) **Beyond Age 18 for High School** - The **child support** shall continue monthly thereafter until each **child** reaches the age of eighteen, dies, marries, or otherwise becomes emancipated; provided that if a **child** becomes eighteen years old while enrolled in and attending secondary

school on a full-time basis, then the **child support** shall continue for the **child through the month when** the **child** has graduated from secondary school or **through the month when the child** reaches twenty years of age, whichever occurs first.

(b) **Stops at Age 18** - The **child support** shall continue monthly thereafter until each **child** reaches the age of eighteen, dies, marries, or otherwise becomes emancipated.

(c) **Until Further Order** - This is not a final order, so the **child support** shall continue until further order of this Court.

(d) **Until Specific Date** - The **child support** shall continue monthly thereafter until \_\_\_\_\_.

#### 6. Deviation from Presumptive Amount

*[You must check & complete only one of the following paragraphs.]*

(a) **No Deviation** - It has been determined that none of the Deviations allowed under OCGA § 19-6-15 applies in this case, as shown by the attached *Schedule E*. The amount of support in Paragraph 4 above is the Presumptive Amount of Child Support shown on the attached *Child Support Worksheet*.

(b) **Deviation** - It has been determined that one or more of the Deviations allowed under OCGA § 19-6-15 applies in this case, as shown by the attached *Schedule E*. The Presumptive Amount of Child Support that would have been required under OCGA § 19-6-15 if the deviations had not been applied is \$\_\_\_\_\_ per month, as shown on the attached *Child Support Worksheet*. The attached *Schedule E* explains the reasons for the deviation, how the application of the guidelines would be unjust or inappropriate considering the relative ability of each parent to provide support, and how the best interest of the children who are subject to this child support determination is served by deviation from the presumptive amount of child support.

7. **Split Parenting**-A split parenting situation occurs when the parents have two or more children together, where at least one of the children spends more than 50% of the time with one parent, and at least one of the children spends more than 50% of the time with the other parent.

*[You must check & complete only one of the following paragraphs.]*

(a) **Not Split Parenting Case** - This case does not involve Split Parenting.

(b) **Split Parenting Case** - This is a Split Parenting case.

Separate *Child Support Worksheets* have been filed for the **children** living with the Mother and for the **children** living with the Father, and a *Child Support Order Addendum* has been entered in this action for each parent. At this time, the Mother is obligated to pay the sum of \$\_\_\_\_\_ per month to the Father, and the Father is obligated to pay the sum of \$\_\_\_\_\_ per month to the Mother.

*[If you checked (b) above, you must check & complete **only one** of the following sub-paragraphs.]*

(1) **Net Payment** - For so long as these amounts remain in effect, the \_\_\_\_\_ shall pay only the difference between the two amounts (which is \$ \_\_\_\_\_) to the \_\_\_\_\_, who shall not be required to pay the child support obligation to the other parent.

(2) **Zero Payment** - The parents' child support obligations are equal. For so long as the amounts remain equal, neither parent shall pay any child support payment to the other parent.

(3) **Full Payment From Each** - Each parent shall pay the full amount of his or her child support obligation to the other.

### **8. Health, Dental & Vision Insurance for Children**

*[You must check & complete all parts of **only one** of the following paragraphs, (a) or (b).]*

(a) **Insurance Available** - The following insurance for the children involved in this action is available at a reasonable cost to the \_\_\_\_\_ through that parent's employer or the PeachCare program:

Health (medical, mental health and hospitalization) Dental Vision.

So long as it remains available to that parent, the \_\_\_\_\_ shall maintain the types of insurance checked above for the benefit of the minor children, until each child reaches the age of eighteen, dies, marries, or otherwise becomes emancipated; except that if a child becomes eighteen years old while enrolled in and attending secondary school on a full-time basis, then the insurance shall be continued for the child **until the month when** the child has graduated from secondary school or **through the month the child reaches** twenty years of age, whichever occurs first.

(1) The parent who maintains the insurance shall provide the other parent with an insurance identification card or such other acceptable proof of insurance coverage and shall cooperate with the other parent in submitting claims under the policy.

(2) All money received by one of the parties for claims processed under the insurance policy shall be paid within five (5) days after the party receives the money, to the other party (if that other party paid the applicable health care service provider) or to the applicable health care provider (if the provider has not been paid by one of the parties).

(b) **Insurance Not Available** - Insurance (other than Medicaid) is not available at this time to either party at a reasonable cost. If health insurance for the children later becomes available to the parent who is required to pay child support for these children, then that parent must obtain the following types of insurance, unless it is then being provided by the other parent:

Health (medical, mental health and hospitalization) Dental Vision.



When insurance has been obtained by either party, Paragraphs 8 (a)(1) and (2) shall apply.

9. **Uninsured Health Care Expenses** - The \_\_\_\_\_ shall pay \_\_\_ % and the \_\_\_\_\_ shall pay \_\_\_ 5 of all expenses incurred for the children's health care (including medical, dental, mental health, hospital and vision care) that are not covered by insurance. The party who incurs a health care expense for one of the children shall provide verification of the amount to the other party. That other party shall reimburse the incurring party (or pay the health care provider directly) for the appropriate percentage of the expense, within fifteen (15) days after receiving the verification of a particular health care expense.

10. **Parenting Time Amounts** - The approximate number of days of parenting time per year according to the visitation order is \_\_\_ days for the Father and \_\_\_ days for the Mother.

### 11. **Social Security Benefits**

*[You must check & complete **only one** of the following paragraphs.]*

(a) **Not Received** - The **children** do not receive Title II Social Security benefits under the account of the parent ordered to pay **child support**.

(b) **Received** - The **children** receive Title II Social Security benefits under the account of the parent ordered to pay **child support**. The benefits received by the **children** shall be counted as **child support** payments, and shall be applied against the final **child support** order to be paid by that parent.

(1) If the amount of benefits received is less than the amount of **support** ordered, the obligor shall pay the amount exceeding the Social Security benefit.

(2) If the amount of benefits received is equal to or more than the amount of **support** ordered, the obligor's responsibility is met and no further **support** shall be paid.

(3) Any Title II benefits received for the **children's** benefit shall be retained by the custodial parent or nonparent custodian for the **children's** benefit, and it shall not be used as a reason for decreasing the final **child support** order or reducing arrearages.

### 12. **Modification**

*[You must check & complete **only one** of the following paragraphs.]*

(a) **Not Modification Action** - This is an initial determination of **child support**, not a modification action.

(b) **Support Not Modified** - This action is a modification action, but the order does not modify the amount of **child support** that was previously ordered for these **children**. The date of the initial **support** order concerning this **child support** case was:

(c) **Support Amount Modified** - The Order modifies the amount of **child support** that was previously ordered for these **children**. The basis for the modification is:

- (1) Substantial change in the income and financial status of the Father;
- (2) Substantial change in the income and financial status of the Mother;
- (3) Substantial change in the needs of the Children;
- (4) The noncustodial parent failed to exercise visitation provided under the prior order;
- (5) The noncustodial parent has exercised more visitation than was provided in the prior order.

The date of the initial support Order concerning this child support case was: \_\_\_\_.

**13. Continuing Garnishment for Child Support** - Whenever, in violation of the terms of the order, there shall have been a failure to make the support payments, so that the amount unpaid is equal to or greater than the amount payable for one month, the payments required to be made may also be collected by the process of continuing garnishment for support.

#### **14. Income Deduction Order**

*[You must check & complete **only one** of the following paragraphs: (a), (b) or (c).]*

(a) An *Income Deduction Order* shall be entered by the Court, under OCGA § 19-6-32, for payment of the child support and alimony (if any) provided. The *Income Deduction Order* shall take effect:

*[To finish (a), you must check either (1) or (2). Do not check both.]*

- (1) immediately upon entry by the Court.
- (2) upon accrual of a delinquency equal to one month's support. The *Income Deduction Order* may be enforced by serving a "Notice of Delinquency," as provided in OCGA § 19-6-32 (f).
- (b) The parties agree that an *Income Deduction Order* is not immediately necessary.
- (c) The Court finds that there is good cause not to require income deduction, having determined that income deduction will not serve the **children's** best interests and that there has been sufficient proof of timely payment of any previously ordered **support**.

**Parties' Consent** (if applicable) - We knowingly and voluntarily agree on the terms of this Order. Each of us affirms that the information we have provided in this **Addendum** is true and correct.

---

Father's Signature

Mother's Signature

**ORDER**

The Court has reviewed the foregoing *Child Support Addendum*, and it is hereby made the Order of this Court.

This Order entered on \_\_\_\_\_, 20 \_\_\_\_.

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JUDGE, SUPERIOR COURT OF FLOYD COUNTY

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IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

\_\_\_\_\_)  
\_\_\_\_\_)  
Plaintiff, \_\_\_\_\_) )  
\_\_\_\_\_) )  
v. \_\_\_\_\_) )  
\_\_\_\_\_) ) Civil Action File No. \_\_\_\_\_  
Defendant \_\_\_\_\_) )  
\_\_\_\_\_) )  
\_\_\_\_\_)

**ORDER**

The above matter having been heard, it is therefore the judgment of this Court that \_\_\_\_\_ is hereby declared to be legitimate and to be the legitimate child of \_\_\_\_\_, and capable of inheriting from the father in the same manner as if born in lawful wedlock, and from henceforth the name by which said child shall be known shall be \_\_\_\_\_.

\_\_\_\_\_ Vital Records is directed to change the child(ren)'s surnames on their birth certificate(s) to the last name of their father and to add the father's name on the birth certificate(s).

**FURTHER ORDERED:**

- The Court incorporates into this order the agreement of the parties regarding custody, visitation, and child support.
- The Court awards custody of the minor children as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- The Court orders visitation 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 \$ \_\_\_\_\_.

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

**SO ORDERED** this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
**JUDGE**, Superior Courts  
\_\_\_\_\_  
Judicial Circuit

IN THE SUPERIOR COURT OF \_\_\_\_\_ COUNTY  
STATE OF GEORGIA

	)	
	)	
Plaintiff,	)	
	)	
v.	)	Civil Action 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 \_\_\_\_\_ and 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 Courts  
\_\_\_\_\_  
Judicial Circuit



Date

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.