

In the _____ Court for _____ County, State of _____

In re: _____
Petitioner

vs. _____
Respondent

)
)
)
)
)
)
)
)
)

Case No:

Division:

UNIFORM SUPPORT PETITION

1. This petition of petitioner, _____ (name), respectfully shows the court that this petition is for [check all that apply]:

_____ Support _____ Medical coverage _____ Arrearage

_____ Reimbursement _____ Establishment of paternity

_____ A Paternity Affidavit is attached for reference

_____ The General Testimony for URESA is attached for reference

2. Petitioner, _____ (name), resides at _____

_____ (address) and has custody of the following dependents of the respondent:

Names

Date of Birth

3. Petitioner and the respondent were [check one only]:

Never married to each other.

Married on this _____ (day) of _____ (month), _____ (year).

Divorce is pending (date filed _____) in _____ County,
_____ (State).

Divorced on _____ (day) of _____ (month), _____ (year) in
_____ County, _____ (State).

4. Respondent resides at:

Respondent's last known employer and address of employer is

5. The dependents are entitled to support and/or medical coverage from the respondent.

Respondent has a legal obligation to pay support pursuant to the laws of the initiating state,
which is enforceable under the following reciprocal support status reference: _____.

6. Since the date of _____ respondent has not provided support for the named
dependents.

7. a. The respondent is not under a court order to pay child support.

b. The respondent is under a court order to pay support (see attached order).

c. The respondent should pay the amount of ongoing support for the dependents in an
amount as permitted by the law of the responding state.

Wherefore, the petitioner requests an order for the following: [check all that apply]

Child support in the amount prescribed by law.

Registration and enforcement of the attached current support order.

Medical coverage.