

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 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 PUBLICATION 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

General Civil and Domestic Relations Case Filing Instructions

1. Provide the class of court and county in which the case is being filed.
2. Provide the plaintiff's and defendant's names.
3. Provide the plaintiff's attorney's name and State Bar number. If you are representing yourself, provide your own name and check the self-represented box.
4. Provide the primary type of case by checking only *one* appropriate box. Cases can be either general civil or domestic relations and only *one* type of primary case within those categories. Check the case type that most accurately describes the primary case. If applicable, check one sub-type under the primary case type. If you are making more than one type of claim, check the case type that involves the largest amount of damages or the one you consider most important. See below for definitions of each case type.
5. Provide an answer to the four questions by checking the appropriate boxes and/or filling in the appropriate lines.

Case Type Definitions

General Civil Cases

Automobile Tort: Any tort case involving personal injury, property damage, or wrongful death resulting from alleged negligent operation of a motor vehicle.

Civil Appeal: Any case disputing the finding of a limited jurisdiction trial court, department, or administrative agency.

Contempt/Modification/Other Post-Judgment: Any case alleging failure to comply with a previously existing court order, seeking to change the terms of a previously existing court order, or any other post-judgment activity in a general civil case.

Contract: Any case involving a dispute over an agreement between two or more parties.

Garnishment: Any case where, after a monetary judgment, a third party who has money or other property belonging to the defendant is required to turn over such money or property to the court.

General Tort: Any tort case that is not defined or is not attributable to one of the other types of torts listed.

Habeas Corpus: Any case designed to review the legality of the detention or imprisonment of an individual, but not the question of his or her guilt or innocence.

Injunction/Mandamus/Other Writ: Cases involving a written court order directing a specific person to perform or refrain from performing a specific act.

Landlord/Tenant: Any case involving a landlord/tenant dispute if the landlord removed a tenant and his or her property from the premises or placed a lien on the tenant's property to repay a debt.

Medical Malpractice Tort: Any tort case that alleges misconduct or negligence by a person in the medical profession acting in a professional capacity, such as doctors, nurses, physician's assistants, dentists, etc.

Product Liability Tort: Any tort case that alleges an injury to a person was caused by the manufacturer or seller of an article due to a defect in, or the condition of, the article sold or an alleged breach of duty to provide suitable instructions to prevent injury.

Real Property: Any case involving disputes over the ownership, use, boundaries, or value of land.

Restraining Petition: Any petition for a restraining order that does not result from a domestic altercation or is not between parties in a domestic relationship.

Other General Civil: Any case that does not fit into one of the other defined case categories in which a plaintiff is requesting the enforcement or protection of a right or the redress or prevention of a wrong.

Domestic Relations Cases

Adoption: Cases involving a request for the establishment of a new and permanent parent-child relationship between persons not biologically parent and child.

Contempt: Any case alleging failure to comply with a previously existing court order. If the contempt action deals with the non-payment of child support, medical support, or alimony, also check the corresponding sub-type box.

Dissolution/Divorce/Separate Maintenance/Alimony: Any case involving the dissolution of a marriage or the establishment of alimony or separate maintenance.

Family Violence Petition: Any case in which a protective order from a family member or domestic partner is requested.

Modification: Any case seeking to change the terms of a previously existing court order. If the modification deals with custody, parenting time, or visitation, also check the corresponding sub-type box.

Paternity/Legitimation: Cases involving establishment of the identity and/or responsibilities of the father of a minor child or a determination of biological offspring.

Support – IV-D: Cases filed by the Georgia Department of Human Services to request maintenance of a minor child by a person who is required under Title IV-D of the Social Security Act of 1973 (42 USC §§ 651-669b) to provide such maintenance.

Support – Private (non-IV-D): Cases filed to request maintenance of a parent/guardian or a minor child by a person who is required by a law other than Title IV-D of the Social Security Act of 1973 (42 USC §§ 651-669b) to provide such maintenance.

Other Domestic Relations: Domestic relations cases that do not adequately fit into any of the other case types, including name changes.

Please note: This form is for statistical purposes only. It shall have no legal effect in a case. The information collected on this form is used solely for court administration purposes. This form does not supplement or replace the filing and service of pleadings or other papers as required by law or court rules. Information on this form will not be entered into evidence.

General Civil and Domestic Relations Case Disposition Form Instructions

1. Provide the class of court and county in which the case is being disposed.
2. Provide the plaintiff's and defendant's names.
3. Provide the reporting party (the individual completing the form).
4. Provide the attorneys' names and State Bar numbers. If parties represented themselves, provide their names and check the self-represented box.
5. Provide the manner of disposition by checking the appropriate box. See below for definitions.
6. Provide an answer to the three questions by checking the appropriate boxes.

Manner of Disposition Definitions

Jury Trial: Cases in which a jury is impaneled to determine the issues of fact in the case. A jury trial should be counted when the jury has been sworn, regardless of whether a verdict is reached.

Bench/Non-Jury Trial: Cases in which a judge or judicial officer is assigned to determine both the issues of fact and law in the case. A bench/non-jury trial should be counted when the first evidence is introduced, regardless of whether a judgment is reached.

Non-Trial Disposition: Cases in which the disposition does not involve either a jury trial or a bench trial.

Alternative Dispute Resolution: If a case was disposed of via a non-trial disposition and the method of disposition was alternative dispute resolution. If this box is checked, then the Non-Trial Disposition box must also be checked. Only check if the whole case was resolved via alternative dispute resolution.

General Civil and Domestic Relations Case Disposition Information Form

☐ Superior or ☐ State Court of _____ County

For Clerk Use Only

Date Disposed _____
MM-DD-YYYY

Case Number _____

Case Style _____

Plaintiff(s)

Last	First	Middle I.	Suffix	Prefix
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____

Defendant(s)

Last	First	Middle I.	Suffix	Prefix
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____

Reporting Party _____

Plaintiff's Attorney _____ State Bar Number _____ Self-Represented ☐

Defendant's Attorney _____ State Bar Number _____ Self-Represented ☐

Manner of Disposition

Check Only One

- ☐ Jury Trial
- ☐ Bench/Non-Jury Trial
- ☐ Non-Trial Disposition, such as:
 - ☐ Alternative Dispute Resolution

- ☐ Check if any party was self-represented at any point during the life of the case.
- ☐ Check if the court ordered an interpreter for any party, witness, or other involved individual.
- ☐ Check if the case was referred/ordered to a court-annexed alternative dispute resolution process.

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

Plaintiff,
v. _____
Defendant

)
)
)
)
) Civil Action File No. _____
)
)
)
)

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):

Name	Date of Birth	Place of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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:

☐ 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.

Plaintiff *pro se*

Address: _____

Telephone: _____

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____,
Plaintiff,
v.
_____,
Defendant
)
)
)
)
) Civil Action File No. _____
)
)
)
)

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.)

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 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.) 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. _____,
Defendant
)
)
)
)
) Civil Action File No. _____
)
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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:

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

☐ 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:

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

5.

Visitation (Choose a or b)

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

[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:

*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
)
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)
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) Civil Action File No. _____
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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 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.

____ COUNTY SUPERIOR COURT
STATE OF GEORGIA

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Case Number _____

PARENTING PLAN

() 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.

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: _____

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

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 1st, 3rd, and 5th 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 4th
 - 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 4th
 - 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 (1st) 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.

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

Plaintiff,
v.

Defendant
)
)
)
)
) Civil Action File No. _____
)
)
)
)

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

Plaintiff,

Defendant

Civil Action File No. _____

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

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

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.

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

_____,
Plaintiff,

_____,
Defendant

v.

Civil Action File No. _____

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

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 (÷) 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:

- "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.
- "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
Additional Expenses				
5. Monthly Work Related Child Care Costs <i>(If none, enter zero)</i>	\$	\$	\$	\$
6. Monthly Health Insurance premium paid for the Children <i>(If none, enter zero)</i>	\$	\$	\$	\$
7. Total Monthly Work Related Child Care and Health Insurance Costs <i>(If none, enter zero)</i>	\$	\$	\$	\$
8. Parents' percentage (%) of Income from Line 2	%	%		100%
9. Parents' share of Work Related Child Care and Health Insurance Costs <i>Multiply % on Line 8 for each parent by total monthly amount on Line 7.</i>	\$	\$		\$
10. Parents' Adjusted Child Support Obligation - <i>Each parent's monthly BCSO from Line 4 plus parent's share of work related child care expenses & health insurance costs.</i>	\$	\$		
11. Credit for Monthly Amounts parents actually pay or will pay for Work-Related Child Care and/or Health Insurance Costs	\$	\$		
12. Total Parents' Presumptive Child Support Obligation	\$	\$		
13. Subtract Social Security offset - <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. Final monthly child support obligation amount for each parent - <i>Only the noncustodial parent(s) will have the duty to pay.</i>	\$	\$		
The amount on Line 14 is the Final Child Support Amount.				
Uninsured Health Expenses				
15. Uninsured Health Expenses - <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.

Georgia Schedule of Basic Child Support Obligations						
Combined Adjusted Income	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
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	1,556	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
8,300	1,133	1,576	1,797	2,004	2,204	2,398
8,350	1,134	1,578	1,799	2,006	2,206	2,400
8,400	1,135	1,579	1,800	2,007	2,208	2,402
8,450	1,136	1,580	1,802	2,009	2,210	2,404
8,500	1,138	1,582	1,803	2,010	2,211	2,406
8,550	1,139	1,583	1,804	2,012	2,213	2,408
8,600	1,140	1,585	1,806	2,013	2,215	2,410
8,650	1,141	1,586	1,807	2,015	2,216	2,411
8,700	1,142	1,588	1,808	2,016	2,218	2,413
8,750	1,144	1,589	1,810	2,018	2,220	2,415
8,800	1,145	1,591	1,811	2,019	2,221	2,417
8,850	1,146	1,592	1,813	2,021	2,223	2,419
8,900	1,147	1,593	1,814	2,023	2,225	2,421
8,950	1,149	1,595	1,815	2,024	2,226	2,422
9,000	1,150	1,596	1,817	2,026	2,228	2,424
9,050	1,153	1,601	1,822	2,032	2,235	2,431
9,100	1,159	1,609	1,831	2,042	2,246	2,443
9,150	1,164	1,617	1,840	2,052	2,257	2,455
9,200	1,170	1,624	1,849	2,062	2,268	2,467
9,250	1,175	1,632	1,858	2,071	2,279	2,479
9,300	1,181	1,640	1,867	2,081	2,290	2,491
9,350	1,187	1,648	1,876	2,091	2,301	2,503
9,400	1,192	1,656	1,885	2,101	2,311	2,515
9,450	1,198	1,663	1,894	2,111	2,322	2,527
9,500	1,203	1,671	1,902	2,121	2,333	2,539
9,550	1,209	1,679	1,911	2,131	2,344	2,551
9,600	1,214	1,687	1,920	2,141	2,355	2,563
9,650	1,220	1,694	1,929	2,151	2,366	2,574
9,700	1,226	1,702	1,938	2,161	2,377	2,586
9,750	1,231	1,710	1,947	2,171	2,388	2,598
9,800	1,237	1,718	1,956	2,181	2,399	2,610
9,850	1,242	1,725	1,965	2,191	2,410	2,622
9,900	1,248	1,733	1,974	2,201	2,421	2,634
9,950	1,253	1,741	1,983	2,211	2,432	2,646
10,000	1,259	1,749	1,992	2,221	2,443	2,658
10,050	1,264	1,757	2,001	2,231	2,454	2,670
10,100	1,270	1,764	2,010	2,241	2,465	2,682
10,150	1,276	1,772	2,019	2,251	2,476	2,694
10,200	1,281	1,780	2,028	2,261	2,487	2,706
10,250	1,287	1,788	2,036	2,271	2,498	2,718
10,300	1,292	1,795	2,045	2,281	2,509	2,729
10,350	1,298	1,803	2,054	2,291	2,520	2,741
10,400	1,303	1,811	2,063	2,301	2,531	2,753
10,450	1,309	1,819	2,072	2,311	2,542	2,765
10,500	1,313	1,825	2,079	2,318	2,550	2,774
10,550	1,317	1,830	2,085	2,325	2,557	2,782
10,600	1,321	1,835	2,091	2,331	2,564	2,790
10,650	1,325	1,841	2,096	2,338	2,571	2,798
10,700	1,329	1,846	2,102	2,344	2,578	2,805
10,750	1,332	1,851	2,108	2,351	2,586	2,813
10,800	1,336	1,856	2,114	2,357	2,593	2,821
10,850	1,340	1,862	2,120	2,364	2,600	2,829
10,900	1,344	1,867	2,126	2,370	2,607	2,836
10,950	1,348	1,872	2,131	2,377	2,614	2,844
11,000	1,351	1,877	2,137	2,383	2,621	2,852
11,050	1,355	1,883	2,143	2,390	2,628	2,860
11,100	1,359	1,888	2,149	2,396	2,636	2,868
11,150	1,363	1,893	2,155	2,403	2,643	2,875
11,200	1,367	1,898	2,161	2,409	2,650	2,883
11,250	1,371	1,904	2,166	2,415	2,657	2,891
11,300	1,374	1,909	2,172	2,422	2,664	2,899
11,350	1,378	1,914	2,178	2,428	2,671	2,906
11,400	1,382	1,919	2,184	2,435	2,678	2,914
11,450	1,386	1,925	2,190	2,441	2,686	2,922
11,500	1,390	1,930	2,195	2,448	2,693	2,930
11,550	1,394	1,935	2,201	2,454	2,700	2,938
11,600	1,397	1,940	2,207	2,461	2,707	2,945
11,650	1,401	1,946	2,213	2,467	2,714	2,953
11,700	1,405	1,951	2,219	2,474	2,721	2,961
11,750	1,409	1,956	2,225	2,480	2,728	2,969
11,800	1,413	1,961	2,230	2,487	2,736	2,976
11,850	1,417	1,967	2,236	2,493	2,743	2,984
11,900	1,420	1,972	2,242	2,500	2,750	2,992
11,950	1,424	1,977	2,248	2,506	2,757	3,000
12,000	1,428	1,982	2,254	2,513	2,764	3,007
12,050	1,432	1,988	2,260	2,519	2,771	3,015
12,100	1,436	1,993	2,265	2,526	2,779	3,023
12,150	1,439	1,998	2,271	2,532	2,786	3,031

Georgia Schedule of Basic Child Support Obligations						
COMBINED ADJUSTED GROSS INCOME	ONE CHILD	TWO CHILDREN	THREE CHILDREN	FOUR CHILDREN	FIVE CHILDREN	SIX CHILDREN
12,200	1,443	2,003	2,277	2,539	2,793	3,039
12,250	1,447	2,009	2,283	2,545	2,800	3,046
12,300	1,451	2,014	2,289	2,552	2,807	3,054
12,350	1,455	2,019	2,295	2,558	2,814	3,062
12,400	1,459	2,024	2,300	2,565	2,821	3,070
12,450	1,462	2,030	2,306	2,571	2,829	3,077
12,500	1,466	2,035	2,312	2,578	2,836	3,085
12,550	1,470	2,040	2,318	2,584	2,843	3,093
12,600	1,474	2,045	2,324	2,591	2,850	3,101
12,650	1,477	2,050	2,329	2,597	2,857	3,108
12,700	1,481	2,055	2,335	2,603	2,863	3,115
12,750	1,484	2,060	2,340	2,609	2,870	3,123
12,800	1,487	2,064	2,345	2,615	2,877	3,130
12,850	1,491	2,069	2,351	2,621	2,883	3,137
12,900	1,494	2,074	2,356	2,627	2,890	3,144
12,950	1,497	2,078	2,361	2,633	2,896	3,151
13,000	1,501	2,083	2,367	2,639	2,903	3,158
13,050	1,504	2,087	2,372	2,645	2,909	3,165
13,100	1,507	2,092	2,377	2,651	2,916	3,172
13,150	1,510	2,097	2,383	2,657	2,922	3,180
13,200	1,514	2,101	2,388	2,663	2,929	3,187
13,250	1,517	2,106	2,393	2,668	2,935	3,193
13,300	1,520	2,110	2,398	2,674	2,941	3,200
13,350	1,523	2,114	2,403	2,679	2,947	3,206
13,400	1,526	2,118	2,408	2,685	2,953	3,213
13,450	1,529	2,123	2,413	2,690	2,959	3,220
13,500	1,532	2,127	2,418	2,696	2,965	3,226
13,550	1,535	2,131	2,423	2,701	2,971	3,233
13,600	1,538	2,136	2,428	2,707	2,977	3,239
13,650	1,541	2,140	2,432	2,712	2,983	3,246
13,700	1,544	2,144	2,437	2,718	2,989	3,253
13,750	1,547	2,148	2,442	2,723	2,996	3,259
13,800	1,550	2,153	2,447	2,729	3,002	3,266
13,850	1,553	2,157	2,452	2,734	3,008	3,272
13,900	1,556	2,161	2,457	2,740	3,014	3,279
13,950	1,559	2,166	2,462	2,745	3,020	3,285
14,000	1,562	2,170	2,467	2,751	3,026	3,292
14,050	1,565	2,174	2,472	2,756	3,032	3,299
14,100	1,568	2,178	2,477	2,762	3,038	3,305
14,150	1,571	2,183	2,482	2,767	3,044	3,312
14,200	1,574	2,187	2,487	2,773	3,050	3,318
14,250	1,577	2,191	2,492	2,778	3,056	3,325
14,300	1,581	2,195	2,497	2,784	3,062	3,332
14,350	1,584	2,200	2,502	2,789	3,068	3,338
14,400	1,587	2,204	2,506	2,795	3,074	3,345
14,450	1,590	2,208	2,511	2,800	3,080	3,351
14,500	1,593	2,213	2,516	2,806	3,086	3,358
14,550	1,596	2,217	2,521	2,811	3,092	3,365
14,600	1,599	2,221	2,526	2,817	3,098	3,371
14,650	1,602	2,225	2,531	2,822	3,104	3,378
14,700	1,605	2,230	2,536	2,828	3,111	3,384
14,750	1,608	2,234	2,541	2,833	3,117	3,391
14,800	1,611	2,238	2,546	2,839	3,123	3,397
14,850	1,614	2,243	2,551	2,844	3,129	3,404
14,900	1,617	2,247	2,556	2,850	3,135	3,411
14,950	1,620	2,251	2,561	2,855	3,141	3,417
15,000	1,623	2,255	2,566	2,861	3,147	3,424
15,050	1,626	2,260	2,571	2,866	3,153	3,430
15,100	1,629	2,264	2,576	2,872	3,159	3,437
15,150	1,632	2,268	2,581	2,877	3,165	3,444
15,200	1,635	2,272	2,585	2,883	3,171	3,450
15,250	1,638	2,277	2,590	2,888	3,177	3,457
15,300	1,641	2,281	2,595	2,894	3,183	3,463
15,350	1,644	2,285	2,600	2,899	3,189	3,470
15,400	1,647	2,290	2,605	2,905	3,195	3,476
15,450	1,650	2,294	2,610	2,910	3,201	3,483
15,500	1,653	2,298	2,615	2,916	3,207	3,490
15,550	1,656	2,302	2,620	2,921	3,213	3,496
15,600	1,659	2,307	2,625	2,927	3,219	3,503
15,650	1,663	2,311	2,630	2,932	3,226	3,509
15,700	1,666	2,315	2,635	2,938	3,232	3,516
15,750	1,669	2,320	2,640	2,943	3,238	3,523
15,800	1,672	2,324	2,645	2,949	3,244	3,529
15,850	1,675	2,328	2,650	2,954	3,250	3,536
15,900	1,678	2,332	2,655	2,960	3,256	3,542
15,950	1,681	2,337	2,659	2,965	3,262	3,549
16,000	1,684	2,341	2,664	2,971	3,268	3,555
16,050	1,687	2,345	2,669	2,976	3,274	3,562

Georgia Schedule of Basic Child Support Obligations						
COMBINED ADJUSTED GROSS INCOME	ONE CHILD	TWO CHILDREN	THREE CHILDREN	FOUR CHILDREN	FIVE CHILDREN	SIX CHILDREN
16,100	1,690	2,349	2,674	2,982	3,280	3,569
16,150	1,692	2,353	2,678	2,986	3,285	3,574
16,200	1,695	2,356	2,682	2,990	3,289	3,579
16,250	1,698	2,360	2,686	2,994	3,294	3,584
16,300	1,700	2,363	2,689	2,999	3,299	3,589
16,350	1,703	2,367	2,693	3,003	3,303	3,594
16,400	1,706	2,370	2,697	3,007	3,308	3,599
16,450	1,708	2,374	2,701	3,011	3,313	3,604
16,500	1,711	2,377	2,705	3,016	3,317	3,609
16,550	1,714	2,381	2,708	3,020	3,322	3,614
16,600	1,716	2,384	2,712	3,024	3,327	3,619
16,650	1,719	2,388	2,716	3,028	3,331	3,624
16,700	1,722	2,391	2,720	3,033	3,336	3,630
16,750	1,724	2,395	2,724	3,037	3,341	3,635
16,800	1,727	2,398	2,728	3,041	3,345	3,640
16,850	1,730	2,402	2,731	3,045	3,350	3,645
16,900	1,732	2,405	2,735	3,050	3,355	3,650
16,950	1,735	2,409	2,739	3,054	3,359	3,655
17,000	1,737	2,412	2,743	3,058	3,364	3,660
17,050	1,740	2,416	2,747	3,062	3,369	3,665
17,100	1,743	2,419	2,750	3,067	3,373	3,670
17,150	1,745	2,423	2,754	3,071	3,378	3,675
17,200	1,748	2,426	2,758	3,075	3,383	3,680
17,250	1,751	2,430	2,762	3,079	3,387	3,685
17,300	1,753	2,433	2,766	3,084	3,392	3,691
17,350	1,756	2,437	2,769	3,088	3,397	3,696
17,400	1,759	2,440	2,773	3,092	3,401	3,701
17,450	1,761	2,444	2,777	3,096	3,406	3,706
17,500	1,764	2,447	2,781	3,101	3,411	3,711
17,550	1,767	2,451	2,785	3,105	3,415	3,716
17,600	1,769	2,454	2,788	3,109	3,420	3,721
17,650	1,772	2,458	2,792	3,113	3,425	3,726
17,700	1,774	2,461	2,796	3,118	3,429	3,731
17,750	1,777	2,465	2,800	3,122	3,434	3,736
17,800	1,780	2,468	2,804	3,126	3,439	3,741
17,850	1,782	2,472	2,808	3,130	3,443	3,746
17,900	1,785	2,475	2,811	3,135	3,448	3,752
17,950	1,788	2,478	2,815	3,139	3,453	3,757
18,000	1,790	2,482	2,819	3,143	3,457	3,762
18,050	1,793	2,485	2,823	3,147	3,462	3,767
18,100	1,796	2,489	2,827	3,152	3,467	3,772
18,150	1,798	2,492	2,830	3,156	3,471	3,777
18,200	1,801	2,496	2,834	3,160	3,476	3,782
18,250	1,804	2,499	2,838	3,164	3,481	3,787
18,300	1,806	2,503	2,842	3,169	3,485	3,792
18,350	1,809	2,506	2,846	3,173	3,490	3,797
18,400	1,812	2,510	2,849	3,177	3,495	3,802
18,450	1,814	2,513	2,853	3,181	3,499	3,807
18,500	1,817	2,517	2,857	3,186	3,504	3,813
18,550	1,819	2,520	2,861	3,190	3,509	3,818
18,600	1,822	2,524	2,865	3,194	3,513	3,823
18,650	1,825	2,527	2,868	3,198	3,518	3,828
18,700	1,827	2,531	2,872	3,203	3,523	3,833
18,750	1,830	2,534	2,876	3,207	3,528	3,838
18,800	1,833	2,538	2,880	3,211	3,532	3,843
18,850	1,835	2,541	2,884	3,215	3,537	3,848
18,900	1,838	2,545	2,888	3,220	3,542	3,853
18,950	1,841	2,548	2,891	3,224	3,546	3,858
19,000	1,843	2,552	2,895	3,228	3,551	3,863
19,050	1,846	2,555	2,899	3,232	3,556	3,868
19,100	1,849	2,559	2,903	3,237	3,560	3,874
19,150	1,851	2,562	2,907	3,241	3,565	3,879
19,200	1,854	2,566	2,910	3,245	3,570	3,884
19,250	1,856	2,569	2,914	3,249	3,574	3,889
19,300	1,859	2,573	2,918	3,254	3,579	3,894
19,350	1,862	2,576	2,922	3,258	3,584	3,899
19,400	1,864	2,580	2,926	3,262	3,588	3,904
19,450	1,867	2,583	2,929	3,266	3,593	3,909
19,500	1,870	2,587	2,933	3,271	3,598	3,914
19,550	1,872	2,590	2,937	3,275	3,602	3,919
19,600	1,875	2,594	2,941	3,279	3,607	3,924
19,650	1,878	2,597	2,945	3,283	3,612	3,929
19,700	1,880	2,601	2,948	3,288	3,616	3,935
19,750	1,883	2,604	2,952	3,292	3,621	3,940
19,800	1,886	2,608	2,956	3,296	3,626	3,945
19,850	1,888	2,611	2,960	3,300	3,630	3,950
19,900	1,891	2,615	2,964	3,305	3,635	3,955
19,950	1,893	2,618	2,967	3,309	3,640	3,960

Georgia Schedule of Basic Child Support Obligations						
COMBINED ADJUSTED GROSS INCOME	ONE CHILD	TWO CHILDREN	THREE CHILDREN	FOUR CHILDREN	FIVE CHILDREN	SIX CHILDREN
20,000	1,896	2,622	2,971	3,313	3,644	3,965
20,050	1,899	2,625	2,975	3,317	3,649	3,970
20,100	1,901	2,628	2,979	3,321	3,654	3,975
20,150	1,904	2,632	2,983	3,326	3,658	3,980
20,200	1,907	2,635	2,987	3,330	3,663	3,985
20,250	1,909	2,639	2,990	3,334	3,668	3,990
20,300	1,912	2,642	2,994	3,338	3,672	3,996
20,350	1,915	2,646	2,998	3,343	3,677	4,001
20,400	1,917	2,649	3,002	3,347	3,682	4,006
20,450	1,920	2,653	3,006	3,351	3,686	4,011
20,500	1,923	2,656	3,009	3,355	3,691	4,016
20,550	1,925	2,660	3,013	3,360	3,696	4,021
20,600	1,928	2,663	3,017	3,364	3,700	4,026
20,650	1,931	2,667	3,021	3,368	3,705	4,031
20,700	1,933	2,670	3,025	3,372	3,710	4,036
20,750	1,936	2,674	3,028	3,377	3,714	4,041
20,800	1,938	2,677	3,032	3,381	3,719	4,046
20,850	1,941	2,681	3,036	3,385	3,724	4,051
20,900	1,944	2,684	3,040	3,389	3,728	4,056
20,950	1,946	2,688	3,044	3,394	3,733	4,062
21,000	1,949	2,691	3,047	3,398	3,738	4,067
21,050	1,952	2,695	3,051	3,402	3,742	4,072
21,100	1,954	2,698	3,055	3,406	3,747	4,077
21,150	1,957	2,702	3,059	3,411	3,752	4,082
21,200	1,960	2,705	3,063	3,415	3,756	4,087
21,250	1,962	2,709	3,067	3,419	3,761	4,092
21,300	1,965	2,712	3,070	3,423	3,766	4,097
21,350	1,968	2,716	3,074	3,428	3,770	4,102
21,400	1,970	2,719	3,078	3,432	3,775	4,107
21,450	1,973	2,723	3,082	3,436	3,780	4,112
21,500	1,975	2,726	3,086	3,440	3,784	4,117
21,550	1,978	2,730	3,089	3,445	3,789	4,123
21,600	1,981	2,733	3,093	3,449	3,794	4,128
21,650	1,983	2,737	3,097	3,453	3,798	4,133
21,700	1,986	2,740	3,101	3,457	3,803	4,138
21,750	1,989	2,744	3,105	3,462	3,808	4,143
21,800	1,991	2,747	3,108	3,466	3,812	4,148
21,850	1,994	2,751	3,112	3,470	3,817	4,153
21,900	1,997	2,754	3,116	3,474	3,822	4,158
21,950	1,999	2,758	3,120	3,479	3,827	4,163
22,000	2,002	2,761	3,124	3,483	3,831	4,168
22,050	2,005	2,765	3,127	3,487	3,836	4,173
22,100	2,007	2,768	3,131	3,491	3,841	4,178
22,150	2,010	2,772	3,135	3,496	3,845	4,184
22,200	2,012	2,775	3,139	3,500	3,850	4,189
22,250	2,015	2,779	3,143	3,504	3,855	4,194
22,300	2,018	2,782	3,147	3,508	3,859	4,199
22,350	2,020	2,785	3,150	3,513	3,864	4,204
22,400	2,022	2,788	3,153	3,515	3,867	4,207
22,450	2,024	2,790	3,155	3,517	3,869	4,210
22,500	2,025	2,792	3,157	3,520	3,872	4,212
22,550	2,027	2,793	3,158	3,522	3,874	4,215
22,600	2,028	2,795	3,160	3,524	3,876	4,217
22,650	2,029	2,797	3,162	3,526	3,878	4,220
22,700	2,031	2,799	3,164	3,528	3,881	4,222
22,750	2,032	2,801	3,166	3,530	3,883	4,225
22,800	2,034	2,803	3,168	3,532	3,885	4,227
22,850	2,035	2,804	3,169	3,534	3,888	4,230
22,900	2,036	2,806	3,171	3,536	3,890	4,232
22,950	2,038	2,808	3,173	3,538	3,892	4,235
23,000	2,039	2,810	3,175	3,540	3,894	4,237
23,050	2,041	2,812	3,177	3,542	3,897	4,240
23,100	2,042	2,814	3,179	3,544	3,899	4,242
23,150	2,044	2,816	3,181	3,546	3,901	4,245
23,200	2,045	2,817	3,182	3,548	3,904	4,247
23,250	2,046	2,819	3,184	3,550	3,906	4,250
23,300	2,048	2,821	3,186	3,552	3,908	4,252
23,350	2,049	2,823	3,188	3,555	3,910	4,254
23,400	2,051	2,825	3,190	3,557	3,913	4,257
23,450	2,052	2,827	3,192	3,559	3,915	4,259
23,500	2,053	2,828	3,193	3,561	3,917	4,262
23,550	2,055	2,830	3,195	3,563	3,919	4,264
23,600	2,056	2,832	3,197	3,565	3,922	4,267
23,650	2,058	2,834	3,199	3,567	3,924	4,269
23,700	2,059	2,836	3,201	3,569	3,926	4,272
23,750	2,061	2,838	3,203	3,571	3,929	4,274
23,800	2,062	2,840	3,204	3,573	3,931	4,277
23,850	2,063	2,841	3,206	3,575	3,933	4,279

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	2,936	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. <u>Child One</u>	<u>2007</u>	C4.	
C2. <u>Child Two</u>	<u>2010</u>	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
Additional Expenses				
5. Monthly Work Related Child Care Costs <i>(If none, enter zero)</i>	\$300.00	\$	\$	\$300.00
6. Monthly Health Insurance premium paid for the Children <i>(If none, enter zero)</i>	\$100.00	\$	\$	\$100.00
7. Total Monthly Work Related Child Care and Health Insurance Costs <i>(If none, enter zero)</i>	\$400.00	\$	\$	\$400.00
8. Parents' percentage (%) of Income from Line 2	34%	66%		100%
9. Parents' share of Work Related Child Care and Health Insurance Costs <i>Multiply % on Line 8 for each parent by total monthly amount on Line 7.</i>	\$136.00	\$264.00		\$400.00
10. Parents' Adjusted Child Support Obligation - <i>Each parent's monthly BCSO from Line 4 plus parent's share of work related child care expenses & health insurance costs.</i>	\$431.12	\$836.88		
11. Credit for Monthly Amounts parents actually pay or will pay for Work-Related Child Care and/or Health Insurance Costs	\$400.00	\$ 0.00		
12. Total Parents' Presumptive Child Support Obligation	\$ 31.12	\$836.88		
13. Subtract Social Security offset - <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. Final monthly child support obligation amount for each parent - <i>Only the noncustodial parent(s) will have the duty to pay.</i>	\$ 31.12	\$836.88		
The amount on Line 14 is the Final Child Support Amount.				
Uninsured Health Expenses				
15. Uninsured Health Expenses - <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%		

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

CHILDREN'S EXPENSES

AFFIANT'S OTHER EXPENSES

Child care <u>(total monthly cost)</u>	\$ _____	Dry cleaning/laundry	\$ _____
School tuition	\$ _____	Clothing	\$ _____
<u>Tutoring</u>	\$ _____	Medical, dental, prescription <u>(out of pocket/uncovered expenses)</u>	\$ _____
<u>Private lessons (e.g., music, dance)</u>	\$ _____	Affiant's gifts (special holidays)	\$ _____
School supplies/expenses	\$ _____	Entertainment	\$ _____
Lunch Money	\$ _____	<u>Recreational Expenses (e.g., 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>	\$ _____
Medical, dental, prescription <u>(out of pocket/uncovered expenses)</u>	\$ _____	Alimony paid to former spouse	\$ _____
		Child support paid <u>for other</u>	

TOTAL MONTHLY PAYMENTS TO CREDITORS: \$ _____

C. TOTAL MONTHLY EXPENSES: \$ _____

This _____ day of _____, 20_____.

Affiant

Notary Public

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

[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 ____ % 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 ____.

JUDGE, SUPERIOR COURT OF FLOYD COUNTY

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____,
Plaintiff,
v.
_____,
Defendant
)
)
)
)
) Civil Action File No. _____
)
)
)
)

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

_____)
 Plaintiff,)
 v.)
 _____)
 Defendant.)
 Civil Action No. _____

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.

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____,
Plaintiff,
v. _____
Defendant
)
)
)
)
) Civil Action File No. _____
)
)
)
)

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*