







4. CHANGE IN CHILD SUPPORT

**NOTE:** In order to obtain an increase or decrease in support payments because of a change in income of the person making the payments, the change in income must be both long term and significant. The court will not modify a support order because of a minor or temporary increase or decrease in income. The general guideline for determining whether a change in income is significant is if the change is enough to raise or lower the support payments by 15% or more. **You must attach any documentation you have that supports your request. Examples include pay stubs, tax returns, and proof of social security or disability benefits.**

Do you want the support payments for the above children to be:

- increased       decreased       no change in support payments

Check all of the following boxes that explain why you are requesting an increase or decrease. [Attach extra pages if necessary.]

a.  The income of the person making the child support payments has **increased or decreased**. *(If you check this box, attach documentation of the increase or decrease and explain why it has occurred.)*\_\_\_\_\_

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

b.  Support payments should be changed because there has been a change in where the children are living. *(If you check this box, list the dates when the living arrangements changed, explain what the current living arrangements are, and attach any documents you have to support your claim.)*\_\_\_\_\_

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

c.  Support payments should be changed because there has been a change in the availability or cost of medical insurance for the children or because medical expenses for the children have increased or decreased. *(If you check this box, attach all available documents that support the requested change.)*\_\_\_\_\_

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

d.  Other *(Be specific and attach any supporting documents.)*\_\_\_\_\_

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

**Income Withholding.** If your current support order in this case does not require immediate income withholding but CSSD is enforcing the order, the court will be required to order immediate income withholding in its modification order unless one of the three exceptions authorized by Alaska Statute 25.27.062(m) applies. For an explanation of those exceptions, see form DR-10, pages 13-14 (available at the court).

Is CSSD currently enforcing your support order  Yes  No  
If yes, is there a reason why the court should not order immediate income withholding?

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**5. REQUIRED ATTACHMENTS. Each of the items listed below MUST be attached to this motion.** Check each box to indicate that you have completed and attached the item.

- A copy of your most recent child support order
- Child Custody Jurisdiction Affidavit (form DR-150)
- Child Support Guidelines Affidavit (form DR-305)
- Shared Custody Child Support Calculation (form DR-306) (*required only if shared custody has been ordered or is being requested*) or form DR-307 (*for divided custody*) or form DR-308 (*for hybrid custody*).
- All documentation needed to support your request for a change in custody, visitation or support.

**OATH OR AFFIRMATION**

**NOTE:** You must sign this in front of a notary. A court clerk can provide this notary service for you at no charge. Bring a photo ID with you for the notarization.

I swear or affirm that the above statements and any attachments are true to the best of my knowledge and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Person Filing Motion

\_\_\_\_\_  
Printed Name

Subscribed and sworn to or affirmed before me at \_\_\_\_\_, Alaska  
on \_\_\_\_\_.

Date

\_\_\_\_\_  
Clerk of Court, Notary Public or other  
person authorized to administer oaths.

(SEAL)

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

*[You must complete the Certificate of Service on the next page.]*

**CERTIFICATE OF SERVICE**  
*[MUST BE COMPLETED]*

I certify that I served a copy of this motion and all the documents checked in paragraph 5 as shown below:

**On Other Parent** *(Instructions: You must also send a Response Packet to the other parent.)*

I  mailed (first class mail)  hand delivered  
to the other parent a copy of (1) this motion and all documents checked in paragraph 5  
and (2) a Response Packet.

Name of Other Parent: \_\_\_\_\_

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

Date mailed or delivered: \_\_\_\_\_

**On Other Parent's Attorney** *(Instructions: If the other parent was represented by an attorney within the last year, you must send the attorney a copy of this motion and all the documents checked in paragraph 5.)*

I  mailed (first class mail)  hand delivered  
to the attorney a copy of this motion and all the documents checked in paragraph 5.

Name of Other Party's Attorney: \_\_\_\_\_

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

Date mailed or delivered: \_\_\_\_\_

**On the Child Support Services Division** *(Instructions: If the Child Support Services Division (CSSD) is enforcing this order, you must send a copy of this motion and all the documents checked in paragraph 5 to the Attorney General's Office.)*

I  mailed (first class mail)  hand delivered  
a copy of this motion and all the documents checked in paragraph 5 to:

Attorney General's Office  
Collections and Support Section  
1031 West Fourth Avenue, Suite 200  
Anchorage, AK 99501

Date mailed or delivered: \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Filing Motion