



June 25, 2020

TO: Judges, Commissioners, County Clerks, Court Administrators,  
Court Facilitators, Libraries, Attorneys, and the Public




FROM: Ashley Tam, AOC Sr. Legal Analyst

RE: Summary of Changes to Family Law Forms (June 2020)

The Washington Pattern Forms Committee updated the Family Law pattern forms to incorporate the changes from the [Laws of 2020, ch. 227, SHB 2302](#), Child Support – Various Provisions, and changes over time to 25 C.F.R. §§ 23.11 (Notice), 23.111 (What are the notice requirements for a child-custody proceeding involving an Indian child). These forms were also updated for other reasons, including to address user feedback, improve form accuracy, use more inclusive terms, and increase the clarity of information contained in these forms.

To provide a timely Summary of Changes for our court form users, we have switched to creating the Family Law Summary of Changes using Adobe Acrobat Pro's Compare Tool. Depending on your .pdf reader and software version, you now have more options to create a customized report to meet your needs.

Some tips on using our Summary of Changes in Adobe Acrobat 2017:

1. Use the Bookmarks in the left pane to locate the form you would like to review. (Look for the  icon.) Click on the name of the form.
2. Hover over icons (e.g., a message bubble or white "x" enclosed in red circle) in the document to see changes appear in a pop-up text box, or click on the icons to see them in the right pane.
3. To filter the types of changes you would like to see:
  - a. Select  **Comment** in the right pane. If you don't see the Comment icon to the right, go to View in your menu bar, then select Tools>Comment>Open.
  - b. Click on the upside down triangle next to the filter  icon in the right pane.
  - c. Select Reviewer, and then choose the types of changes you would like to view in the Summary of Changes.
4. If you select the three dots next to the filter icon, you will see an option to "Print with Comment Summary. . ."



We have one change that was not flagged in our Summary of Changes. For FL 201 – Petition for Divorce, section 7 Jurisdiction:

The **No home state or home state declined** option was incorrectly aligned as an option under **Home state jurisdiction** in the March 2020 version. The **No home state or home state declined** is now properly aligned as an alternative option to **Home state jurisdiction** in the June 2020 version. The version of the form contained in this Summary of Changes shows the proper placement of this option. (Note: Underlines indicate additions, and strikethroughs indicate deletions below.)

Change indentation of option:

☐ **Home state jurisdiction** – Washington is the children’s home state because  
(check all that apply):

☐ (Children’s names): \_\_\_\_\_ lived in Washington with a parent or someone acting as a parent for at least the 6 months just before this case was filed, or if the children are less than 6 months old, they have lived in Washington with a parent or someone acting as a parent since birth.

☐ There were times the children were not in Washington in the 6 months just before this case was filed (or since birth if they are less than 6 months old), but those were temporary absences.

☐ (Children’s names): \_\_\_\_\_ do not live in Washington right now, but Washington was the children’s home state sometime in the 6 months just before this case was filed, and a parent or someone acting as a parent of the children still lives in Washington.

☐ (Children’s names): \_\_\_\_\_ do not have another home state.

☐ **No home state or home state declined** – No court of any other state (or tribe) has the jurisdiction to make decisions for (children’s names): \_\_\_\_\_, or a court in the children’s home state (or tribe) decided it is better to have this case in Washington and:

- The children and a parent or someone acting as a parent have ties to Washington beyond just living here; **and**
- There is a lot of information (substantial evidence) about the children’s care, protection, education and relationships in this state.

To provide feedback about our Summary of Changes or our court forms, please complete our online form at:

<http://www.courts.wa.gov/forms/?fa=forms.comments>.



6/17/2020 4:38:57 PM

# Compare Results

Old File:

**FL All Family 001 Confidential Info Form.pdf**

**2 pages (337 KB)**

5/6/2016 12:13:30 PM

versus

New File:

**FL All Family 001 Confidential Info Form\_2020  
06.pdf**

**2 pages (493 KB)**

6/10/2020 1:01:23 PM

## Total Changes

65

## Content

19 Replacements

19 Insertions

25 Deletions

## Styling and Annotations

2 Styling

0 Annotations

[Go to First Change \(page 1\)](#)



## Confidential Information (CIF)

Clerk: Do not file in a public access file

Superior Court of Washington,

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

Case No.: \_\_\_\_\_

**Important!** Only court staff and some state agencies may see this form. The other party and *their* lawyer may not see this form unless a court order allows it. State agencies may disclose the information in this form according to their own rules.

1. Who is completing this form? (Name): \_\_\_\_\_

2. Is there a current restraining or protection order involving the parties or children? ☐ Yes ☐ No

If yes, who does the order protect? (Name) \_\_\_\_\_

3. Does your address information need to be confidential to protect your or your children's health, safety, or liberty? (Check one): ☐ Yes ☐ No

If yes, explain why? \_\_\_\_\_

4. **Your Information** This person is a (check one): ☐ Petitioner ☐ Respondent

Interpreter needed? ☐ Yes ☐ No Language, if yes: \_\_\_\_\_

Full name (first, middle, last):		Date of birth (MM/DD/YYYY):	Sex:
Driver's license/Identicard (No., state):	Race:	Relationship to children in this case:	
Mailing address (This address will <b>not</b> be kept private.) (street address or P.O. box, city, state zip):			

If your case is **only** about a protection order, **skip to section 5.**

Home address (check one): <input type="checkbox"/> same as mailing address <input type="checkbox"/> listed below (street, city, state, zip):		
Phone:	Email:	Social Sec. No.:
Employer's name:		Employer's phone:
Employer's address:		

5. **Other Party's Information** – This person is a (check one): ☐ Petitioner ☐ Respondent

Interpreter needed? ☐ Yes ☐ No Language, if yes: \_\_\_\_\_

Full name (first, middle, last):		Date of birth (MM/DD/YYYY):	Sex:
Driver's license/Identicard (No., state):	Race:	Relationship to children in this case:	
Mailing address (This address will <b>not</b> be kept private.) (street address or PO box, city, state zip):			

If your case is **only** about a protection order, **skip to section 6.**



Home address (check one): <input type="checkbox"/> same as mailing address <input type="checkbox"/> listed below (street, city, state, zip):		
Phone:	Email:	Social Sec. No.:
Employer's name:		Employer's phone:
Employer's address:		

➤ **Skip sections 6–9 if your case does not involve children. Sign at the end.**

**6. Children's Information** (You do not have to fill out the children's Social Security numbers if your case is only about a protection order.)

Child's full name (first, middle, last)	Date of birth (MM/DD/YYYY)	Race	Sex	Soc. Sec. No.	Current location: lives with
1.					<input type="checkbox"/> You <input type="checkbox"/> other party: _____
2.					<input type="checkbox"/> You <input type="checkbox"/> other party: _____
3.					<input type="checkbox"/> You <input type="checkbox"/> other party: _____
4.					<input type="checkbox"/> You <input type="checkbox"/> other party: _____

**7. Have the children lived with anyone other than you or the other party during the last five years?** (Check one): ☐ No ☐ Yes If yes, fill out below:

Children lived with (name)	That person's current address
1.	
2.	

**8. Do other people (not parents) have custody or visitation rights to the children?**

(Check one): ☐ No ☐ Yes If yes, fill out below:

Person with rights (name)	That person's current address
1.	
2.	

**9. If you are asking for custody and are not the parent, list all other adults living in your home:**

1. (Name):	Date of birth (MM/DD/YYYY):
2. (Name):	Date of birth (MM/DD/YYYY):

I declare under penalty of perjury under Washington State law that the information on this form about me is true. The information about the other party is the best information I have or is unavailable because (explain): \_\_\_\_\_

☐ Check here if you need more space to list other Petitioners, Respondents, or children. Put that information on the Attachment to Confidential Information, form FL All Family 002, and attach it to this form.

Signed at (city and state): \_\_\_\_\_ Date: \_\_\_\_\_



Petitioner/Respondent signs here

Print name here

RCW 26.23.050, 26.50.160,

Confidential Information

26.27.281; GR 22

Mandatory Form (06/2020)

p. 2 of 2

FL All Family 001



# Compare Results

Old File:

**FL All Family 002 Confidential Info Form  
Attachment.pdf**

**1 page (317 KB)**  
5/6/2016 12:13:51 PM

versus

New File:

**FL All Family 002 Confidential Info Form  
Attachment\_2020 06.pdf**

**1 page (387 KB)**  
6/10/2020 1:03:04 PM

## Total Changes

56

## Content

10 Replacements

15 Insertions

26 Deletions

## Styling and Annotations

5 Styling

0 Annotations

[Go to First Change \(page 1\)](#)



**Attachment to  
Confidential Information  
(Additional Parties or Children)**

(AT)

**Clerk: Do not file in a public access file**

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

Case No.: \_\_\_\_\_

**Use this form** if there are more parties or children in your case than you can list on the Confidential Information form.

- 1. Other Party's Information (if any)** – This person is a (check one): ☒ Petitioner ☐ Respondent  
Interpreter needed? ☐ Yes ☐ No Language, if yes: \_\_\_\_\_

Full name (first, middle, last):		Date of birth (MM/DD/YYYY):	Sex:
Driver's license/Identicard (No., state):	Race:	Relationship to children in this case:	
Mailing address (This address will <b>not</b> be kept private.) (street address or PO box, city, state zip):			

If your case is **only** about a protection orders, **skip to section 2**.

Home address (check one): <input type="checkbox"/> same as mailing address <input type="checkbox"/> listed below (street, city, state, zip):		
Phone:	Email:	Social Sec. No.:
Employer's name:		Employer's phone:
Employer's address:		

- Other Children's Information (if any)** (You do not have to fill out the children's Social Security numbers if your case is only about a protection order.)

Child's full name (first, middle, last)	Date of birth (MM/DD/YYYY)	Race	Sex	Soc. Sec. No.	Current location: lives with
5.					<input type="checkbox"/> You <input type="checkbox"/> Other party: _____
6.					<input type="checkbox"/> You <input type="checkbox"/> Other party: _____
7.					<input type="checkbox"/> You <input type="checkbox"/> Other party: _____
8.					<input type="checkbox"/> You <input type="checkbox"/> Other party: _____
9.					<input type="checkbox"/> You <input type="checkbox"/> Other party: _____
10.					<input type="checkbox"/> You <input type="checkbox"/> Other party: _____



6/18/2020 11:13:48 AM

# Compare Results

Old File:

**FL All Family 101 Proof of Personal  
Service\_2019 07.pdf**

**3 pages (192 KB)**  
7/26/2019 10:52:17 AM

versus

New File:

**FL All Family 101 Proof of Personal  
Service\_2020 06.pdf**

**3 pages (193 KB)**  
6/10/2020 1:04:34 PM

## Total Changes

13

## Content

5 Replacements  
5 Insertions  
3 Deletions

## Styling and Annotations

0 Styling  
0 Annotations

[Go to First Change \(page 1\)](#)



Superior Court of Washington, County of \_\_\_\_\_

In re:

Petitioner/s (*person/s who started this case*):

\_\_\_\_\_

And Respondent/s (*other party/parties*):

\_\_\_\_\_

No. \_\_\_\_\_

Proof of Personal Service  
(AFSR)

## Proof of Personal Service

*Server declares:*

- 1.** My name is: \_\_\_\_\_. I am **not** a party to this case.  
I am 18 or older.

**2. Personal Service**

I served court documents for this case to (*name of party*): \_\_\_\_\_  
by (*check one*):

☐ giving the documents directly to him/her. ❌

☐ giving the documents to (*name*): \_\_\_\_\_,  
a person of suitable age and discretion who lives at the same address as the party.

**3. Date, time, and address of service**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ [ ☐ ] a.m. [ ☐ ] p.m.

Address:

\_\_\_\_\_  
*Number and street* *city* *state* *zip*



**4. List all documents you served (check all that apply):**

(The most common documents are listed below. Check only those documents that were served. Use the "Other" boxes to write in the title of each document you served that is not already listed.)

<input type="checkbox"/> Petition to/for _____	
<input type="checkbox"/> Summons (Attach a copy.)	<input type="checkbox"/> Notice of Hearing _____
<input type="checkbox"/> Order Setting Case Schedule	<input type="checkbox"/> Motion for Temporary Family Law Order <input type="checkbox"/> and Restraining Order
<input type="checkbox"/> Notice Re: Military Dependent	<input type="checkbox"/> Proposed Temporary Family Law Order
<input type="checkbox"/> Proposed Parenting Plan	<input type="checkbox"/> Motion for Immediate Restraining Order (Ex Parte)
<input type="checkbox"/> Proposed Child Support Order	<input type="checkbox"/> Immediate Restraining Order (Ex Parte) and Hearing Notice
<input type="checkbox"/> Proposed Child Support Worksheets	<input type="checkbox"/> Restraining Order
<input type="checkbox"/> Sealed Financial Documents	<input type="checkbox"/> Motion for Contempt Hearing
<input type="checkbox"/> Financial Declaration	<input type="checkbox"/> Order to Go to Court for Contempt Hearing
<input type="checkbox"/> Information for Temporary Parenting Plan	<input type="checkbox"/> Motion for Adequate Cause Decision
<input type="checkbox"/> Declaration of: _____	<input type="checkbox"/> Notice of Intent to Move with Children (Relocation)
<input type="checkbox"/> Declaration of: _____	<input type="checkbox"/> Objection about Moving with Children and Petition about Changing a Parenting/ Custody Order (Relocation)
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

**5. Fees charged for service**

☐ Does not apply.

☐ Fees: \$ \_\_\_\_\_ + Mileage \$ \_\_\_\_\_ = Total: \$ \_\_\_\_\_

**6. Other Information (if any):** \_\_\_\_\_  
\_\_\_\_\_

I declare under penalty of perjury under the laws of the state of Washington that the statements on this form are true.

Signed at (city and state): \_\_\_\_\_ Date: \_\_\_\_\_



Signature of server

Print or type name of server



**To the party having these documents served:**

- File the original *Proof of Personal Service* with the court clerk.
- If you served a *Restraining Order* signed by the court, you must also give a copy of this *Proof of Personal Service* and a *Law Enforcement Information Sheet* to law enforcement.
- If the documents were personally served outside of Washington state, you must fill out and file form FL All Family 102 (*Declaration: Personal Service Could Not be Made in Washington*).

☐ **To the Server:** check here if you personally served the documents *outside* Washington state. Your signature must be notarized or sworn before a court clerk.

(For personal service in Washington state, your signature does **not** need to be notarized or sworn before a court clerk.)

Signed and sworn to before me on (date): \_\_\_\_\_.



\_\_\_\_\_  
Signature of notary or court clerk

\_\_\_\_\_  
Print name of notary or court clerk

☐ I am a notary public in and for the state of:

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

☐ I am a court clerk in a court of record in

(county): \_\_\_\_\_

(state): \_\_\_\_\_

(Print seal above.)



# Compare Results

Old File:

**FL All Family 106 Summons Served by  
Mail.pdf**

**3 pages (355 KB)**  
5/6/2016 12:27:50 PM

versus

New File:

**FL All Family 106 Summons Served by  
Mail\_2020 06.pdf**

**3 pages (406 KB)**  
6/10/2020 1:06:05 PM

## Total Changes

41

## Content

7 Replacements  
19 Insertions  
12 Deletions

## Styling and Annotations

3 Styling  
0 Annotations

[Go to First Change \(page 1\)](#)



Superior Court of Washington, County of \_\_\_\_\_

In re:

Petitioner/s (*person/s who started this case*):

\_\_\_\_\_

And Respondent/s (*other party/parties*):

\_\_\_\_\_

No. \_\_\_\_\_

Summons Served by Mail  
(SM)

**Summons Served by Mail**

To (*other party's name/s*): \_\_\_\_\_

I have started a court case by filing a petition. The name of the Petition is:

\_\_\_\_\_

You must respond in writing if you want the court to consider your side.

**Deadline!** Your *Response* must be **filed and served** within **90 days** of the date this summons is mailed. If you do not file and serve your *Response* or a *Notice of Appearance* by the deadline:

- No one has to notify you about other hearings in this case, and
- The court may approve the requests in the *Petition* without hearing your side (called a *default judgment*).

Follow these steps:

**1. Read** the *Petition* and any other documents that were mailed with this *Summons*. Those documents explain what the other party is asking for.

**2. Fill out** a *Response* on this form (*check the Response that matches the Petition*):

☐ FL Divorce 211, *Response to Petition about a Marriage*

☐ FL Divorce 212, *Response to Petition about a Registered Domestic Partnership*

☐ FL Non-Parent 415, *Response to Non-Parent Custody Petition*



- ☐ FL Non-Parent 452, *Response to Terminate or Change Non-Parent Custody Order*
- ☐ FL Parentage 302, *Response to Petition to Decide Parentage*
- ☐ FL Parentage 332, *Response to Petition for Parenting Plan, Residential Schedule and/or Child Support*
- ☐ FL Parentage 342, *Response to Petition for De Facto Parentage*
- ☐ FL Parentage 382, *Response to Petition to Stop Parentage Based on Sexual Assault*
- ☐ FL Modify 502, *Response to Petition to Modify Child Support Order*
- ☐ FL Modify 602, *Response to Petition to Change Parenting Plan, Residential Schedule or Custody Order*
- ☐ FL Relocation 722, *Response to Objection about Moving with Children and Petition about Changing a Parenting/Custody Order (Relocation)*
- ☐ FL Visits 476, *Response to Petition for Visits*
- ☐ Other (specify): \_\_\_\_\_

**You can get the *Response* form and other forms you need at:**

- The Washington State Courts' website: [www.courts.wa.gov/forms](http://www.courts.wa.gov/forms)
- Washington LawHelp: [www.washingtonlawhelp.org](http://www.washingtonlawhelp.org), or
- The Superior Court Clerk's office or county law library (for a fee).

**3. Serve** (give) a copy of your *Response* to the person who filed this *Summons* at the address below, and to any other parties. You may use certified mail with return receipt requested. For more information on how to serve, read Superior Court Civil Rule 5.

**4. File** your original *Response* with the court clerk at this address:

Superior Court Clerk, \_\_\_\_\_ County

\_\_\_\_\_  
address city state zip

**5. Lawyer not required:** It is a good idea to talk to a lawyer, but you may file and serve your *Response* without one.

**Person filing this Summons or his/her lawyer fills out below:**

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Print name and WSBA No., if any

I agree to accept legal papers for this case at (check one):



☐ Lawyer's address:


\_\_\_\_\_  
lawyer's address city state zip

Email (if applicable): \_\_\_\_\_



[ ] the following address (*this does **not** have to be your home address*):

 \_\_\_\_\_  
address city state zip 

 (If this address changes before the case ends, you **must** notify all parties and the court in writing. You may use the Notice of Address Change form (FL All Family 120). You must also update your Confidential Information Form (FL All Family 001) if this case involves parentage or child support.)

Note: You and the other party/ies may agree to accept legal papers by email under Superior Court Civil Rule 5 and local court rules.

*This Summons is issued according to Rule 4.1 of the Superior Court Civil Rules of the **state** of Washington.*



6/18/2020 11:32:59 AM

# Compare Results

Old File:

**FL All Family 110 Summons Served by  
Publication.pdf**

**3 pages (361 KB)**  
5/6/2016 12:29:35 PM

versus

New File:

**FL All Family 110 Summons Served by  
Publication\_2020 06.pdf**

**3 pages (408 KB)**  
6/10/2020 1:07:35 PM

## Total Changes

58

## Content

11 Replacements  
23 Insertions  
23 Deletions

## Styling and Annotations

1 Styling  
0 Annotations

[Go to First Change \(page 1\)](#)



Superior Court of Washington, County of \_\_\_\_\_

In re:

Petitioner/s (person/s who started this case):

\_\_\_\_\_

And Respondent/s (other party/parties):

\_\_\_\_\_

No. \_\_\_\_\_

Summons Served by Publication  
(SMPB)

## Summons Served by Publication

(Note to Publisher: Publish everything but the text following unchecked boxes. Fill in the date of the first publication.)

To (other party's name/s): \_\_\_\_\_

I have started a court case by filing a petition. The name of the Petition is:

\_\_\_\_\_

You must respond in writing if you want the court to consider your side.

**Deadline!** Your Response must be **filed and served** within **60 days** of the date this **Summons** is published (Publisher enter date of first publication here): \_\_\_\_\_. If you do not file and serve your Response or a Notice of Appearance by the deadline:

- No one has to notify you about other hearings in this case, and
- The court may approve the requests in the *Petition* without hearing your side (called a *default judgment*).

Follow these steps:

1. **Read** the *Petition* and any other documents that were filed at court with this *Summons*. Those documents explain what the other party is asking for.



**2. Fill out a Response** on this form (check the Response that matches the Petition):

- ☐ FL Divorce 211, Response to Petition about a Marriage
- ☐ FL Divorce 212, Response to Petition about a Registered Domestic Partnership
- ☐ FL Non-Parent 415, Response to Non-Parent Custody Petition
- ☐ FL Non-Parent 452, Response to Terminate or Change Non-Parent Custody Order
- ☐ FL Parentage 302, Response to Petition to Decide Parentage
- ☐ FL Parentage 332, Response to Petition for Parenting Plan, Residential Schedule and/or Child Support
- ☐ FL Parentage 342, Response to Petition for De Facto Parentage
- ☐ FL Parentage 382, Response to Petition to Stop Parentage Based on Sexual Assault
- ☐ FL Modify 502, Response to Petition to Modify Child Support Order
- ☐ FL Modify 602, Response to Petition to Change Parenting Plan, Residential Schedule or Custody Order
- ☐ FL Relocation 722, Response to Objection about Moving with Children and Petition about Changing a Parenting/Custody Order (Relocation)
- ☐ FL Visits 476, Response to Petition for Visits
- ☐ Other (specify): \_\_\_\_\_

**You can get the Response form and other forms you may need at:**

- The Washington State Courts' website: [www.courts.wa.gov/forms](http://www.courts.wa.gov/forms)
- Washington LawHelp: [www.washingtonlawhelp.org](http://www.washingtonlawhelp.org), or
- The Superior Court Clerk's office or county law library (for a fee).

**3. Serve** (give) a copy of your Response to the person who filed this Summons at the address below, and to any other parties. You may use certified mail with return receipt requested. For more information on how to serve, read Superior Court Civil Rule 5.

**4. File** your original Response with the court clerk at this address:

Superior Court Clerk, \_\_\_\_\_ County

\_\_\_\_\_  
address city state zip

**5. Lawyer not required:** It is a good idea to talk to a lawyer, but you may file and serve your Response without one.

**Person filing this Summons or his/her lawyer fills out below:**

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Print name and WSBA No., if any



I agree to accept legal papers for this case at (check one):

☐ Lawyer's address:

\_\_\_\_\_  
lawyer's address city state zip

Email (if applicable): \_\_\_\_\_

☐ the following address (this does **not** have to be your home address):

\_\_\_\_\_  
address city state zip

(If this address changes before the case ends, you **must** notify all parties and the court in writing. You may use the Notice of Address Change form (FL All Family 120). You must also update your Confidential Information Form (FL All Family 001) if this case involves parentage or child support.)

Note: You and the other party/ies may agree to accept legal papers by email under Superior Court Civil Rule 5 and local court rules.

This Summons is issued according to Rule 4.1 of the Superior Court Civil Rules of the **state** of Washington.



# Compare Results

Old File:

**FL All Family 130 Child Support Order\_2019  
07.pdf**

**15 pages (674 KB)**  
7/22/2019 3:20:01 PM

versus

New File:

**FL All Family 130 Child Support Order\_2020  
06.pdf**

**16 pages (680 KB)**  
6/10/2020 1:55:51 PM

## Total Changes

119

## Content

17 Replacements  
53 Insertions  
48 Deletions

## Styling and Annotations

1 Styling  
0 Annotations

[Go to First Change \(page 1\)](#)



Superior Court of Washington, County of \_\_\_\_\_

In re:

Petitioner/s *(person/s who started this case)*:

\_\_\_\_\_

And Respondent/s *(other party/parties)*:

\_\_\_\_\_

No. \_\_\_\_\_

Child Support Order

☐ Temporary (TMORS)

☐ Final (ORS)

 Clerk's action required: WSSR, 1

## Child Support Order

### 1. Money Judgment Summary

☐ No money judgment is ordered.

☐ Summarize any money judgments from section **22** in the table below.

Judgment for	Debtor's name <i>(person who must pay money)</i>	Creditor's name <i>(person who must be paid)</i>	Amount	Interest
Past due child support from _____ to _____			\$	\$
Past due medical support from _____ to _____			\$	\$
Past due children's exp. from _____ to _____			\$	\$
Other amounts <i>(describe)</i> :			\$	\$
<b>Yearly Interest Rate</b> for child support, medical support, and children's expenses: 12%. For other judgments: _____% <i>(12% unless otherwise listed)</i>				
<b>Lawyer (name):</b>		Represents <i>(name)</i> :		
<b>Lawyer (name):</b>		Represents <i>(name)</i> :		





## ➤ Findings and Orders

- 2.** The court orders child support as part of this family law case. This is a (*check one*):  
[ ] temporary order. [ ] final order.
- 3.** The *Child Support Schedule Worksheets* attached or filed separately are approved by the court and made part of this Order.

### **4. Parents' contact and employment information**


Each parent must fill out and file with the court a *Confidential Information* form (FL All Family 001) including personal identifying information, mailing address, home address, and employer contact information.

**Important!** If you move or get a new job any time while support is still owed, you must:

- Notify the Support Registry, and
- Fill out and file an updated *Confidential Information* form with the court.

**Warning!** Any notice of a child support action delivered to the last address you provided on the *Confidential Information* form will be considered adequate notice, if the party trying to serve you has shown diligent efforts to locate you.

### **5. Parents' Income**

<b>Parent (name):</b> _____	<b>Parent (name):</b> _____
<b>Net monthly income \$</b> _____. (line 3 of the Worksheets) This income is ( <i>check one</i> ): [ ] imputed to this parent. ( <i>Skip to 6.</i> ) [ ] this parent's actual income ( <i>after any exclusions approved below</i> ).	<b>Net monthly income \$</b> _____. (line 3 of the Worksheets) This income is ( <i>check one</i> ): [ ] imputed to this parent. ( <i>Skip to 6.</i> ) [ ] this parent's actual income ( <i>after any exclusions approved below</i> ).
<b>Does this parent have income from overtime or a 2nd job?</b> [ ] No. ( <i>Skip to 6.</i> ) [ ] Yes. ( <i>Fill out below.</i> ) Should this income be excluded? ( <i>check one</i> ): [ ] No. The court has <b>included</b> this income in this parent's gross monthly income on line 1 of the <i>Worksheets</i> . [ ] Yes. This income should be <b>excluded</b> because: <ul style="list-style-type: none"><li>▪ This parent worked over 40 hours per week averaged over 12 months, and</li><li>▪ That income was earned to pay for [ ] current family needs [ ] debts from a past relationship [ ] child support debt, and</li><li>▪ This parent will stop earning this extra income after paying these debts. </li></ul>	<b>Does this parent have income from overtime or a 2nd job?</b> [ ] No. ( <i>Skip to 6.</i> ) [ ] Yes. ( <i>Fill out below.</i> ) Should this income be excluded? ( <i>check one</i> ): [ ] No. The court has <b>included</b> this income in this parent's gross monthly income on line 1 of the <i>Worksheets</i> . [ ] Yes. This income should be <b>excluded</b> because: <ul style="list-style-type: none"><li>▪ This parent worked over 40 hours per week averaged over 12 months, and</li><li>▪ That income was earned to pay for [ ] current family needs [ ] debts from a past relationship [ ] child support debt, and</li><li>▪ This parent will stop earning this extra income after paying these debts.</li></ul>



<b>Parent (name):</b> _____ The court has <b>excluded \$</b> _____ from this parent's gross monthly income on line 1 of the <i>Worksheets</i> . <input checked="" type="checkbox"/> [ ] Other Findings: _____ _____ _____ _____ _____	<b>Parent (name):</b> _____ The court has <b>excluded \$</b> _____ from this parent's gross monthly income on line 1 of the <i>Worksheets</i> . <input type="checkbox"/> [ ] Other Findings: _____ _____ _____ _____ _____
---	--

## 6. Imputed Income

To calculate child support, the court may **impute** income to a parent:

- whose income is unknown, or
- who the court finds is unemployed or under-employed by choice.

*Imputed income is not actual income. It is an assigned amount the court finds a parent could or should be earning. (RCW 26.19.071(6))*

<b>Parent (name):</b> _____ <input type="checkbox"/> [ ] Does not apply. This parent's actual income is used. ( <i>Skip to 7.</i> ) <input type="checkbox"/> [ ] This parent's monthly net income is imputed because ( <i>check one</i> ): <input type="checkbox"/> [ ] this parent's income is unknown. <input type="checkbox"/> [ ] this parent is voluntarily unemployed. <input type="checkbox"/> [ ] this parent is voluntarily under-employed. <input type="checkbox"/> [ ] this parent works full-time but is purposely under-employed to reduce child support. <input type="checkbox"/> [ ] this parent is currently enrolled in high school full-time and is voluntarily unemployed or under-employed. The imputed amount is based on the information below: ( <i>Options are listed in order of required priority. The Court used the first option possible based on the information it had unless a presumed option was rebutted.</i> ) <input type="checkbox"/> [ ] Pay for 20 hours per week at minimum wage where this parent lives because this parent is enrolled in high school full-time and is voluntarily unemployed or under-employed. <input type="checkbox"/> [ ] Full-time pay at current pay rate. <input type="checkbox"/> [ ] Full-time pay based on reliable information about past earnings.	<b>Parent (name):</b> _____ <input type="checkbox"/> [ ] Does not apply. This parent's actual income is used. ( <i>Skip to 7.</i> ) <input type="checkbox"/> [ ] This parent's monthly net income is imputed because ( <i>check one</i> ): <input type="checkbox"/> [ ] this parent's income is unknown. <input type="checkbox"/> [ ] this parent is voluntarily unemployed. <input type="checkbox"/> [ ] this parent is voluntarily under-employed. <input type="checkbox"/> [ ] this parent works full-time but is purposely under-employed to reduce child support. <input type="checkbox"/> [ ] this parent is currently enrolled in high school full-time and is voluntarily unemployed or under-employed. The imputed amount is based on the information below: ( <i>Options are listed in order of required priority. The Court used the first option possible based on the information it had unless a presumed option was rebutted.</i> ) <input type="checkbox"/> [ ] Pay for 20 hours per week at minimum wage where this parent lives because this parent is enrolled in high school full-time and is voluntarily unemployed or under-employed. <input type="checkbox"/> [ ] Full-time pay at current pay rate. <input type="checkbox"/> [ ] Full-time pay based on reliable information about past earnings.
--	--



Parent (name): _____	Parent (name): _____
<input type="checkbox"/> Full-time pay based on incomplete or irregular information about past earnings.	<input type="checkbox"/> Full-time pay based on incomplete or irregular information about past earnings.
<input type="checkbox"/> Pay for 32 hours per week at minimum wage where this parent lives because this parent:	<input type="checkbox"/> Pay for 32 hours per week at minimum wage where this parent lives because this parent:
<input type="checkbox"/> recently graduated from high school.	<input type="checkbox"/> recently graduated from high school.
<input type="checkbox"/> is on TANF now, or recently came off TANF, public assistance, SSI, or disability.	<input type="checkbox"/> is on TANF now, or recently came off TANF, public assistance, SSI, or disability.
<input type="checkbox"/> was recently incarcerated.	<input type="checkbox"/> was recently incarcerated.
<input type="checkbox"/> Full-time pay at minimum wage where the parent lives because this parent (check all that apply):	<input type="checkbox"/> Full-time pay at minimum wage where the parent lives because this parent (check all that apply):
<input type="checkbox"/> recently worked at minimum wage jobs.	<input type="checkbox"/> recently worked at minimum wage jobs.
<input type="checkbox"/> has never been employed.	<input type="checkbox"/> has never been employed.
<input type="checkbox"/> does not have information about past earnings.	<input type="checkbox"/> does not have information about past earnings.
<input type="checkbox"/> Table of Median Net Monthly Income.	<input type="checkbox"/> Table of Median Net Monthly Income.
<input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Other (specify): _____

## 7. Limits affecting the monthly child support amount

- ☐ Does not apply. The monthly amount was not affected by the upper or lower limits in RCW 26.19.065.
- ☐ The monthly amount has been affected by (check all that apply):
- ☐ **Low-income limits.** The self-support reserve and presumptive minimum payment have been calculated in the *Worksheets*, lines 8.a. - c.
  - ☐ **The 45% net income limit.** The court finds that the paying parent's child support obligations for his/her biological and legal children are more than 45% of his/her net income (*Worksheets*, line 18). Based on the children's best interests and the parents' circumstances, it is (check one): ☐ fair. ☐ **not** fair to apply the 45% limit. (Describe both parents' situations):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  - ☐ **Combined Monthly Net Income over \$12,000.** Together, the parents earn more than \$12,000 per month (*Worksheets* line 4). The child support amount (check one):  
☐ is the presumptive amount from the economic table.  
☐ is **more** than the presumptive amount from the economic table because (specify):  
 \_\_\_\_\_



## 8. Standard Calculation

Parent Name	Standard calculation Worksheets line 17
	\$
	\$

- ☐ **Check here if there is a Residential Split** – (each parent has at least one of the children from this relationship living with him/her most of the time.)

These children ( <i>names and ages</i> ):	These children ( <i>names and ages</i> ):
Live with ( <i>parent's name</i> ):	Live with ( <i>parent's name</i> ):

The standard calculation for the parent paying support is \$\_\_\_\_\_.  
This is from (*check one*):

- ☐ The *Attachment for Residential Split Adjustment (Arvey calculation)*, line G (form WSCSS–Attachment for RSA). This *Attachment* to the *Child Support Schedule Worksheets* is approved by the court and made part of this Order. 🚫🚫🚫

- ☐ Other calculation (*specify method and attach Worksheet/s*): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 9. Deviation from standard calculation

Should the monthly child support amount be different from the standard calculation?

- ☐ **No** – The monthly child support amount ordered in section **10** is the **same** as the standard calculation listed in section **8** because (*check one*):

- ☐ No one asked for a deviation from the standard calculation. (*Skip to 10.*)

- ☐ There is no good reason to approve the deviation requested by (*name/s*): \_\_\_\_\_  
The facts supporting this decision are (*check all that apply*):

- ☐ detailed in the *Worksheets*, Part VIII, lines 20 through 26.

- ☐ the parent asking for a deviation:

- ☐ has a new spouse or domestic partner with income of \$\_\_\_\_\_.

- ☐ lives in a household where other adults have income of \$\_\_\_\_\_.

- ☐ has income from overtime or a 2<sup>nd</sup> job that was excluded in section **5** above.

- ☐ other (*specify*): \_\_\_\_\_

- ☐ **Yes** – The monthly child support amount ordered in section **10** is **different** from the standard calculation listed in section **8** because (*check all that apply*):



- ☐ A parent or parents in this case has:
  - ☐ children from other relationships.
  - ☐ paid or received child support for children from other relationships.
  - ☐ gifts, prizes, or other assets.
  - ☐ income that is not regular (non-recurring income) such as bonuses, overtime, etc.
  - ☐ unusual unplanned debt (extraordinary debt not voluntarily incurred).
  - ☐ tax planning considerations that will not reduce the economic benefit to the children.
  - ☐ very different living costs, which are beyond their control.
- ☐ The children in this case:
  - ☐ spend significant time with the parent who owes support. The non-standard amount still gives the other parent's household enough money for the children's basic needs. The children do not get public assistance (TANF).
  - ☐ have extraordinary income.
  - ☐ have special needs because of a disability.
  - ☐ have special medical, educational, or psychological needs.
- ☐ There are (or will be) costs for court-ordered reunification or a voluntary placement agreement.
- ☐ The parent who owes support has shown it is not fair to have to pay the \$50 per child presumptive minimum payment.
- ☐ The parent who is owed support has shown it is not fair to apply the self-support reserve (calculated on lines 8.a. – c. of the *Worksheets*).
- ☐ Other reasons: \_\_\_\_\_

**The facts that support the reasons checked above are** (*check all that apply*):

- ☐ detailed in the *Worksheets*, Part VIII, lines 20 through 26.
- ☐ the parent asking for a deviation:
  - ☐ has a new spouse or domestic partner with income of \$\_\_\_\_\_.
  - ☐ lives in a household where other adults have income of \$\_\_\_\_\_.
  - ☐ has income from overtime or a 2<sup>nd</sup> job that was excluded in section **5** above.
- ☐ as follows: \_\_\_\_\_

## **10. Monthly child support amount (transfer payment)**

After considering the standard calculation in section **8**, and whether or not to apply a deviation in section **9**, the court orders the following monthly child support amount (transfer payment).



- ☐ (Name): \_\_\_\_\_ must pay child support to (name): \_\_\_\_\_ each month as follows for the children listed below (add lines for additional children if needed):

Child's Name	Age	Amount
1.		\$
2.		\$
3.		\$
4.		\$
5.		\$
Total monthly child support amount:		\$

- ☐ **Residential Split** – Each parent has at least one of the children from this relationship living with him/her most of the time. (Name): \_\_\_\_\_ must pay child support to (name): \_\_\_\_\_ each month as follows:

Total monthly child support amount: \$

## 11. Starting date and payment schedule

The monthly child support amount must be paid starting (month, year): \_\_\_\_\_ on the following payment schedule:

- ☐ in one payment each month by the \_\_\_\_\_ day of the month.
- ☐ in two payments each month: ½ by the \_\_\_\_\_ and ½ by the \_\_\_\_\_ day of the month.
- ☐ other (specify): \_\_\_\_\_

## 12. Step Increase (for modifications or adjustments only)

- ☐ Does not apply.
- ☐ **Approved** – The court is changing a final child support order. The monthly child support amount is increasing by more than 30% from the last final child support order. This causes significant financial hardship to the parent who owes support, so the increase will be applied in two equal steps:
- For six months from the Starting Date in section **11** above, the monthly child support amount will be the old monthly amount plus ½ of the increase, for a total of \$\_\_\_\_\_ each month.
  - On (date): \_\_\_\_\_, six months after the Starting Date in section **11**, the monthly child support amount will be the full amount listed in section **10**.
- ☐ **Denied** – The court is changing a final child support order (check one):
- ☐ but the monthly payment increased by less than 30%.
  - ☐ and the monthly payment increased by more than 30%, but this does not cause a significant hardship to the parent who owes support.



### 13. Periodic Adjustment

☐ Child support may be changed according to state law. The court is not ordering a specific periodic adjustment schedule below.

☐ Any party may ask the court to adjust child support periodically on the following schedule **without** showing a substantial change of circumstances:

The *Motion to Adjust Child Support Order* may be filed:

☐ every \_\_\_\_\_ months.

☐ on (date/s): \_\_\_\_\_

☐ other (describe condition or event): \_\_\_\_\_

**Important!** A party must file a *Motion to Adjust Child Support Order* (form FL Modify 521), and the court must approve a new *Child Support Order* for any adjustment to take effect.

☐ Deadlines, if any (for example, deadline to exchange financial information, deadline to file the motion): \_\_\_\_\_

### 14. Payment Method (check either Registry or Direct Pay)

☐ **Registry** – Send payment to the Washington State Support Registry. The Division of Child Support (DCS) will forward the payments to the person owed support and keep records of all payments.

Address for payment: Washington State Support Registry  
PO Box 45868, Olympia, WA 98504

Phone number/s: 1 (800) 922-4306 or 1 (800) 442-5437

**Important!** If you are ordered to send your support payments to the Washington State Support Registry, and you pay some other person or organization, you will **not** get credit for your payment.

**DCS Enforcement** (if Registry is checked above):

☐ DCS will **enforce** this order because (check all that apply):

☐ this is a public assistance case.

☐ one of the parties has already asked DCS for services.

☐ one of the parties has asked for DCS services by signing the application statement at the end of this order (above the *Warnings*).

☐ DCS will **not** enforce this order unless one of the parties applies for DCS services or the children go on public assistance.

☐ **Direct Pay** – Send payment to the other parent or non-parent custodian by:

☐ mail to: \_\_\_\_\_  
street address or PO box city state zip

or any new address the person owed support provides to the parent who owes support. (This does not have to be his/her home address.)



☐ other method: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 15. Enforcement through income withholding (garnishment)

DCS or the person owed support can collect the support owed from the wages, earnings, assets, or benefits of the parent who owes support, and can enforce liens against real or personal property as allowed by any state's child support laws without notice to the parent who owes the support.

*If this order is **not** being enforced by DCS and the person owed support wants to have support paid directly from the employer, the person owed support must ask the court to sign a separate wage assignment order requiring the employer to withhold wages and make payments. (Chapter 26.18 RCW.)*

Income withholding may be delayed until a payment becomes past due if the court finds good reason to delay.

☐ Does not apply. There is no good reason to delay income withholding.



☐ Income withholding will be **delayed** until a payment becomes past due because (check one):

☐ the child support payments are enforced by DCS and there are good reasons in the children's best interest **not** to withhold income at this time. If this is a case about changing child support, previously ordered child support has been paid on time.

List the good reasons here: \_\_\_\_\_

☐ the child support payments are **not** enforced by DCS and there are good reasons **not** to withhold income at this time.

List the good reasons here:  \_\_\_\_\_

☐ the court has approved the parents' written agreement for a different payment arrangement.  

## 16. End date for support

Support must be paid for each child until (check one):

☐ the court signs a different order, if this is a temporary order.

☐ the child turns 18 or is no longer enrolled in high school, whichever happens last, unless the court makes a different order in section **17**.

☐ the child turns 18 or is otherwise emancipated, unless the court makes a different order in section **17**.

☐ after (child's name): \_\_\_\_\_ turns 18. Based on information available to the court, it is expected that this child will be unable to support him/herself and will remain dependent past the age of 18. Support must be paid until (check one):



- ☐ this child is able to support him/herself and is no longer dependent on the parents.
- ☐ other: \_\_\_\_\_
- ☐ other (specify): \_\_\_\_\_

## 17. Post-secondary educational support (for college or vocational school)

- ☐ **Reserved** – A parent or non-parent custodian may ask the court for post-secondary educational support at a later date without showing a substantial change of circumstances by filing a *Petition to Modify Child Support Order* (form FL Modify 501). The *Petition* must be filed *before* child support ends as listed in section **16**.
- ☐ **Granted** – The parents must pay for the children's post-secondary educational support. Post-secondary educational support may include support for the period after high school and before college or vocational school begins. The amount or percentage each person must pay (check one):
- ☐ will be decided later. The parties may make a written agreement or ask the court to set the amount or percentage by filing a *Petition to Modify Child Support Order* (form FL Modify 501).
- ☐ is as follows (specify): \_\_\_\_\_
- ☐ **Denied** – The request for post-secondary educational support is denied.
- ☐ Other (specify): \_\_\_\_\_

## 18. Tax Issues

**Important!** Although the personal tax exemptions are currently suspended under federal law through tax year 2025, other tax benefits may flow from claiming a child as dependent.

- ☐ Does not apply.
- ☐ The parties have the right to claim the children as their dependents for purposes of personal tax exemptions and associated tax credits on their tax forms as follows (check one):
- ☐ Every year – (name): \_\_\_\_\_  
has the right to claim (children's names): \_\_\_\_\_;  
and (name): \_\_\_\_\_  
has the right to claim (children's names): \_\_\_\_\_.
- ☐ Alternating – (name): \_\_\_\_\_  
has the right to claim the children for (check one): ☐ even ☐ odd years. The other parent has the right to claim the children for the opposite years.
- ☐ Other (specify): \_\_\_\_\_

For tax years when a non-custodial parent has the right to claim the children, the parents **must** cooperate to fill out and submit IRS Form 8332 in a timely manner.



## 19. Medical Support

**Important!** Read the Medical Support Warnings at the end of this order. Medical Support includes health insurance (both public and private) and cash payments towards premiums and uninsured medical expenses.

- ☐ The court is not ordering how health care coverage must be provided for the children because the court does not have enough information to determine the availability of accessible health care coverage for the children (coverage that could be used for the children's primary care). The law requires every parent to provide or pay for medical support. The Division of Child Support (DCS) or any parent can enforce this requirement. (Skip to **20**.)
- ☐ **Private health insurance ordered.** (Name): \_\_\_\_\_ must pay the premium to provide health insurance coverage for the children. The court has considered the needs of the children, the cost and extent of coverage, and the accessibility of coverage.
- ☐ The other parent must pay his/her proportional share\* of the premium paid. Health insurance premiums (check one):
- ☐ are included on the Worksheets (line 14). No separate payment is needed.
  - ☐ are **not** included on the Worksheets. Separate payment is needed. A parent or non-parent custodian may ask DCS or the court to enforce payment for the proportional share.

\* Proportional share is each parent's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.

- ☐ The other parent is **not** ordered to pay for any part of the children's insurance because (explain): \_\_\_\_\_

A parent cannot be excused from providing health insurance coverage through an employer or union solely because the child receives public health care coverage.

- ☐ A parent has been ordered to pay an amount that is more than 25% of his/her basic support obligation (Worksheets, line 19). The court finds this is in the children's best interest because: \_\_\_\_\_

A parent cannot be ordered to pay an amount towards health care coverage premiums that is more than 25% of his/her basic support obligation (Worksheets, line 19) unless the court finds it is in the best interest of the children.

- ☐ **Public health care coverage.** (Name): \_\_\_\_\_ has enrolled the child in public health care coverage, and does not have available at no cost accessible health insurance coverage through an employer or union.
- ☐ The other parent must enroll the child in accessible health insurance coverage through their employer or union up to 25% of their basic support obligation.
- ☐ The other parent must pay his/her proportional share\* of the premium for public health care coverage for the child. Public health care premiums (check one): \_\_\_\_\_



☐ are included on the *Worksheets* (line 14). No separate payment is needed.

☐ are **not** included on the *Worksheets*. Separate payment is needed. A parent or non-parent custodian may ask DCS or the court to enforce payment for the proportional share.

\* *Proportional share is each parent's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.*

☐ The other parent is **not** ordered to pay for any part of the children's health care coverage because (explain): \_\_\_\_\_

*A parent cannot be excused from providing health insurance coverage through an employer or union solely because the child receives public health care coverage.*

☐ A parent has been ordered to pay an amount that is more than 25% of his/her basic support obligation (*Worksheets*, line 19). The court finds this is in the children's best interest because: \_\_\_\_\_

☐ Other (specify): \_\_\_\_\_

## 20. Health care coverage if circumstances change or court has not ordered

If the parties' circumstances change, or if the court is not ordering how health care coverage must be provided for the children in section **19**:

- A parent, non-parent custodian, or DCS can enforce the medical support requirement.
- If a parent does not provide proof of accessible health care coverage (coverage that can be used for the children's primary care), that parent must:
  - Get (or keep) insurance through his/her work or union, unless the insurance costs more than 25% of his/her basic support obligation (line 19 of the *Worksheets*),
  - Pay his/her share of the other parent's monthly premium up to 25% of his/her basic support obligation (line 19 of the *Worksheets*), or
  - Pay his/her share of the monthly cost of any public health care coverage, such as Apple Health or Medicaid, which is assigned to the state.

## 21. Children's expenses not included in the monthly child support amount

**Uninsured medical expenses** – Each parent is responsible for a share of uninsured medical expenses as ordered below. Uninsured medical expenses include premiums, co-pays, deductibles, and other health care costs not paid by health care coverage.

Children's Expenses for:	Parent (name): _____	Parent (name): _____	Make payments to:	
	pays monthly	pays monthly	Person who pays the expense	Service Provider
Uninsured medical expenses	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> _____%**	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> _____%**	<input type="checkbox"/>	<input type="checkbox"/>



\* Proportional Share is each parent's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.

\*\* If the percentages ordered are different from the Proportional Share, explain why:

---



---



---



---

**Other shared expenses (check one):**

☐ Does not apply. The monthly amount covers all expenses, except health care expenses.

☐ The parents will share the cost for the expenses listed below (check all that apply):

Children's Expenses for:	Parent (name): _____ pays monthly	Parent (name): _____ pays monthly	Make payments to:	
			Person who pays the expense	Service Provider
<input type="checkbox"/> Day care: _____ _____	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____%**	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____%**	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Education: _____ _____	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____%**	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____%**	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Long-distance transportation: _____ _____	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____%**	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____%**	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other (specify): _____ _____	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____%**	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____%**	<input type="checkbox"/>	<input type="checkbox"/>

\* Proportional Share is each parent's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.

\*\* If any percentages ordered are different from the Proportional Share, explain why:

---



---



---

☐ Other (give more detail about covered expenses here, if needed): \_\_\_\_\_

---



---





A person receiving support can ask DCS to collect:

- expenses owed directly to him/her.
- reimbursement for expenses the person providing support was ordered to pay.
- an order for a money judgment that s/he got from the court.

## 22. Past due child support, medical support and other expenses

☐ This order does not address any past due amounts or interest owed.

☐ As of (date): \_\_\_\_\_, no parent owes (check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> past due child support   | <input type="checkbox"/> interest on past due child support   |
| <input type="checkbox"/> past due medical support | <input type="checkbox"/> interest on past due medical support |
| <input type="checkbox"/> past due other expenses  | <input type="checkbox"/> interest on past due other expenses  |

to (check all that apply): ☐ the other parent or non-parent custodian. ☐ the state.

☐ The court orders the following **money judgments** (summarized in section **1** above):

Judgment for	Debtor's name (person who must pay money)	Creditor's name (person who must be paid)	Amount	Interest
<input type="checkbox"/> Past due child support from _____ to _____			\$	\$
<input type="checkbox"/> Past due medical support (health insurance & health care costs not covered by insurance) from _____ to _____			\$	\$
<input type="checkbox"/> Past due expenses for: <input type="checkbox"/> day care <input type="checkbox"/> education <input type="checkbox"/> long-distance transp. from _____ to _____			\$	\$
<input type="checkbox"/> Other (describe):			\$	\$

The **interest rate** for child support judgments is 12%.

☐ Other (specify): \_\_\_\_\_

## 23. Overpayment caused by change

☐ Does not apply.

☐ The Order signed by the court today or on date: \_\_\_\_\_  
caused an overpayment of \$\_\_\_\_\_.

☐ (Name): \_\_\_\_\_ shall repay this amount



to (Name): \_\_\_\_\_ by (date): \_\_\_\_\_.

☐ The overpayment shall be credited against the monthly support amount owed each month at the rate of \$ \_\_\_\_\_ each month until paid off.

☐ Other (specify): \_\_\_\_\_  
\_\_\_\_\_

## 24. Other Orders

All of the *Warnings* below are required by law and are incorporated and made part of this order.

☐ Other (specify): \_\_\_\_\_  
\_\_\_\_\_

**Ordered.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Judge or Commissioner

### Petitioner and Respondent or their lawyers fill out below:

This document (check any that apply):

☐ is an agreement of the parties

☐ is presented by me

☐ may be signed by the court without notice to me

\_\_\_\_\_  
Petitioner signs here **or** lawyer signs here + WSBA #

This document (check any that apply):

☐ is an agreement of the parties

☐ is presented by me

☐ may be signed by the court without notice to me

\_\_\_\_\_  
Respondent signs here **or** lawyer signs here + WSBA #

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

### ☐ If any parent or child received public assistance:

The state Department of Social and Health Services (DSHS) was notified about this order through the Prosecuting Attorney's office, and has reviewed and approved the following:

☐ child support

☐ medical support

☐ past due child support

☐ other (specify): \_\_\_\_\_

\_\_\_\_\_  
Deputy Prosecutor signs here      Print name and WSBA #      Date

### ☐ Parent or Non-Parent Custodian applies for DCS enforcement services:

I ask the Division of Child Support (DCS) to enforce this order. I understand that DCS will keep \$35 each year (\$25 before 10/1/2019) as a fee if DCS collects more than \$550 (\$500 before 10/1/2019), unless I ask to be excused from paying this fee in advance. (You may call DCS at 1-800-442-5437. DCS will **not** charge a fee if you have ever received TANF, tribal TANF, or AFDC.)

\_\_\_\_\_  
Parent or Non-Parent Custodian signs here      Print name      Date  
(lawyer cannot sign for party)



---

## All the warnings below are required by law and are part of the order. Do not remove.

---

### Warnings!

#### If you don't follow this child support order...

- DOL or other licensing agencies may deny, suspend, or refuse to renew your licenses, including your driver's license and business or professional licenses, and
- Dept. of Fish and Wildlife may suspend or refuse to issue your fishing and hunting licenses and you may not be able to get permits. (RCW 74.20A.320)

#### If you receive child support...

You may have to:

- Document how that support and any cash received for the children's health care was spent.
- Repay the other parent for any day care or special expenses included in the support if you didn't actually have those expenses. (RCW 26.19.080)

---

### Medical Support Warnings!

The **parents** must keep the Support Registry informed whether or not they have access to health care coverage for the children at a reasonable cost, and provide the policy information for any such coverage.

\* \* \*

#### If you are ordered to provide children's health care coverage...

You have **20 days** from the date of this order to send:

- proof that the children are covered , or
- proof that health care coverage is not available as ordered.

Send your proof to the other parent or to the Support Registry (if your payments go there).

If you do **not** provide proof of health care coverage:

- The other parent or the support agency may contact your employer or union, without notifying you, to ask for direct enforcement of this order (RCW 26.18.170), and
- The other parent may:
  - Ask the Division of Child Support (DCS) for help,
  - Ask the court for a contempt order, or
  - File a Petition in court.

**Don't** cancel your employer or union health insurance for your children unless the court approves or your job ends and you no longer qualify for insurance as ordered in section **19**.

If an insurer sends you payment for a medical provider's service:

- you must send it to the medical provider if the provider has not been paid; or
- you must send the payment to whoever paid the provider if someone else paid the provider; or
- you may keep the payment if you paid the provider.

If the children have public health care coverage, the state can make you pay for the cost of the monthly premium.

**Always** inform the Support Registry and any parent if your access to health care coverage changes or ends.



# Compare Results

Old File:

**FL All Family 166 Order to Go to Court for  
Contempt Hrg.pdf**

**2 pages (272 KB)**  
5/6/2016 12:40:44 PM

versus

New File:

**FL All Family 166 Order to Go to Court for  
Contempt Hrg\_2020 06.pdf**

**2 pages (427 KB)**  
6/10/2020 1:58:31 PM

## Total Changes

29

## Content

3 Replacements  
13 Insertions  
12 Deletions

## Styling and Annotations

0 Styling  
1 Annotation

[Go to First Change \(page 1\)](#)



Superior Court of Washington, County of \_\_\_\_\_

In re:

Petitioner/s (*person/s who started this case*):

\_\_\_\_\_

And Respondent/s (*other party/parties*):

\_\_\_\_\_

No. \_\_\_\_\_

Order to Go to Court for Contempt Hearing  
(Order to Show Cause)

(ORTSC)

Clerk's action required: **2**

**Order to Go to Court for Contempt Hearing  
(Order to Show Cause)**

**1. Findings**

The court has reviewed the *Motion for Contempt Hearing* filed by the (*check one*):

☐ Petitioner ☒ Respondent and finds there is reason to approve this order.

**2. The court orders (*name*):** \_\_\_\_\_ to:



**Go to court on:** \_\_\_\_\_ at \_\_\_\_\_ ☐ a.m. ☐ p.m.  
*date time*

**at:** \_\_\_\_\_ in \_\_\_\_\_  
*court's address room or department*

\_\_\_\_\_  
*docket/calendar or judge/commissioner's name*

At the hearing, you must show why the court should **not** approve the requests made by the other party and find you in contempt.

**Warning!** If you do not go to the hearing, the court may:

- Approve the other party's requests without hearing your side, and
- Issue a warrant for your arrest.

If the other party has asked the court to send you to **jail** and you cannot afford a lawyer, you may ask the court to appoint a lawyer to represent you.



**3. Other orders (if any):**

---

---

---

---

**Ordered.**

\_\_\_\_\_  
Date

▶ \_\_\_\_\_  
Judge or Commissioner

Presented by: ☐ Petitioner ☐ Respondent

▶ \_\_\_\_\_  
Sign here

\_\_\_\_\_  
Print name (if lawyer, also list WSBA No.)

\_\_\_\_\_  
Date

**To both parties:**

**Deadline!** Your papers must be filed and served by the deadline in your county's Local Court Rules, or by the State Court Rules if there is no local rule. Court Rules and forms are online at [www.courts.wa.gov](http://www.courts.wa.gov).

If you want the court to consider your side, you **must**:

- File your original documents with the Superior Court Clerk; AND
- Give the Judge/Commissioner a copy of your papers (if required by your county's Local Court Rules); AND
- Have a copy of your papers served on all other parties or their lawyers; AND
- Go to the hearing.

The court may not allow you to testify at the motion hearing. Read your county's Local Court Rules, if any.

Bring proposed orders to the hearing.

**To the person requesting this order:**

You must have this order, and the paperwork you filed with the court to get this order, personally served on the other party by someone 18 or older who is not a party to this case.

**To the person receiving this order:**

If you do not agree with the requests in the motion, file a statement (using form *FL All Family 135, Declaration*) explaining why the court should not approve those requests. You may file other written proof supporting your side.



6/19/2020 11:21:38 AM

# Compare Results

Old File:

**FL Divorce 201 Petition for Divorce\_2020  
03.pdf**

**11 pages (605 KB)**  
3/9/2020 2:58:33 PM

versus

New File:

**FL Divorce 201 Petition\_2020 06.pdf**

**11 pages (605 KB)**  
6/10/2020 12:57:25 PM

## Total Changes

50

## Content

6 Replacements  
24 Insertions  
19 Deletions

## Styling and Annotations

1 Styling  
0 Annotations

[Go to First Change \(page 1\)](#)



**Superior Court of Washington, County of \_\_\_\_\_**

In re the marriage of:

Petitioner *(person who started this case)*:

\_\_\_\_\_

And Respondent *(other spouse)*:

\_\_\_\_\_

No. \_\_\_\_\_

Petition for Divorce (Dissolution)  
(PTDSS)

**Petition for Divorce (Dissolution)**

**1. Information about the parties**

Petitioner lives in *(county)*: \_\_\_\_\_ *(state)*: \_\_\_\_\_

Respondent lives in *(county)*: \_\_\_\_\_ *(state)*: \_\_\_\_\_

**2. Information about the marriage *(check all that apply)***

We were married on *(date)*: \_\_\_\_\_ at *(city and state)*: \_\_\_\_\_  
\_\_\_\_\_.

☐ Before we married, we entered into a ☐ domestic partnership, ☐ civil union on  
*(date)* \_\_\_\_\_ at *(city and state)* \_\_\_\_\_.

*(List other registered domestic partnerships or civil unions between you and your spouse,  
if any. Add lines as needed.):*

\_\_\_\_\_  
*Relationship type                      date                      city and state (or country)*

☐ Before we married, we began living together in a serious, marriage-like relationship  
(committed intimate relationship) (*See Muridan v. Redl*, 3 Wn. App. 2d 44, 413 P.3d  
1072 (2018)) *(date)*: \_\_\_\_\_ at *(city and state)*: \_\_\_\_\_  
\_\_\_\_\_.

☐ We currently live in the same household.

☐ We began living in separate households on *(date)*: \_\_\_\_\_.



### 3. Request for divorce

This marriage is irretrievably broken. I ask the court to dissolve our marriage and any domestic partnerships or civil unions. Our marital community ended on (check one):

☐ the date this Petition is filed.

☐ (date): \_\_\_\_\_, which is when (check all that apply):

☐ one of us moved to a separate household.

☐ we separated our assets and debts.

☐ we agreed the marital community ended.

☐ other (specify): \_\_\_\_\_

### 4. Jurisdiction over the spouses

The court has jurisdiction over the marriage because at least one of the spouses lives in Washington state, or is stationed in this state as a member of the armed forces.

☐ The court **has** personal jurisdiction over the Respondent because (check all that apply):

☐ The Respondent lives in Washington state.

☐ The Petitioner and Respondent lived in Washington state while they were married, and the Petitioner still lives in this state or is stationed in this state as a member of the armed forces.

☐ The Petitioner and Respondent may have conceived a child together in this state.

☐ Other (specify): \_\_\_\_\_

☐ The court **does not** have personal jurisdiction over the Respondent. (This may limit the court's ability to divide property and debts, award money, set child support or spousal support, or approve a restraining order or protection order.)

### 5. Is one of the spouses pregnant?

(Check one):

☐ No ☐ Yes

If Yes, who is pregnant?

☐ Petitioner

☐ Respondent

**Note:** The law considers the other spouse to be the parent of any child born during the marriage or within 300 days after it ends. If the other spouse is not the parent, either spouse may file a *Petition to Decide Parentage* (form FL Parentage 301) in court. In most cases, the deadline to file the *Petition to Decide Parentage* is before the child turns four. (See RCW 26.26A.115, 26.26A.435.)

If everyone agrees, both spouses and the child's biological father can sign an *Acknowledgment (and Denial) of Parentage*. Those forms must be notarized and filed with the Washington State Registrar of Vital Statistics to be valid.

### 6. Children of the marriage

☐ My spouse and I have **no** children together who are still dependent. (Skip to 7.)

☐ My spouse and I have the following children together who are still dependent (only list children you and your spouse have together, not children from other relationships):

Child's name	Age	Child's name	Age
1.		4.	
2.		5.	
3.		6.	



**a. Children's home/s**

During the past 5 years have any of the children lived:

- on an Indian reservation,
- outside Washington state,
- in a foreign country, or
- with anyone who is not a party to this case?

☐ No. (Skip to **b.**)

☐ Yes. (Fill out below to show where each child has lived during the last 5 years.)

Dates	Children	Lived with	In which state, Indian reservation, or foreign country
From: To:	<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Other (name):	
From: To:	<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Other (name):	
From: To:	<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Other (name):	
From: To:	<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Other (name):	
From: To:	<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Other (name):	

**b. Other people with a legal right to spend time with a child**

Do you know of anyone besides you and your spouse who has (or claims to have) a legal right to spend time with any of the children?

(Check one): ☐ No. (Skip to **c.**)    ☐ Yes. (Fill out below.)

Name of person	Children this person may have the right to spend time with
	<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):
	<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):



**c. Other court cases involving a child**

Do you know of any court cases involving any of the children?

(Check one): ☐ No. (Skip to **7**.) ☐ Yes. (Fill out below.)

Kind of case (Family Law, Criminal, Protection Order, Juvenile, Dependency, Other)	County and State	Case number and year	Children
			<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):
			<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):
			<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):
			<input type="checkbox"/> All children <input type="checkbox"/> (Name/s):

**7. Jurisdiction over the children (RCW 26.27.201 – .221, .231, .261, .271)**

☐ Does not apply. My spouse and I have **no** children together who are still dependent.

☐ The court **can** approve a *Parenting Plan* for the children my spouse and I have together because (check all that apply; if a box applies to all of the children, you may write “the children” instead of listing names):

☐ **Exclusive, continuing jurisdiction** – A Washington court has already made a custody order or parenting plan for the children, and the court still has authority to make other orders for (children’s names): \_\_\_\_\_.

☐ **Home state jurisdiction** – Washington is the children’s home state because (check all that apply):

☐ (Children’s names): \_\_\_\_\_ lived in Washington with a parent or someone acting as a parent for at least the 6 months just before this case was filed, or if the children are less than 6 months old, they have lived in Washington with a parent or someone acting as a parent since birth.

☐ There were times the children were not in Washington in the 6 months just before this case was filed (or since birth if they are less than 6 months old), but those were temporary absences.

☐ (Children’s names): \_\_\_\_\_ do not live in Washington right now, but Washington was the children’s home state sometime in the 6 months just before this case was filed, and a parent or someone acting as a parent of the children still lives in Washington.

☐ (Children’s names): \_\_\_\_\_ do not have another home state.

☐ **No home state or home state declined** – No court of any other state (or tribe) has the jurisdiction to make decisions for (children’s names): \_\_\_\_\_



\_\_\_\_\_, **or** a court in the children's home state (or tribe) decided it is better to have this case in Washington **and**:

- The children and a parent or someone acting as a parent have ties to Washington beyond just living here; **and**
- There is a lot of information (substantial evidence) about the children's care, protection, education and relationships in this state.

☐ **Other state declined** – The courts in other states (or tribes) that might be (*children's names*): \_\_\_\_\_'s home state have refused to take this case because it is better to have this case in Washington.

☐ **Temporary emergency jurisdiction** – The court can make decisions for (*children's names*): \_\_\_\_\_ because the children are in this state now **and** were abandoned here **or** need emergency protection because the children (or the children's parent, brother or sister) were abused or threatened with abuse. (*Check one*):

☐ A custody case involving the children was filed in the children's home state (*name of state or tribe*): \_\_\_\_\_. Washington should take temporary emergency jurisdiction over the children until the Petitioner can get a court order from the children's home state (or tribe).

☐ There is **no** valid custody order or open custody case in the children's home state (*name of state or tribe*): \_\_\_\_\_. If no case is filed *in the children's home state (or tribe)* by the time the children have been in Washington for 6 months, (*date*) \_\_\_\_\_, Washington should have final jurisdiction over the children.

☐ Other reason (*specify*): \_\_\_\_\_

☐ The court **cannot** approve a *Parenting Plan* because the court does not have jurisdiction over the children.

## 8. Parenting Plan

☐ My spouse and I have **no** children together who are under 18 years old.

☐ I ask the court to order a *Parenting Plan* for the children my spouse and I have together. I will file and serve my proposed *Parenting Plan* (form FL All Family 140) (*check one*):

☐ at the same time as this *Petition*.

☐ later.

☐ The court **cannot** approve a *Parenting Plan* because the court does not have jurisdiction over the children.

## 9. Child Support

☐ My spouse and I have **no** children together who are still dependent.

☐ **Court Order** – I ask the court to order child support (including medical support) according to state law for the children my spouse and I have together. (*You may ask for a court order of child support even if there is already an administrative order. The court order will replace the administrative order to the extent the court order is different.*)

☐ I ask the court to order my spouse to pay his/her proportionate share of



- (check all that apply): ☐ day care expenses  
☐ long-distance transportation expenses  
☐ education expenses  
☐ post-secondary (college or vocational school) support  
☐ other child-related expenses (specify): \_\_\_\_\_

- ☐ I ask the court to order that we have the right to claim the children as dependents for purposes of personal tax exemptions and associated tax credits on our tax forms as follows (describe):  
\_\_\_\_\_

**Important!** Although the personal tax exemptions are currently suspended through tax year 2025, other tax benefits may flow from claiming a child as dependent.

- ☐ **Administrative Order** – There is no need for the court to make a child support order. The DSHS Division of Child Support (DCS) has already established an administrative child support order for the children my spouse and I have together in DCS case number/s: \_\_\_\_\_. I am not asking the court to make a different child support order.

*DCS child support orders do not cover tax issues or post-secondary (college or vocational school) support. Because these issues are not in the administrative order, I ask the court to order (check all that apply):*

- ☐ we have the right to claim the children as dependents for purposes of personal tax exemptions and associated tax credits on our tax forms as follows (describe):  
\_\_\_\_\_

- ☐ my spouse to pay his/her proportionate share of post-secondary (college or vocational school) support.

## 10. Children from other relationships

- ☐ Neither spouse has children from other relationships who are still dependent.  
☐ I have the following dependent children who are not from this relationship (list name/s and age/s): \_\_\_\_\_  
☐ My spouse has the following dependent children who are not from this relationship (list name/s and age/s): \_\_\_\_\_

## 11. Written Agreements

*Have you and your spouse signed a prenuptial agreement, separation contract, or community property agreement?*

(Check one): ☐ No. (Skip to **12.**) ☐ Yes. (Fill out below.)

Type of written agreement: \_\_\_\_\_

Date of written agreement: \_\_\_\_\_

Should the court enforce this agreement?

(Check one): ☐ Yes ☐ No



If No, why not? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 12. Real Property (land or home)

- ☐ Neither spouse owns any real property.
- ☐ I ask the court to divide the real property according to the written agreement described in **11** above.
- ☐ I ask the court to divide the real property fairly (equitably), as explained below:

Real Property Address	Tax Parcel Number	Who should own this property?
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

- ☐ I ask the court to divide the real property fairly (equitably) as the court decides.
- ☐ The court does not have jurisdiction to divide the real property.
- ☐ Other (*specify*): \_\_\_\_\_  
\_\_\_\_\_

## 13. Personal Property (possessions, assets, or business interests of any kind)

- ☐ We have already divided the property fairly. I ask the court to order that each spouse will keep any personal property that s/he now has or controls.
- ☐ I ask the court to divide the personal property according to the written agreement described in **11** above.
- ☐ I ask the court to divide the personal property fairly (equitably), as explained below:

List property ( <i>include vehicles, pensions/retirement, insurance, bank accounts, furniture, businesses, etc. Do not list more than the last four digits of any account number.</i> ):	Who should own this property?
	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent





List property (include vehicles, pensions/retirement, insurance, bank accounts, furniture, businesses, etc. Do not list more than the last four digits of any account number.):	Who should own this property?
	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

☐ I ask the court to divide the personal property fairly (equitably) as the court decides.

☐ The court does not have jurisdiction to divide the personal property.

☐ Other: \_\_\_\_\_

#### 14. Debts (mortgages, loans, credit cards, other money owed)

☐ I am not aware of any debts.

☐ I ask the court to order each spouse to be responsible for debts s/he incurred (made) after the date of separation.

☐ I ask the court to divide the debts according to the written agreement described in **11** above.

☐ I ask the court to make the following orders about debts (check all that apply):

☐ Each spouse is responsible for the debts that are now only in his/her own name.

☐ Divide the debts fairly (equitably), as explained below:

Debt Amount	Creditor (person or company owed this debt)	Who should pay this debt?
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

☐ Divide the debts fairly (equitably) as the court decides.

☐ The court does not have jurisdiction to divide the debts.

☐ Other: \_\_\_\_\_



## 15. Spousal Support (maintenance/alimony)

- ☐ Spousal support is **not** needed.
- ☐ Spousal support **is** needed. The ☐ Petitioner ☐ Respondent has the ability to pay and should pay support:
- ☐ as decided by the court.
- ☐ \$ \_\_\_\_\_ every month until (date or event): \_\_\_\_\_
- ☐ according to the written agreement described in **11** above.
- ☐ other: \_\_\_\_\_

## 16. Fees and Costs

- ☐ No request.
- ☐ Order my spouse to pay my lawyer's fees, other professional fees, and costs for this case.

## 17. Protection Order

*Do you want the court to issue an Order for Protection as part of the final orders in this case?*

- ☐ **No.** I do not want an Order for Protection.
- ☐ **Yes.** (You must file a Petition for Order for Protection, form DV-1.015 for domestic violence, or form UHST-02.0200 for harassment. You may file your Petition for Order for Protection using the same case number assigned to this case.)

**Important!** If you need protection **now**, ask the court clerk about getting a Temporary Order for Protection.

- ☐ **There already is an Order for Protection between my spouse and me.**

Court that issued the order: \_\_\_\_\_

Case number: \_\_\_\_\_

Expiration date: \_\_\_\_\_

## 18. Restraining Order

*Do you want the court to issue a Restraining Order as part of the final orders in this case?*

- ☐ **No.** (Skip to **19**.)
- ☐ **Yes.** Check the type of orders you want:
- ☐ **Do not disturb** – Order the Respondent not to disturb my peace or the peace of any child listed in **6**.
- ☐ **Stay away** – Order the Respondent not to go onto the grounds of or enter my home, workplace, or school, and the daycare or school of any child listed in **6**.



☐ Also, not knowingly to go or stay within \_\_\_\_\_ feet of my home, workplace,  
✖ school, or the daycare or school of any child listed in **6**.

☐ **Do not hurt or threaten** – Order the Respondent:

- Not to assault, harass, stalk, or molest me or any child listed in **6**; and
- Not to use, try to use, or threaten to use physical force against me or the children that would reasonably be expected to cause bodily injury.

**Warning!** If the court makes this order, the court must consider if weapons restrictions are required by state law; federal law may also prohibit the Restrained Person from possessing firearms or ammunition.

☐ **Prohibit weapons and order surrender** – Order the Respondent:

- Not to access, possess, or obtain any firearms, other dangerous weapons, or concealed pistol licenses until the Order ends, **and**
- To immediately surrender any firearms, other dangerous weapons, and any concealed pistol licenses that he/she possesses to (*check one*): ☐ the police chief or sheriff. ☐ his/her lawyer. ☐ other person (*name*): \_\_\_\_\_.

☐ **Other restraining orders:** \_\_\_\_\_

\_\_\_\_\_

**Important!** If you want a restraining order **now**, you must file a Motion for Temporary Family Law Order and Restraining Order (FL Divorce 223) or a Motion for Immediate Restraining Order (Ex Parte) (FL Divorce 221).

## 19. Name Change

☐ No request.

☐ Change the Petitioner's name to: \_\_\_\_\_  
first middle last

## 20. Other requests, if any

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

### Petitioner fills out below:

I declare under penalty of perjury under the laws of the state of Washington that the facts I have provided on this form are true.

Signed at (*city and state*): \_\_\_\_\_ Date: \_\_\_\_\_



Petitioner signs here

\_\_\_\_\_  
Print name

### Petitioner's lawyer (if any) fills out below:



Petitioner's lawyer signs here

\_\_\_\_\_  
Print name and WSBA No.

\_\_\_\_\_  
Date



☐ **Respondent fills out below if he/she agrees to join this Petition:**

I, (name): \_\_\_\_\_, agree to join this *Petition*. I understand that if I fill out and sign below, the court may approve the requests listed in this *Petition* unless I file and serve a *Response* before the court signs final orders. (Check one):

☐ I do not need to be notified about the court's hearings or decisions in this case.

☐ I ask the Petitioner to notify me about any hearings in this case. (List an address where you agree to accept legal documents. This may be a lawyer's address or any other address.)

\_\_\_\_\_

address city state zip

(If this address changes before the case ends, you **must** notify all parties and the court in writing. You may use the Notice of Address Change form (FL All Family 120). You must also update your Confidential Information Form (FL All Family 001) if this case involves parentage or child support.)

▶ \_\_\_\_\_

Respondent signs here Print name Date



# Compare Results

Old File:

**FL Modify 501 Petition to Modify Child  
Support\_2019 12.pdf**

**7 pages (559 KB)**  
12/31/2019 4:04:24 PM

versus

New File:

**FL Modify 501 Petition to Modify Child  
Support\_2020 06.pdf**

**7 pages (561 KB)**  
6/10/2020 2:01:16 PM

## Total Changes

31

## Content

8 Replacements  
10 Insertions  
11 Deletions

## Styling and Annotations

2 Styling  
0 Annotations

[Go to First Change \(page 1\)](#)



Superior Court of Washington, County of \_\_\_\_\_

In re:

Petitioner/s (see \* below):

\_\_\_\_\_

And Respondent/s (other party/parties):

\_\_\_\_\_

No. \_\_\_\_\_

Petition to Modify Child Support Order  
(PTMD)

\* If you're filing this Petition in:

- the **same** case number as the current Child Support Order, the person who is listed as the Petitioner in the current order will stay Petitioner, even if s/he is not the person asking to modify the order now.
- a **different** case number or county from where the current Child Support Order was filed, the person asking to modify the order may be the Petitioner.

To modify a Child Support Order from a sealed Parentage case, contact the Superior Court Clerk's office about who to list as Petitioner and if there is a new case number.

## Petition to Modify Child Support Order

1. My name is: \_\_\_\_\_. I ask the court to modify a *Child Support Order*. I am filing and serving proposed *Child Support Schedule Worksheets* at the same time as this *Petition*.

**Important!** Check your county's Local Court Rules for other forms and information that must be filed.

2. **Correct County (Venue)**

This is the correct county for this case to be heard because:

- the children live in this county,
- the person who has the care, custody, or control of the children lives in this county, ✖
- the current *Child Support Order* was issued in this county, or
- The current child support order was issued in another state **and**
  - the children and the person who has the care, custody or control of the children do **not** live in Washington or the issuing state; **and**
  - the Respondent lives in this county.



The children live in (county): \_\_\_\_\_, (state): \_\_\_\_\_.

The Petitioner (name): \_\_\_\_\_ lives in (county): \_\_\_\_\_, (state): \_\_\_\_\_.

The Respondent (name): \_\_\_\_\_ lives in (county): \_\_\_\_\_, (state): \_\_\_\_\_.

### 3. Jurisdiction to modify order

The court has authority to modify the current *Child Support Order* because it was issued by a (check one):

☐ **Washington** state court.

☐ **Different** state or jurisdiction, but has been registered in a Washington state court **and** (check one):

☐ **All parties in Washington now:**

- All the parties to the current order (other than a State party) now live in this state; and
- The children do not live in the state or jurisdiction where the order was issued.

☐ **No one left in issuing state:**

- None of the children or parties to the current order (other than a State party) live in the state or jurisdiction where the order was issued;
- The person asking to modify the order (Petitioner) lives outside of Washington; and
- Washington has personal jurisdiction over the Respondent because s/he (check all that apply):
  - ☐ lives in this state now.
  - ☐ will be personally served in this state with a *Summons* and *Petition* for this case.
  - ☐ lived in this state with the children.
  - ☐ lived in this state and paid for pregnancy costs or support for the children.
  - ☐ did or said something that caused the children to live in this state.
  - ☐ had sex in this state, which may have produced the children.
  - ☐ signed an agreement to join this *Petition* or other document agreeing that the court can decide his or her rights in this case.

☐ other (specify): \_\_\_\_\_

☐ **Parties have consented:**

- At least one child or party to the current order lives in Washington state now; and
- Each party to the current order (other than a State party) has filed a consent with the court that issued the current order agreeing that a Washington court may modify the order and take continuing, exclusive jurisdiction.

### 4. Is the state filing this *Petition*? (Check one):

☐ **No.** This *Petition* is filed by a parent or non-parent custodian.

☐ **Yes.** The state Department of Social and Health Services (DSHS) is filing this *Petition* because (check all that apply):



- ☐ the children receive public assistance.
- ☐ the children do not receive public assistance, but one of the parties asked DSHS to review the order and DSHS decided the order should be modified.
- ☐ another state or jurisdiction asked for this modification.

## 5. Current Child Support Order

The *Child Support Order* I want to modify was signed by the court on (date): \_\_\_\_\_

in (county): \_\_\_\_\_, (state): \_\_\_\_\_.

That order says (name): \_\_\_\_\_ must pay

(amount): \$ \_\_\_\_\_ each month for (children's names): \_\_\_\_\_

**Important!** Attach or file a certified copy of the current child support order that you want to change **if** it was issued in a different county or state.

## 6. Should the court modify the monthly child support amount?

- ☐ **No.**
- ☐ **Yes.** I ask the court to order child support based on Washington state law. The monthly child support amount should be changed now because (check all that apply):
  - ☐ **Agreement** – The parties agree to the changes.
  - ☐ **1 year or more has passed** – The current order was signed at least one year ago **and** (check all that apply):
    - ☐ the current order causes severe financial hardship for me or the children.
    - ☐ I want to add a Periodic Adjustment provision according to RCW 26.09.100.
    - ☐ A child is still in high school and there is a need to extend support beyond the 18th birthday to complete high school.
  - ☐ **2 years or more have passed** – The current order was signed at least two full years (24 months) ago **and** (check all that apply):
    - ☐ the parents' income has changed.
    - ☐ the economic table or standards in RCW 26.19 have changed.

(Note – You may be able to use a Motion to Adjust Child Support Order (form FL Modify 521) instead of this Petition if 24 months have passed and the only reasons for your requests are that the parents' income has changed, or the economic table or standards have changed.)
  - ☐ **Default or Past Agreement** – The current order was issued by default or agreement, without the court independently examining the evidence to decide a reasonable amount of support according to the law.
  - ☐ **Change of Circumstances** – There has been a substantial change in circumstances since the current order was signed. (Describe): \_\_\_\_\_



---

---

---

**7. Should the court modify the end date for child support?**

☐ **No.**

☐ **Yes.** The end date should be modified because *(check all that apply)*:

☐ **Agreement** – The parties agree to the changes.

☐ **Finish High School** – The current order was signed at least one year ago. *(Child's name)*: \_\_\_\_\_ will still be in high school when s/he turns 18 and will need support until s/he finishes high school. I ask the court to order child support for this child to continue past his/her 18<sup>th</sup> birthday until he/she finishes high school.

☐ **Dependent Adult Child** – The current order says support must be paid for each child until the child turns 18 or is no longer enrolled in high school, whichever happens last. Support should continue past this time for *(child's name)*: \_\_\_\_\_ because this child will be unable to support him/herself and will remain dependent past the age of 18. This child's situation has changed substantially since the current order was signed. *(Describe)*: \_\_\_\_\_

---

---

---

Support for this child should continue until *(check one)*:

☐ this child is able to support him/herself and is no longer dependent on the parents.

☐ other: \_\_\_\_\_

☐ **Default or Past Agreement** – The current order was issued by default or agreement, without the court independently examining the evidence to decide a reasonable end date for support according to the law.

**8. Should the court modify post-secondary educational support?**

☐ **No.**

☐ **Yes. Issue was reserved** – The current order allows a parent or non-parent custodian to ask the court for post-secondary support at a later date without showing a substantial change of circumstances. I ask the court to order the parents to pay post-secondary support, and to set a specific post-secondary support amount or percentage of expenses for *(Children's names)*: \_\_\_\_\_. These children depend on the parents for the reasonable necessities of life and will be ready to start a college or vocational program around *(month/year)*: \_\_\_\_\_.

☒ **Yes. Support was granted, need to set an amount** – The current order says the parents must pay for the children's post-secondary support, but did not set a payment amount or percentage. I ask the court to order a specific post-secondary support amount or percentage of expenses for *(children's names)*: \_\_\_\_\_



\_\_\_\_\_ who will be ready to start a college or vocational program around (month/year): \_\_\_\_\_.

☐ **Yes. Modify** – I ask the court to (check all that apply):

☐ **Require** – The current order says post-secondary support is not required. I ask the court to change the order so that post-secondary support is required for (Children's names): \_\_\_\_\_. These children depend on the parents for the reasonable necessities of life and need support for college or vocational school.

☐ **Cancel** – The current order says the parents must pay for the children's post-secondary (college or vocational school) support. I ask the court to change the order so that post-secondary support is no longer required.

☐ **Change Amount** – The current order requires the parents to pay a specific amount or percentage of expenses for the children's post-secondary (college or vocational school) support. I ask the court to change the amount or percentage.

**These changes should be made because (check all that apply):**

☐ **Agreement** – The parties agree to the changes.

☐ **Default or Past Agreement** – The current order was issued by default or agreement, without the court independently examining the evidence to decide these issues.

☐ **Change of Circumstances** – There has been a substantial change in circumstances since the current order was signed. (Describe): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 9. Should the court modify payment for children's expenses or tax issues?

☐ **No.**

☐ **Yes.** I ask the court to order or change (check all that apply):

☐ day care expenses.

☐ educational expenses.

☐ long-distance transportation expenses.

☐ other expenses.

☐ tax issues. Order that parties have the right to claim the children as their dependents for purposes of personal tax exemptions and associated tax credits on their tax forms in this way (specify): \_\_\_\_\_

**Important!** Although the personal tax exemptions are currently suspended under federal law through tax year 2025, other tax benefits may flow from claiming a child as dependent.

**These changes should be made because (check all that apply):**

☐ **Agreement** – The parties agree to the changes.



- ☐ **2 years or more have passed** – It has been at least two full years (24 months) since the order was signed and these requests are based only on changes in the parents' income or the economic table or standards in RCW 26.19.

*(Note – You may be able to use a Motion to Adjust Child Support Order (form FL Modify 521) instead of this Petition if 24 months have passed and the only reasons for your requests are that the parents' income has changed, or the economic table or standards have changed.)*

- ☐ **Default or Past Agreement** – The current order was issued by default or agreement, without the court independently examining the evidence to decide these issues.

- ☐ **Change of Circumstances** – There has been a substantial change in circumstances since the current order was signed. *(Describe):* \_\_\_\_\_

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

## 10. Should the court modify health insurance orders?

- ☐ **No.**

- ☐ **Yes.** I ask the court to change the health insurance orders as follows:

- ☐ Order one or both parents to provide or pay for health insurance coverage for the children if it is available through an employer or union for less than 25% of his/her basic support obligation (*Worksheets, line 19*), and order each parent to pay his/her share of the children's healthcare costs that are not covered by insurance.

- ☐ Other (*specify*): \_\_\_\_\_

\_\_\_\_\_

**These changes should be made because** (*check all that apply*):

- ☐ **Agreement** – The parties agree to the changes.

- ☐ **2 years or more have passed** – It has been at least two full years (24 months) since the order was signed and these requests are based only on changes in the parents' income or the economic table or standards in RCW 26.19.

*Note – You may be able to use a Motion to Adjust Child Support Order (form FL Modify 521) instead of this Petition if 24 months have passed and the only reasons for your requests are that the parents' income has changed, or the economic table or standards have changed.*

- ☐ **Default or Past Agreement** – The current order was issued by default or agreement, without the court independently examining the evidence to decide these issues.

- ☐ **Change of Circumstances** – There has been a substantial change in circumstances since the current order was signed. *(Describe):* \_\_\_\_\_

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

## 11. When do you want the new order to start?

I want the new *Child Support Order* to take effect:

- ☐ on the day this *Petition* is filed.





☐ other (specify): \_\_\_\_\_

If the changes to the *Child Support Order* cause an overpayment or an underpayment of support or other expenses, I ask the court to order payment or give credit for those amounts.

## 12. Other Requests

☐ Does not apply.

☐ I ask the court to order payment of lawyer fees and court costs.

☐ Other (specify): \_\_\_\_\_

## Person filing this Petition fills out below:

I declare under penalty of perjury under the laws of the state of Washington that the facts I have provided on this form are true.

Signed at (city and state): \_\_\_\_\_ Date: \_\_\_\_\_



\_\_\_\_\_  
Person filing this Petition signs here

\_\_\_\_\_  
Print name

## Lawyer (if any) fills out below:



\_\_\_\_\_  
Lawyer signs here

\_\_\_\_\_  
Print name and WSBA No.

\_\_\_\_\_  
Date

**Warning!** Documents filed with the court are available for anyone to see unless they are sealed. Financial, medical, and confidential reports, as described in General Rule 22, **must** be sealed so they can only be seen by the court, the other parties, and the lawyers in your case. Seal those documents by filing them separately, using a *Sealed* cover sheet (form FL All Family 011, 012, or 013). You may ask for an order to seal other documents.

## ☐ The other parent or non-parent custodian fills out below if s/he agrees to join this Petition:

I, (name): \_\_\_\_\_, agree to join this *Petition*. I understand that if I fill out and sign below, the court may approve the requests listed in this *Petition* unless I file and serve a *Response* before the court signs final orders. (Check one):

☐ I do not need to be notified about the court's hearings or decisions in this case.

☐ The person who filed this *Petition* must notify me about any hearings in this case. (List an address where you agree to accept legal documents. This may be a lawyer's address or any other address.)

\_\_\_\_\_  
street number or P.O. box

\_\_\_\_\_  
city

\_\_\_\_\_  
state

\_\_\_\_\_  
zip

(If this address changes before the case ends, you **must** notify all parties and the court clerk in writing. You may use the Notice of Address Change form (FL All Family 120). You must also update your Confidential Information Form (FL All Family 001).)



\_\_\_\_\_  
Person joining Petition signs here

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date





6/18/2020 11:46:17 AM

# Compare Results

Old File:

**FL Non-Parent 402 ICWA Notice.pdf**

**4 pages (414 KB)**

9/1/2017 11:37:51 AM

versus

New File:

**FL Non-Parent 402 ICWA Notice\_2020 06.pdf**

**5 pages (528 KB)**

6/10/2020 2:03:01 PM

## Total Changes

84

## Content

12 Replacements

47 Insertions

24 Deletions

## Styling and Annotations

1 Styling

0 Annotations

[Go to First Change \(page 1\)](#)



**Superior Court of Washington, County of \_\_\_\_\_**

In re custody of:

Children:

\_\_\_\_\_

Petitioner/s *(person/s who started this case)*:

\_\_\_\_\_


Respondents *(parents and any guardian or custodian)*:

\_\_\_\_\_

\_\_\_\_\_

No. \_\_\_\_\_

Indian Child Welfare Act Notice (Non-Parent Custody)  
(BIAN)

 Clerk: Do not file in a public access file  
(GR 22(c)(3), 25 CFR 23.11(e)(7))

**Indian Child Welfare Act Notice (Non-Parent Custody)**

To: Parent/s *(name/s)*: \_\_\_\_\_

Indian Custodian/s, if any *(name/s)*: \_\_\_\_\_

Designated ICWA Tribal Agent/s *(name/s and tribe/s)*: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_


Regional Director: Portland Regional Director, Bureau of Indian Affairs, 911 NE 11th Avenue,  
Portland, Oregon 97232.


I have filed a *Non-Parent Custody Petition* to ask a Washington State Court for custody of children who are members of (or may be eligible for membership in) the Indian tribe/s listed above. The Court's decision may affect the rights of the children's parents, Indian custodians, and tribe/s. The children may be taken from their home temporarily or permanently.

The court is located at:

\_\_\_\_\_  
*Court's street address*

\_\_\_\_\_  
*Court's phone number*

 RCW 26.10.034, 13.38.070;  
25 C.F.R. §§ 23.11, 23.111;  
25 U.S.C. § 1912  
Mandatory Form (06/2020)  
FL Non-Parent 402

ICWA Notice  
(Non-Parent Custody)  
p. 1 of 5 



\_\_\_\_\_  
Court's mailing address (if different)

\_\_\_\_\_  
City State Zip



## ➤ Court Hearing

- ☐ A court hearing or hearings have been scheduled. See attached hearing notice or case scheduling order.
- ☐ No court hearing has been scheduled in this case yet.

## ➤ Rights

If you are the parent, Indian custodian, or agent of the children's tribe, you have these rights:

- To receive this notice at least 10 days before the first hearing in this case.
- To have up to 20 extra days to prepare for a hearing, if you ask the court.
- To see all documents and evidence filed with the court for this case.
- To be part of this case at any point (intervene as a party).
- To have the Court appoint a lawyer for you, if you are a parent or Indian custodian and the Court finds you are indigent (cannot afford your own lawyer).
- To ask this court to transfer this case to the court of the child's tribe. This court will approve the transfer to tribal court unless one of the parents objects or there is a good reason to keep the case in state court.

## ➤ Warnings

- This case may affect the future parental and/or custodial rights of the child's Tribe/s, the parents, and any Indian custodian of the child named above. The child could be removed from their home temporarily or permanently.
- You must keep this notice and all the information in it confidential. Only people that need this information to exercise rights under ICWA should see this notice.

## ➤ Information

The information below is to help determine the children's Indian status. Petitioner/s must make a good faith effort to provide this information.

### 1. Information about the person/s asking for custody of the children

Name: \_\_\_\_\_ Tel. #: \_\_\_\_\_

Name: \_\_\_\_\_ Tel. #: \_\_\_\_\_

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

Lawyer's name (if any): \_\_\_\_\_

Lawyer's address: \_\_\_\_\_ Tel. #: \_\_\_\_\_

### 2. Child's Information

Child's name: \_\_\_\_\_





Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Tribe/s child belongs to (or may belong to):  \_\_\_\_\_

Tribal enrollment # or other tribal ID: \_\_\_\_\_

☐ This child or one of the child's parents or grandparents was adopted. The child or a birth relative may be eligible for tribal membership. (Sections 3 through 5 below ask for information about legal relatives. Provide the same information for birth relatives and attach to this form.)

☐ There are (#)   other children involved in this case. (For each additional child complete form FL Non-Parent 403, ICWA Notice – Attachment for Additional Child.)

### 3. Parent 1's Information

Parent's current name: \_\_\_\_\_

Other names used, if any: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Current address:   \_\_\_\_\_

Former addresses:  \_\_\_\_\_

Tribe/s Parent  belongs to: \_\_\_\_\_

Tribal enrollment # or other tribal ID: \_\_\_\_\_

### 4. Parent 2's Information

Parent's current name: \_\_\_\_\_

Other names used, if any: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

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

Former addresses: \_\_\_\_\_

Tribe/s Parent belongs to: \_\_\_\_\_

Tribal enrollment # or other tribal ID: \_\_\_\_\_

### 5. Information about the child's grandparents and great grandparents

Parent 1's parents		
Current name & other names used		
Current address		
Former addresses		
Date and place of birth		
Date and place of		



death, if no longer living		
Tribe		
Tribal Enrollment # or other tribal ID		

Parent 2's parents		
Current name & other names used		
Current address		
Former addresses		
Date and place of birth		
Date and place of death, if no longer living		
Tribe		
Tribal Enrollment # or other tribal ID		

Parent 1's grandparents (add pages, as needed)		
Current name & other names used		
Current address		
Former addresses		
Date and place of birth		
Date and place of death, if no longer living		
Tribe		
Tribal Enrollment # or other tribal ID		



Parent 2's grandparents (add pages, as needed)		
Current name & other names used		
Current address		
Former addresses		
Date and place of birth		
Date and place of		




**Parent 2's grandparents** (add pages, as needed)

death, if no longer living		
Tribe		
Tribal Enrollment # or other tribal ID		

**Petitioner or Petitioner's lawyer fills out below**

 \_\_\_\_\_  \_\_\_\_\_  
Petitioner **or** lawyer signs here Date

 \_\_\_\_\_  
Print name (if lawyer, also list WSBA No.)

**To Petitioner:**

You must have this *Notice* and a copy of the *Petition* served by certified mail, return receipt requested to the:

- Children's tribe/s, addressed to the agent identified by the tribe/s (tribal agents designated to receive ICWA Notices are listed in the Federal Register: [www.FederalRegister.gov](http://www.FederalRegister.gov) (search "ICWA Agent") ),
- Children's parents,
- Indian custodians (if any), and
- Bureau of Indian Affairs.

Fill out and file a *Proof of Mailing* form (FL Non-Parent 404).

(In addition to this mailing, you must have the *Summons* and *Petition* personally served on the parents and any Indian custodian.)



6/18/2020 11:54:20 AM

# Compare Results

Old File:

**FL Non-Parent 403 ICWA Notice  
Attachment.pdf**

**2 pages (295 KB)**  
5/5/2016 1:32:28 PM

versus

New File:

**FL Non-Parent 403 ICWA Notice  
Attachment\_2020 06.pdf**

**2 pages (378 KB)**  
6/10/2020 2:05:36 PM

## Total Changes

54

## Content

7 Replacements  
37 Insertions  
8 Deletions

## Styling and Annotations

2 Styling  
0 Annotations

[Go to First Change \(page 1\)](#)



## ICWA Notice – Attachment for Additional Child

(Fill out this form for each additional child and attach to the ICWA Notice, form FL Non-Parent 402.)

### 6. Additional Child's Information

Child's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_


Tribe/s child belongs to (or may belong to): \_\_\_\_\_

Tribal enrollment # or other tribal ID: \_\_\_\_\_

(Check one): 

☐ This child has the same parents as the child listed the ICWA Notice section 2. (You may delete the tables below.)

☐ This child has different parents than the child listed in the ICWA Notice section 2. (Fill out below.)

Child's Parents	Parent 1 <input type="checkbox"/> same as the child in section 2	Parent 2 <input type="checkbox"/> same as the child in section 2 
Current name & other names used		
Current address		
Former addresses		
Date and place of birth		
Date and place of death, if no longer living		
Tribe		
Tribal Enrollment # or other tribal ID		

Parent 1's parents <input type="checkbox"/> same as the child listed in section 2		
Current name & other names used		
Current address		
Former addresses		
Date and place of birth		
Date and place of death, if no longer living		
Tribe		
Tribal Enrollment # or other tribal ID		



<b>Parent 2's parents</b> [ ] same as the child listed in section 2		
Current name & other names used		
Current address		
Former addresses		
Date and place of birth		
Date and place of death, if no longer living		
Tribe		
Tribal Enrollment # or other tribal ID		

<b>Parent 1's grandparents</b> [ ] same as the child listed in section 2		
Current name & other names used		
Current address		
Former address		
Date and place of birth		
Date of death, if no longer living		
Tribe		
Tribal Enrollment # or other tribal ID		

<b>Parent 2's grandparents</b> [ ] same as the child listed in section 2		
Current name & other names used		
Current address		
Former addresses		
Date and place of birth		
Date of death, if no longer living		
Tribe		
Tribal Enrollment # or other tribal ID		



# Compare Results

Old File:

**FL Parentage 386 Child Support Order\_based  
on Order After SA Fact-Finding hrg\_2019  
01.pdf**

**13 pages (129 KB)**  
12/19/2018 2:44:59 PM

versus

New File:

**FL Parentage 386 Child Support Order based  
on RCW 26.26A.465\_2020 06.pdf**

**13 pages (648 KB)**  
6/10/2020 2:06:57 PM

## Total Changes

897

## Content

21 Replacements  
217 Insertions  
281 Deletions

## Styling and Annotations

378 Styling  
0 Annotations

[Go to First Change \(page 1\)](#)



Superior Court of Washington, County of \_\_\_\_\_

In re:

Petitioner/s (person/s who started this case):

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

And Respondent/s (other party/parties):

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

No. \_\_\_\_\_

Child Support Order based on RCW  
26.26A.465

☐ Final (ORS)

Clerk's action required: WSSR, **1**

**Child Support Order based on RCW 26.26A.465**

***This order will be a public record. You may delete this introductory box about Sexual Assault before filing.***

Use this form **only** if the court signed an Order after Sexual Assault Fact-Finding Hearing and:

- The court found that the child was born as a result of sexual assault.
- The court ordered that the person who committed the sexual assault is **not** a legal parent.
- The birth mother or legal guardian asked for child support.

**1. Money Judgment Summary**

☐ No money judgment is ordered.

☐ Summarize any money judgments from section **22** in the table below.

Judgment for	Debtor's name (person who must pay money)	Creditor's name (person who must be paid)	Amount	Interest
Past due child support from _____ to _____			\$	\$
Past due medical support from _____ to _____			\$	\$
Past due children's exp. from _____ to _____			\$	\$
Other amounts (describe):			\$	\$



Yearly Interest Rate for child support, medical support, and children's expenses: 12%.  
For other judgments: \_\_\_\_% (12% unless otherwise listed).

Lawyer (name): \_\_\_\_\_ represents (name): \_\_\_\_\_

Lawyer (name): \_\_\_\_\_ represents (name): \_\_\_\_\_

## ➤ Findings and Orders

2. The court orders child support as part of this case. This is a final order.
3. The *Child Support Schedule Worksheets* attached or filed separately are approved by the court and made part of this Order.

## 4. Contact and employment information

Each party must fill out and file with the court a *Confidential Information* form (FL All Family 001) including personal identifying information, mailing address, home address, and employer contact information.

**Important!** If you move or get a new job any time while support is still owed, you must:

- Notify the Support Registry, and
- Fill out and file an updated *Confidential Information* form with the court.

**Warning!** Any notice of a child support action delivered to the last address you provided on the *Confidential Information* form will be considered adequate notice, if the party trying to serve you has shown diligent efforts to locate you.

## 5. Income

(Name): _____	(Name): _____
Net monthly income \$ _____. (line 3 of the Worksheets)	Net monthly income \$ _____. (line 3 of the Worksheets)
This income is (check one): <input type="checkbox"/> imputed to this person. (Skip to 6.) <input type="checkbox"/> this person's actual income (after any exclusions approved below).	This income is (check one): <input type="checkbox"/> imputed to this person. (Skip to 6.) <input type="checkbox"/> this person's actual income (after any exclusions approved below).
Does this person have income from overtime or a 2nd job? <input type="checkbox"/> No. (Skip to 6.) <input type="checkbox"/> Yes. (Fill out below.) Should this income be excluded? (check one): <input type="checkbox"/> No. The court has <b>included</b> this income in this person's gross monthly income on line 1 of the Worksheets. <input type="checkbox"/> Yes. This income should be <b>excluded</b> because: ▪ This person worked over 40 hours per week averaged over 12 months, and ▪ That income was earned to pay for	Does this person have income from overtime or a 2nd job? <input type="checkbox"/> No. (Skip to 6.) <input type="checkbox"/> Yes. (Fill out below.) Should this income be excluded? (check one): <input type="checkbox"/> No. The court has <b>included</b> this income in this person's gross monthly income on line 1 of the Worksheets. <input type="checkbox"/> Yes. This income should be <b>excluded</b> because: ▪ This person worked over 40 hours per week averaged over 12 months, and ▪ That income was earned to pay for



<p>(Name): _____</p> <p><input type="checkbox"/> current family needs <input type="checkbox"/> debts from a past relationship <input type="checkbox"/> child support debt, and</p> <ul style="list-style-type: none"> <li>This person will stop earning this extra income after paying these debts.</li> </ul> <p>The court has <b>excluded \$</b> _____ from this person's gross monthly income on line 1 of the <i>Worksheets</i>.</p> <p><input type="checkbox"/> Other Findings: _____</p> <p>_____</p> <p>_____</p>	<p>(Name): _____</p> <p><input type="checkbox"/> current family needs <input type="checkbox"/> debts from a past relationship <input type="checkbox"/> child support debt, and</p> <ul style="list-style-type: none"> <li>This person will stop earning this extra income after paying these debts.</li> </ul> <p>The court has <b>excluded \$</b> _____ from this person's gross monthly income on line 1 of the <i>Worksheets</i>.</p> <p><input type="checkbox"/> Other Findings: _____</p> <p>_____</p> <p>_____</p>
--	--

## 6. Imputed Income

To calculate child support, the court may **impute** income to a party:

- whose income is unknown, or
- who the Court finds is unemployed or under-employed by choice.

Imputed income is not actual income. It is an assigned amount the court finds a party could or should be earning. (RCW 26.19.071(6))

<p>(Name): _____</p> <p><input type="checkbox"/> Does not apply. This person's actual income is used. (Skip to 7.)</p> <p><input type="checkbox"/> This person's monthly net income is imputed because (check one):</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> this person's income is unknown.</li> <li><input type="checkbox"/> this person is voluntarily unemployed.</li> <li><input type="checkbox"/> this person is voluntarily under-employed.</li> <li><input type="checkbox"/> this person works full-time but is purposely under-employed to reduce child support.</li> <li><input type="checkbox"/> this parent is currently enrolled in high school full-time and is voluntarily unemployed or under-employed.</li> </ul> <p>The imputed amount is based on the information below: (Options are listed in order of required priority. The Court used the first option possible based on the information it had unless a presumed option was rebutted.)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Pay for 20 hours per week at minimum wage where this parent lives because this parent is enrolled in high school full-time and is voluntarily unemployed or under-employed.</li> <li><input type="checkbox"/> Full-time pay at current pay rate.</li> <li><input type="checkbox"/> Full-time pay based on reliable information about past earnings.</li> <li><input type="checkbox"/> Full-time pay based on incomplete or</li> </ul>	<p>(Name): _____</p> <p><input checked="" type="checkbox"/> Does not apply. This person's actual income is used. (Skip to 7.)</p> <p><input checked="" type="checkbox"/> This person's monthly net income is imputed because (check one):</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> this person's income is unknown.</li> <li><input type="checkbox"/> this person is voluntarily unemployed.</li> <li><input type="checkbox"/> this person is voluntarily under-employed.</li> <li><input type="checkbox"/> this person works full-time but is purposely under-employed to reduce child support.</li> <li><input type="checkbox"/> this parent is currently enrolled in high school full-time and is voluntarily unemployed or under-employed.</li> </ul> <p>The imputed amount is based on the information below: (Options are listed in order of required priority. The Court used the first option possible based on the information it had unless a presumed option was rebutted.)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Pay for 20 hours per week at minimum wage where this parent lives because this parent is enrolled in high school full-time and is voluntarily unemployed or under-employed.</li> <li><input checked="" type="checkbox"/> Full-time pay at current pay rate.</li> <li><input type="checkbox"/> Full-time pay based on reliable information about past earnings.</li> <li><input type="checkbox"/> Full-time pay based on incomplete or</li> </ul>
---	---



<p>(Name): _____</p> <p>irregular information about past earnings.</p> <p><input type="checkbox"/> Pay for 32 hours per week at minimum wage where this parent lives because this parent:</p> <p><input type="checkbox"/> recently graduated from high school.</p> <p><input type="checkbox"/> is on TANF now, or recently came off TANF, public assistance, SSI, or disability.</p> <p><input type="checkbox"/> was recently incarcerated.</p> <p><input type="checkbox"/> Full-time pay at minimum wage where the person lives because this person (<i>check all that apply</i>):</p> <p><input type="checkbox"/> recently worked at minimum wage jobs.</p> <p><input type="checkbox"/> has never been employed.</p> <p><input type="checkbox"/> does not have information about past earnings.</p> <p><input type="checkbox"/> Table of Median Net Monthly Income.</p> <p><input type="checkbox"/> Other (<i>specify</i>): _____</p>	<p>(Name): _____</p> <p>irregular information about past earnings.</p> <p><input type="checkbox"/> Pay for 32 hours per week at minimum wage where this parent lives because this parent:</p> <p><input type="checkbox"/> recently graduated from high school.</p> <p><input type="checkbox"/> is on TANF now, or recently came off TANF, public assistance, SSI, or disability.</p> <p><input type="checkbox"/> was recently incarcerated.</p> <p><input type="checkbox"/> Full-time pay at minimum wage where the person lives because this person (<i>check all that apply</i>):</p> <p><input type="checkbox"/> recently worked at minimum wage jobs.</p> <p><input type="checkbox"/> has never been employed.</p> <p><input type="checkbox"/> does not have information about past earnings.</p> <p><input type="checkbox"/> Table of Median Net Monthly Income.</p> <p><input type="checkbox"/> Other (<i>specify</i>): _____</p>
---	---

## 7. Limits affecting the monthly child support amount

☐ Does not apply. The monthly amount was not affected by the upper or lower limits in RCW 26.19.065.

☐ The monthly amount has been affected by (*check all that apply*):

☐ **low-income limits.** The self-support reserve and presumptive minimum payment have been calculated in the *Worksheets*, lines 8.a. - c.

☐ **the 45% net income limit.** The court finds that the paying person's child support obligations are more than 45% of his/her net income (*Worksheets*, line 18). Based on the child's best interests and the persons' circumstances, it is (*check one*):

☐ fair ☐ **not** fair to apply the 45% limit. (*Describe both parties' situations*):

---



---



---

☐ **Combined Monthly Net Income over \$12,000.** Together the parties earn more than \$12,000 per month (*Worksheets* line 4). The child support amount (*check one*):

☐ is the presumptive amount from the economic table.

☐ is **more** than the presumptive amount from the economic table because (*specify*):

---



---



## 8. Standard Calculation

Name	Standard calculation Worksheets line 17
	\$
	\$

## 9. Deviation from standard calculation

Should the monthly child support amount be different from the standard calculation?

☐ **No** – The monthly child support amount ordered in section **10** is the **same** as the standard calculation listed in section **8** because (check one):

☐ Neither party asked for a deviation from the standard calculation. (Skip to **10**.)

☐ There is no good reason to approve the deviation requested by (name/s): \_\_\_\_\_.

The facts supporting this decision are (check all that apply):

☐ detailed in the Worksheets, Part VIII, lines 20 through 26.

☐ the party asking for a deviation:

☐ has a new spouse or domestic partner with income of \$ \_\_\_\_\_.

☐ lives in a household where other adults have income of \$ \_\_\_\_\_.

☐ has income from overtime or a 2<sup>nd</sup> job that was excluded in section **5** above.

☐ other (specify): \_\_\_\_\_.

☐ **Yes** – The monthly child support amount ordered in section **10** is **different** from the standard calculation listed in section **8** because (check all that apply):

☐ One or both parties in this case has:

☐ children from other relationships.

☐ paid or received child support for children from other relationships.

☐ gifts, prizes, or other assets.

☐ income that is not regular (non-recurring income) such as bonuses, overtime, etc.

☐ unusual unplanned debt (extraordinary debt not voluntarily incurred).

☐ tax planning considerations that will not reduce the economic benefit to the child.

☐ very different living costs, which are beyond their control.

☐ The child in this case:

☐ has extraordinary income.

☐ has special needs because of a disability.

☐ has special medical, educational, or psychological needs.

☐ The person who owes support has shown it is not fair to have to pay the \$50 per child presumptive minimum payment.

☐ The person who is owed support has shown it is not fair to apply the self-support reserve (calculated on lines 8.a. - c. of the Worksheets).



☐ Other reasons: \_\_\_\_\_

**The facts that support the reasons checked above are (check all that apply):**

☐ detailed in the *Worksheets*, Part VIII, lines 20 through 26.

☐ the party asking for a deviation:

☐ has a new spouse or domestic partner with income of \$\_\_\_\_\_.

☐ lives in a household where other adults have income of \$\_\_\_\_\_.

☐ has income from overtime or a 2<sup>nd</sup> job that was excluded in section 5 above.

☐ as follows: \_\_\_\_\_

### 10. Monthly child support amount (transfer payment)

After considering the standard calculation in section 8, and whether or not to apply a deviation in section 9, the court orders the following monthly child support amount (transfer payment).

☐ (Name): \_\_\_\_\_ must pay child support to (name): \_\_\_\_\_ each month as follows for the child listed below:

Child's Name	Age	Amount
1.		\$
2.		\$
Total monthly child support amount:		\$

### 11. Starting date and payment schedule

The monthly child support amount must be paid starting (month, year): \_\_\_\_\_ on the following payment schedule:

☐ in one payment each month by the \_\_\_\_\_ day of the month.

☐ in two payments each month: ½ by the \_\_\_\_\_ and ½ by the \_\_\_\_\_ day of the month.

☐ other (specify): \_\_\_\_\_

### 12. Step Increase (for modifications or adjustments only)

☐ Does not apply.

☐ **Approved** – The court is changing a final child support order. The monthly child support amount is increasing by more than 30% from the last final child support order. This causes significant financial hardship to the person who owes support, so the increase will be applied in two equal steps:

- For six months from the Starting Date in section 11 above, the monthly child support amount will be the old monthly amount plus ½ of the increase, for a total of \$\_\_\_\_\_ each month.



- On (date): \_\_\_\_\_, six months after the Starting Date in section **11**, the monthly child support amount will be the full amount listed in section **10**.

☐ **Denied** – The court is changing a final child support order (check one):

- ☐ but the monthly payment increased by less than 30%.
- ☐ and the monthly payment increased by more than 30%, but this does not cause a significant hardship to the person who owes support.

### 13. Periodic Adjustment

☐ Child support may be changed according to state law. The Court is not ordering a specific periodic adjustment schedule below.

☐ Any party may ask the court to adjust child support periodically on the following schedule **without** showing a substantial change of circumstances:

The *Motion to Adjust Child Support Order* may be filed:

☐ every \_\_\_\_\_ months.

☐ on (date/s): \_\_\_\_\_.

☐ other (describe condition or event): \_\_\_\_\_.

**Important!** A party must file a *Motion to Adjust Child Support Order* (form FL Modify 521), and the court must approve a new *Child Support Order* for any adjustment to take effect.

☐ Deadlines, if any (for example, deadline to exchange financial information, deadline to file the motion): \_\_\_\_\_.

### 14. Payment Method (check either Registry or Direct Pay)

☐ **Registry** – Send payment to the Washington State Support Registry. The Division of Child Support (DCS) will forward the payments to the person owed support and keep records of all payments.

Address for payment: Washington State Support Registry  
PO Box 45868, Olympia, WA 98504

Phone number/s: 1 (800) 922-4306 or 1 (800) 442-5437

**Important!** If you are ordered to send your support payments to the Washington State Support Registry, and you pay some other person or organization, you will **not** get credit for your payment.

**DCS Enforcement** (if Registry is checked above):

☐ DCS will **enforce** this order because (check all that apply):

- ☐ this is a public assistance case.
- ☐ one of the parties has already asked DCS for services.
- ☐ one of the parties has asked for DCS services by signing the application statement at the end of this order (above the *Warnings*).

☐ DCS will **not** enforce this order unless one of the parties applies for DCS services or the child goes on public assistance.



☐ **Direct Pay** – Send payment to parent or non-parent custodian by:

☐ mail to: \_\_\_\_\_  
street address or PO box city state zip

or any new address the person owed support provides to the person who owes support. *(This does not have to be his/her home address.)*

☐ other method: \_\_\_\_\_  
\_\_\_\_\_

## 15. Enforcement through income withholding (garnishment)

DCS or the person owed support can collect the support owed from the wages, earnings, assets or benefits of the person who owes support, and can enforce liens against real or personal property as allowed by any state's child support laws without notice to the person who owes the support.

*If this order is **not** being enforced by DCS and the person owed support wants to have support paid directly from the employer, the person owed support must ask the court to sign a separate wage assignment order requiring the employer to withhold wages and make payments. (Chapter 26.18 RCW.)*

Income withholding may be delayed until a payment becomes past due if the court finds good reason to delay.

☐ Does not apply. There is no good reason to delay income withholding.

☐ Income withholding will be **delayed** until a payment becomes past due because *(check one)*:

☐ the child support payments are enforced by DCS and there are good reasons in the child's best interest **not** to withhold income at this time. If this is a case about changing child support, previously ordered child support has been paid on time.

*List the good reasons here:* \_\_\_\_\_

☐ the child support payments are **not** enforced by DCS and there are good reasons **not** to withhold income at this time.

*List the good reasons here:* \_\_\_\_\_

☐ the court has approved the parties' written agreement for a different payment arrangement.

## 16. End date for support

Support must be paid for each child until *(check one)*:

☐ the child turns 18 or is no longer enrolled in high school, whichever happens last, unless the court makes a different order in section **17**.

☐ the child turns 18 or is otherwise emancipated, unless the court makes a different order in section **17**.



☐ after (child's name): \_\_\_\_\_ turns 18. Based on information available to the court, it is expected that this child will be unable to support him/herself and will remain dependent past the age of 18. Support must be paid until (check one):

☐ this child is able to support him/herself and is no longer dependent.

☐ other: \_\_\_\_\_

☐ other (specify): \_\_\_\_\_

## 17. Post-secondary educational support (for college or vocational school)

☐ **Reserved** – The legal parent or legal guardian may ask the court for post-secondary educational support at a later date without showing a substantial change of circumstances by filing a *Petition to Modify Child Support Order* (form FL Modify 501). The *Petition* must be filed before child support ends as listed in section 16.

☐ **Granted** – The parties must pay for the child's post-secondary educational support. Post-secondary educational support may include support for the period after high school and before college or vocational school begins. The amount or percentage each person must pay (check one):

☐ will be decided later. The parties may make a written agreement or ask the court to set the amount or percentage by filing a *Petition to Modify Child Support Order* (form FL Modify 501).

☐ is as follows (specify): \_\_\_\_\_

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

☐ **Denied** – The request for post-secondary educational support is denied.

☐ **Other** (specify): \_\_\_\_\_

## 18. Claiming the child as a dependent on tax forms

Does not apply. The person paying support is not a parent and shall not have the right to claim the child as a dependent.

## 19. Health Insurance

The court is not ordering the person paying support to provide health insurance coverage for the child because s/he is not a parent.

☐ Health insurance costs are not included in this order.

☐ The person paying support must pay his/her proportional share\* of the premium paid by the legal parent or legal guardian to provide health insurance coverage for the child. Health insurance premiums (check one):

☐ are included on the *Worksheets* (line 14). No separate payment is needed.

☐ are **not** included on the *Worksheets*. Separate payment is needed. The legal parent or legal guardian may ask DCS or the court to enforce payment for the proportional share.



*\*Proportional share is each party's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.*

☐ A party has been ordered to pay an amount that is more than 25% of his/her basic support obligation (Worksheets, line 19). The court finds this is in the child's best interest because: \_\_\_\_\_

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

*Neither party can be ordered to pay an amount towards health insurance premiums that is more than 25% of his/her basic support obligation (Worksheets, line 19) unless the court finds it is in the best interest of the child.*

☐ Other (specify): \_\_\_\_\_

## 20. Children's expenses not included in the monthly child support amount

**Uninsured medical expenses** – Each person is responsible for a share of uninsured medical expenses as ordered below. Uninsured medical expenses include premiums, co-pays, deductibles, and other health care costs not covered by insurance.

Children's Expenses for:	(Name): _____	(Name): _____	Make payments to:	
	pays monthly	pays monthly	Person who pays the expense	Service Provider
Uninsured medical expenses	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> _____%**	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> _____%**	<input type="checkbox"/>	<input type="checkbox"/>

*Proportional Share is each person's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.*

*\*\* If the percentages ordered are different from the Proportional Share, explain why:*

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

**Other shared expenses (check one):**

☐ Does not apply. The monthly amount covers all expenses, except health care expenses.

☐ The parties will share the cost for the expenses listed below (check all that apply):



Children's Expenses for:	(Name): _____	(Name): _____	Make payments to:	
	pays monthly	pays monthly	Person who pays the expense	Service Provider
<input type="checkbox"/> Day care: _____ _____	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____% **	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____% **	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Education: _____ _____	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____% **	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____% **	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other (specify): _____ _____	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____% **	<input type="checkbox"/> Proportional Share* <input type="checkbox"/> \$ _____ <input type="checkbox"/> _____% **	<input type="checkbox"/>	<input type="checkbox"/>

\* Proportional Share is each person's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.

\*\* If any percentages entered are different from the Proportional Share, explain why:

---



---



---

☐ Other (give more detail about covered expenses here, if needed):

---



---



---



---

**A person receiving support can ask DCS to collect:**

- ☐ expenses owed directly to him/her.
- ☐ reimbursement for expenses the person providing support was ordered to pay.
- ☐ an order for a money judgment that s/he got from the court.

**21. Past due child support, medical support and other expenses**

☐ This order does not address any past due amounts or interest owed.

☐ As of (date): \_\_\_\_\_, the paying person does not owe (check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> past due child support   | <input type="checkbox"/> interest on past due child support   |
| <input type="checkbox"/> past due medical support | <input type="checkbox"/> interest on past due medical support |
| <input type="checkbox"/> past due other expenses  | <input type="checkbox"/> interest on past due other expenses  |


to (check all that apply): ☐ the legal parent or legal guardian. ☐ the state.



☐  The court orders the following **money judgments** (summarized in section 1 above):

Judgment for	Debtor's name (person who must pay money)	Creditor's name (person who must be paid)	Amount	Interest
<input type="checkbox"/> Past due child support from _____ to _____			\$	\$
<input type="checkbox"/> Past due medical support (health ins. & health care costs not covered by ins.) from _____ to _____			\$	\$
<input type="checkbox"/> Past due expenses for: <input type="checkbox"/> day care <input type="checkbox"/> education <input type="checkbox"/> long-distance transp. from _____ to _____			\$	\$
<input type="checkbox"/> Other (describe):			\$	\$

The **interest rate** for child support judgments is 12%.

☐  Other (specify): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 22. Overpayment caused by change

☐ Does not apply.

☐ The Order signed by the court today or on date: \_\_\_\_\_  
caused an overpayment of \$ \_\_\_\_\_.

☐ (Name): \_\_\_\_\_ shall repay this amount  
to (name): \_\_\_\_\_ by (date): \_\_\_\_\_.

☐ The overpayment shall be credited against the monthly support amount owed each  
month at the rate of \$ \_\_\_\_\_ each month until paid off.

☐ Other (specify): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 23. Other Orders

All the *Warnings* below are required by law and are incorporated and made part of this order.

☐ Other (specify): \_\_\_\_\_



Ordered.

Date

Judge or Commissioner

**Petitioner and Respondent or their lawyers fill out below:**

This document (check any that apply):

☐ is an agreement of the parties

☐ is presented by me

☐ may be signed by the court without notice to me

This document (check any that apply):

☐ is an agreement of the parties

☐ is presented by me

☐ may be signed by the court without notice to me

Petitioner signs here or lawyer signs here + WSBA #

Respondent signs here or lawyer signs here + WSBA #

Print Name

Date

Print Name

Date

**☐ If any person or child received public assistance:**

The state Department of Social and Health Services (DSHS) was notified about this order through the Prosecuting Attorney's office, and has reviewed and approved the following:

☐ child support

☐ medical support

☐ past due child support

☐ other (specify):

Deputy Prosecutor signs here

Print name and WSBA #

Date

**☐ Party applies for DCS enforcement services:**

I ask the Division of Child Support (DCS) to enforce this order. I understand that DCS will keep \$25 each year as a fee if DCS collects more than \$500, unless I ask to be excused from paying this fee in advance. (You may call DCS at 1-800-442-5437. DCS will **not** charge a fee if you have ever received TANF, tribal TANF, or AFDC.)

Party signs here

(lawyer cannot sign for party)

Print name

Date

**All the warnings below are required by law and are part of the order. Do not remove.**

**Warnings!**

**If you don't follow this child support order...**

- DOL or other licensing agencies may deny, suspend, or refuse to renew your licenses, including your driver's license and business or professional licenses, and
- Dept. of Fish and Wildlife may suspend or refuse to issue your fishing and hunting licenses and you may not be able to get permits. (RCW 74.20A.320)

**If you receive child support...**

You may have to:

- Document how that support and any cash received for the child's health care was spent.
- Repay the other person for any day care or special expenses included in the support if you didn't actually have those expenses. (RCW 26.19.080)



6/18/2020 11:56:54 AM

# Compare Results

Old File:

**WSCSS\_Schedule\_2019 01 - rmv ctc 0919.pdf**

**14 pages (713 KB)**

9/16/2019 11:21:38 AM

versus

New File:

**WSCSS\_Schedule\_2020 06.pdf**

**14 pages (596 KB)**

6/10/2020 2:09:14 PM

## Total Changes

109

## Content

27 Replacements  
24 Insertions  
47 Deletions

## Styling and Annotations

6 Styling  
5 Annotations

[Go to First Change \(page 1\)](#)



# WASHINGTON STATE CHILD SUPPORT SCHEDULE

Including:

- Definitions and Standards
- Instructions
- Economic Table
- Worksheets

Effective Dates:

Definitions & Standards	June 11, 2020
Instructions - only	June 11, 2020
Economic Table	January 1, 2019
Worksheets	January 1, 2019



Internet--download forms:

<http://www.courts.wa.gov/>

**Child Support Hotline, State DSHS, 1 (800) 442-KIDS**



# WASHINGTON STATE CHILD SUPPORT SCHEDULE

## DEFINITIONS AND STANDARDS

### Definitions

Unless the context clearly requires otherwise, these definitions apply to the standards following this section. RCW 26.19.011.

**Basic child support obligation:** means the monthly child support obligation determined from the economic table based on the parties' combined monthly net income and the number of children for whom support is owed.

**Child support schedule:** means the standards, economic table, worksheets and instructions, as defined in chapter 26.19 RCW.

**Court:** means a superior court judge, court commissioner, and presiding and reviewing officers who administratively determine or enforce child support orders.

**Deviation:** means a child support amount that differs from the standard calculation.

**Economic table:** means the child support table for the basic support obligation provided in RCW 26.19.020.

**Full-time:** means the customary number of maximum, non-overtime hours worked in an individual's historical occupation, industry, and labor market. "Full-time" does not necessarily mean hours per week.

**Instructions:** means the instructions developed by the Administrative Office of the Courts pursuant to RCW 26.19.050 for use in completing the worksheets. ❌

**Standards:** means the standards for determination of child support as provided in chapter 26.19 RCW.

**Standard calculation:** means the presumptive amount of child support owed as determined from the child support schedule before the court considers any reasons for deviation.

**Support transfer payment:** means the amount of money the court orders one parent to pay to another parent or custodian for child support after determination of the standard calculation and deviations. If certain expenses or credits are expected to fluctuate and the order states a formula or percentage to determine the additional amount or credit on an ongoing basis, the term "support transfer payment" does not mean the additional amount or credit.

**Worksheets:** means the forms developed by the Administrative Office of the Courts pursuant to RCW 26.19.050 for use in determining the amount of child support.

### Application Standards

1. **Application of the support schedule:** The child support schedule shall be applied:
  - a. in each county of the state;
  - b. in judicial and administrative proceedings under titles 13, 26 and 74 RCW;
  - c. in all proceedings in which child support is determined or modified;
  - d. in setting temporary and permanent support;
  - e. in automatic modification provisions or decrees entered pursuant to RCW 26.09.100; and
  - f. in addition to proceedings in which child support is

determined for minors, to adult children who are dependent on their parents and for whom support is ordered pursuant to RCW 26.09.100.

The provisions of RCW 26.19 for determining child support and reasons for deviation from the standard calculation shall be applied in the same manner by the court, presiding officers and reviewing officers. RCW 26.19.035(1).

2. **Written findings of fact supported by the evidence:** An order for child support shall be supported by written findings of fact upon which the support determination is based and shall include reasons for any deviation from the standard calculation and reasons for denial of a party's request for deviation from the standard calculation. RCW 26.19.035(2).
3. **Completion of worksheets:** Worksheets in the form developed by the Administrative Office of the Courts shall be completed under penalty of perjury and filed in every proceeding in which child support is determined. The court shall not accept incomplete worksheets or worksheets that vary from the worksheets developed by the Administrative Office of the Courts. RCW 26.19.035(3).
4. **Court review of the worksheets and order:** The court shall review the worksheets and the order setting child support for the adequacy of the reasons set forth for any deviation or denial of any request for deviation and for the adequacy of the amount of support ordered. Each order shall state the amount of child support calculated using the standard calculation and the amount of child support actually ordered. Worksheets shall be attached to the decree or order or if filed separately, shall be initialed or signed by the judge and filed with the order. RCW 26.19.035(4).

### Income Standards

1. ❌ **Consideration of all income:** All income and resources of each parent's household shall be disclosed and considered by the court when the court determines the child support obligation of each parent. Only the income of the parents of the children whose support is at issue shall be calculated for purposes of calculating the basic support obligation. Income and resources of any other person shall not be included in calculating the basic support obligation. RCW 26.19.071(1).
2. **Verification of income:** Tax returns for the preceding two years and current paystubs shall be provided to verify income and deductions. Other sufficient verification shall be required for income and deductions which do not appear on tax returns or paystubs. RCW 26.19.071(2).
3. **Income sources included in gross monthly income:** Monthly gross income shall include income from any source, including: salaries; wages; commissions; deferred compensation; overtime, except as excluded from income in RCW 26.19.071(4)(h); contract-related benefits; income from second jobs except as excluded from income in RCW 26.19.071(4)(h); dividends; interest; trust income; severance pay; annuities; capital gains; pension retirement benefits; workers' compensation; unemployment benefits; maintenance actually received; bonuses; social security benefits; disability insurance benefits; and income from self-employment, rent, royalties, contracts, proprietorship of a business, or joint ownership of a partnership or closely held corporation. RCW 26.19.071(3).





Veterans' disability pensions: Veterans' disability pensions or regular compensation for disability incurred in or aggravated by service in the United States armed forces paid by the Veterans' Administration shall be disclosed to the court. The court may consider either type of compensation as disposable income for purposes of calculating the child support obligation. See RCW 26.19.045.

4. Income sources excluded from gross monthly income: The following income and resources shall be disclosed but shall not be included in gross income: income of a new spouse or domestic partner or income of other adults in the household; child support received from other relationships; gifts and prizes; temporary assistance for needy families; Supplemental Security Income; general assistance; food stamps; and overtime or income from second jobs beyond forty hours per week averaged over a twelve-month period worked to provide for a current family's needs, to retire past relationship debts, or to retire child support debt, when the court finds the income will cease when the party has paid off his or her debts. Receipt of income and resources from temporary assistance for needy families, Supplemental Security Income, general assistance and food stamps shall not be a reason to deviate from the standard calculation. RCW 26.19.071(4).

VA aid and attendant care: Aid and attendant care payments to prevent hospitalization paid by the Veterans Administration solely to provide physical home care for a disabled veteran, and special compensation paid under 38 U.S.C. Sec. 314(k) through (r) to provide either special care or special aids, or both to assist with routine daily functions shall be disclosed. The court may not include either aid or attendant care or special medical compensation payments in gross income for purposes of calculating the child support obligation or for purposes of deviating from the standard calculation. See RCW 26.19.045.

Other aid and attendant care: Payments from any source, other than veterans' aid and attendance allowance or special medical compensation paid under 38 U.S.C. Sec. 314(k) through (r) for services provided by an attendant in case of a disability when the disability necessitates the hiring of the services or an attendant shall be disclosed but shall not be included in gross income and shall not be a reason to deviate from the standard calculation. RCW 26.19.055.

5. Determination of net income: The following expenses shall be disclosed and deducted from gross monthly income to calculate net monthly income: federal and state income taxes (see the following paragraph); federal insurance contributions act deductions (FICA); mandatory pension plan payments; mandatory union or professional dues; state industrial insurance premiums; court-ordered maintenance to the extent actually paid; up to five thousand dollars per year in voluntary retirement contributions actually made if the contributions show a pattern of contributions during the one-year period preceding the action establishing the child support order unless there is a determination that the contributions were made for the purpose of reducing child support; and normal business expenses and self-employment taxes for self-employed persons. Justification shall be required for any business expense deduction about which there is a disagreement. Items deducted from gross income shall not be a reason to deviate from the standard calculation. RCW 26.19.071(5).

Allocation of tax exemptions: The parties may agree which parent is entitled to claim the child or children as dependents for federal income tax exemptions. The court may award the exemption or exemptions and order a party to sign the federal income tax dependency exemption waiver. The court may divide the exemptions between the parties, alternate the exemptions between the parties or both. RCW 26.19.100.

6. Imputation of income: The court shall impute income to a parent when the parent is voluntarily unemployed or voluntarily underemployed. The court shall determine whether the parent is voluntarily underemployed or voluntarily unemployed based upon that parent's assets, residence, employment and earnings history, job skills, educational attainment, literacy, health and age, criminal record, dependency court obligations, and other employment barriers, record of seeking work, the local job market, the availability of employers willing to hire the parent, the prevailing earnings level in the local community, or any other relevant factors. A court shall not impute income to a parent who is gainfully employed on a full-time basis, unless the court finds that the parent is voluntarily underemployed and finds that the parent is purposely underemployed to reduce the parent's child support obligation. Income shall not be imputed for an unemployable parent. Income shall not be imputed to a parent to the extent the parent is unemployed or significantly underemployed due to the parent's efforts to comply with court-ordered reunification efforts under chapter 13.34 RCW or under a voluntary placement agreement with an agency supervising the child. Except as provided below regarding high school students, in the absence of records of a parent's actual earnings, the court shall impute a parent's income in the following order of priority:
  - (a) Full-time earnings at the current rate of pay;
  - (b) Full-time earnings at the historical rate of pay based on reliable information, such as employment security department data;
  - (c) Full-time earnings at a past rate of pay where information is incomplete or sporadic;
  - (d) Earnings of 32 hours per week at minimum wage in the jurisdiction where the parent resides if the parent is on temporary assistance for needy families (TANF) now or recently came off TANF or recently came off aged, blind, or disabled assistance benefits, pregnant women assistance benefits, essential needs and housing support, supplemental security income, or disability, has recently been released from incarceration, or is a recent high school graduate. Imputation of earnings at thirty-two hours per week under this provision is a rebuttable presumption;
  - (e) Full-time earnings at minimum wage in the jurisdiction where the parent resides if the parent has a recent history of minimum wage earnings, has never been employed and has no earnings history, or has no significant earnings history;
  - (f) Median net monthly income of year-round full-time workers as derived from the United States bureau of census, current population reports, or such replacement report as published by the bureau of census. (See "Approximate Median Net Monthly Income" table on page 7.) RCW 26.19.071(6).

When a parent is currently enrolled in high school full-time, the court shall consider the totality of the circumstances of both parents when determining whether each parent is voluntarily unemployed or voluntarily underemployed. If a parent who is currently enrolled in high school is determined to be voluntarily unemployed or voluntarily underemployed, the court shall impute income at earnings of twenty hours per week at minimum wage in the jurisdiction where that parent resides. Imputation of earnings at twenty hours per week under this provision is a rebuttable presumption.



## Allocation Standards

1. Basic child support: The basic child support obligation derived from the economic table shall be allocated between the parents based on each parent's share of the combined monthly net income. RCW 26.19.080(1).
2. Health care expenses: Health care costs are not included in the economic table. Monthly health care costs shall be shared by the parents in the same proportion as the basic support obligation. Health care costs shall include, but not be limited to, medical, dental, orthodontia, vision, chiropractic, mental health treatment, prescription medications, and other similar costs for care and treatment. RCW 26.19.080(2).
3. Day care and special child rearing expenses: Day care and special child rearing expenses, such as tuition and long distance transportation costs to and from the parents for visitation purposes, are not included in the economic table. These expenses shall be shared by the parents in the same proportion as the basic child support obligation. RCW 26.19.080(3).

minimum payment of fifty dollars per child per month or when it would be unjust to apply the self-support reserve limitation after considering the best interests of the child(ren) and the circumstances of each parent. Such circumstances include, but are not limited to, leaving insufficient funds in the custodial parent's household to meet the basic needs of the child(ren), comparative hardship to the affected households, assets or liabilities, and earning capacity. This section shall not be construed to require monthly substantiation of income. (See the Self-Support Reserve memorandum on the courts' website [www.courts.wa.gov/forms](http://www.courts.wa.gov/forms) and at [www.WashingtonLawHelp.org](http://www.WashingtonLawHelp.org)). RCW 26.19.065(2)(b).

4. Income above twelve thousand dollars: The economic table is presumptive for combined monthly net incomes up to and including twelve thousand dollars. When combined monthly net income exceeds twelve thousand dollars, the court may exceed the maximum presumptive amount of support upon written findings of fact. RCW 26.19.065(3).

## Deviation Standards

4. The court may exercise its discretion to determine the necessity for and the reasonableness of all amounts ordered in excess of the basic child support obligation. RCW 26.19.080(4).

1. Reasons for deviation from the standard calculation include but are not limited to the following:

- a. Sources of income and tax planning: The court may deviate from the standard calculation after consideration of the following:
  - i. Income of a new spouse or new domestic partner if the parent who is married to the new spouse or the parent who is in a domestic partnership with the new domestic partner is asking for a deviation based on any other reason. Income of a new spouse or domestic partner is not, by itself, a sufficient reason for deviation;
  - ii. Income of other adults in the household if the parent who is living with the other adult is asking for a deviation based on any other reason. Income of the other adults in the household is not, by itself, a sufficient reason for deviation;
  - iii. Child support actually received from other relationships;
  - iv. Gifts;
  - v. Prizes;
  - vi. Possession of wealth, including but not limited to savings, investments, real estate holdings and business interests, vehicles, boats, pensions, bank accounts, insurance plans or other assets;
  - vii. Extraordinary income of a child; or
  - viii. Tax planning considerations. A deviation for tax planning may be granted only if child(ren) would not receive a lesser economic benefit due to the tax planning;
  - ix. Income that has been excluded under RCW 26.19.071(4)(h) if the person earning that income asks for a deviation for any other reason. RCW 26.19.075(1)(a)
- b. Nonrecurring income: The court may deviate from the standard calculation based on a finding that a particular source of income included in the calculation of the basic support obligation is not a recurring source of income. Depending on the circumstances, nonrecurring income may include overtime, contract-related benefits, bonuses or income from second jobs. Deviations for nonrecurring income shall be based on a review of the nonrecurring income received in the previous two calendar years. RCW 26.19.075(1)(b).

## Limitations Standards

1. Limit at 45 percent of a parent's net income: Neither parent's child support obligation owed for all his or her biological or legal children may exceed 45 percent of net income except for good cause shown.
  - a. Each child is entitled to a pro rata share of the income available for support, but the court only applies the pro rata share to the children in the case before the court.
  - b. Before determining whether to apply the 45 percent limitation, the court must consider the best interests of the child(ren) and the circumstances of each parent. Such circumstances include, but are not limited to, leaving insufficient funds in the custodial parent's household to meet the basic needs of the child(ren), comparative hardship to the affected households, assets or liabilities, and any involuntary limits on either parent's earning capacity including incarceration, disabilities, or incapacity.
  - c. Good cause includes, but is not limited to, possession of substantial wealth, child(ren) with day care expenses, special medical need, educational need, psychological need, and larger families. RCW 26.19.065(1).
2. Presumptive minimum support obligation: When a parent's monthly net income is below 125% of the federal poverty guideline for a one-person family, a support order of not less than fifty dollars per child per month shall be entered unless the obligor parent establishes that it would be unjust to do so in that particular case. The decision whether there is a sufficient basis to go below the presumptive minimum payment must take into consideration the best interests of the child(ren) and circumstances of each parent. Such circumstances can include leaving insufficient funds in the custodial parent's household to meet the basic needs of the child(ren), comparative hardship to the affected households, assets or liabilities, and earning capacity. RCW 26.19.065(2)(a).
3. Self-support reserve: The basic support obligation of the parent making the transfer payment, excluding health care, day care, and special child-rearing expenses, shall not reduce his or her net income below the self-support reserve of 125% of the federal poverty level for a one-person family, except for the presumptive



- c. Debt and high expenses: The court may deviate from the standard calculation after consideration of the following expenses:
- Extraordinary debt not voluntarily incurred;
  - A significant disparity in the living costs of the parents due to conditions beyond their control;
  - Special needs of disabled child(ren); or
  - Special medical, educational or psychological needs of the child(ren).
  - Costs anticipated to be incurred by the parents in compliance with court-ordered reunification efforts under chapter 13.34 RCW or under a voluntary placement agreement with an agency supervising the child. RCW 26.19.075(1)(c).

- d. Residential schedule: The court may deviate from the standard calculation if the child(ren) spend(s) a significant amount of time with the parent who is obligated to make a support transfer payment. The court may not deviate on that basis if the deviation will result in insufficient funds in the household receiving the support to meet the basic needs of the child or if the child is receiving temporary assistance for needy families. When determining the amount of the deviation, the court shall consider evidence concerning the increased expenses to a parent making support transfer payments resulting from the significant amount of time spent with that parent and shall consider the decreased expenses, if any, to the party receiving the support resulting from the significant amount of time the child spends with the parent making the support transfer payment. RCW 26.19.075(1)(d).

- e. Children from other relationships: The court may deviate from the standard calculation when either or both of the parents before the court have children from other relationships to whom the parent owes a duty of support.
- The child support schedule shall be applied to the parents and children of the family before the court to determine the presumptive amount of support.
  - Children from other relationships shall not be counted in the number of children for purposes of determining the basic support obligation and the standard calculation.
  - When considering a deviation from the standard calculation for children from other relationships, the court may consider only other children to whom the parent owes a duty of support. The court may consider court-ordered payments of child support for children from other relationships only to the extent that the support is actually paid.
  - When the court has determined that either or both parents have children from other relationships, deviations under this section shall be based on consideration of the total circumstances of both households. All child support obligations paid, received, and owed for all children shall be disclosed and considered. RCW 26.19.075(1)(e).

2. All income and resources of the parties before the court, new spouses or domestic partners, and other adults in the household shall be disclosed and considered as provided. The presumptive amount of support shall be determined according to the child support schedule. Unless specific reasons for deviation are set forth in the written findings of fact and are supported by the evidence, the court shall order each parent to pay the amount of support determined by using the standard calculation. RCW 26.19.075(2).

3. The court shall enter findings that specify reasons for any deviation or any denial of a party's request for any deviation from the standard calculation made by the court. The court shall not consider reasons for deviation until the court determines the standard calculation for each parent. RCW 26.19.075(3).
4. When reasons exist for deviation, the court shall exercise discretion in considering the extent to which the factors would affect the support obligation. RCW 26.19.075(4).
5. Agreement of the parties is not by itself adequate reason for any deviations from the standard calculations. RCW 26.19.075(5).

## Benefits paid that apply toward a person's child support obligation

If an injured worker, person with disabilities, deceased person, retired person, or veteran who owes a child support obligation receives one of these benefits:

- Department of Labor and Industries payments
- Self-Insurer's payment
- Social Security Administration:
  - Social Security disability dependency benefits
  - Retirement benefits
  - Survivors insurance benefits
- Veteran's Administration benefits

and shows that the child or the child's household receives a payment from those benefits, then, the amount of the payment made on behalf of the child or on account of the child applies toward the person's child support obligation for the same period covered by the benefit.

## Post-Secondary Education Standards

1. The child support schedule shall be advisory and not mandatory for post-secondary educational support. RCW 26.19.090(1)
2. When considering whether to order support for post-secondary educational expenses, the court shall determine whether the child is in fact dependent and is relying upon the parents for the reasonable necessities of life. The court shall exercise its discretion when determining whether and for how long to award post-secondary educational support based upon consideration of factors that include but are not limited to the following: age of the child; the child's needs; the expectations of the parties for their child(ren) when the parents were together; the child(ren)'s prospects, desires, aptitudes, abilities or disabilities; the nature of the post-secondary education sought and the parent's level of education, standard of living and current and future resources. Also to be considered are the amount and type of support that the child would have been afforded if the parents had stayed together. RCW 26.19.090(2).
3. The child must enroll in an accredited academic or vocational school, must be actively pursuing a course of study commensurate with the child's vocational goals and must be in good academic standing as defined by the institution. The court-ordered post-secondary educational support shall be automatically suspended during the period or periods the child fails to comply with these conditions. RCW 26.19.090(3).



4. The child shall also make available all academic records and grades to both parents as a condition of receiving post-secondary educational support. Each parent shall have full and equal access to the post-secondary education records as provided by statute (RCW 26.09.225). RCW 26.19.090(4).
5. The court shall not order the payment of post-secondary educational expenses beyond the child's twenty-third birthday, except for exceptional circumstances, such as mental, physical, or emotional disabilities. RCW 26.19.090(5).
6. The court shall direct that either or both parents' payments for post-secondary educational expenses are made directly to the educational institution if feasible. If direct payments are not feasible, then the court in its discretion may order that either or both parents' payments are made directly to the child if the child does not reside with either parent. If the child resides with one of the parents, the court may direct that the parent making the support transfer payments make the payments to the child or to the parent who has been receiving the support transfer payments. RCW 26.19.090(6).



# WASHINGTON STATE CHILD SUPPORT SCHEDULE

## INSTRUCTIONS FOR WORKSHEETS

### Worksheets:

Immediately below the form title, check the box showing if the worksheets are proposed or an order signed by the judge. If they are proposed, check the box showing who proposed them and put your name.

Fill in your county, the case number, and the names and ages of only those children whose support is at issue.

Write your name above "(Column 1)" and write the other parent's name above "(Column 2)." In the rest of the worksheet, list your information under "Column 1" and list the other parent's information under "Column 2."

### **Part I: Income**

Pursuant to INCOME STANDARD #1: Consideration of all income, "only the income of the parents of the child(ren) whose support is at issue shall be calculated for purposes of calculating the basic support obligation." (See page 1.)

Pursuant to INCOME STANDARD #2: Verification of income, "tax returns for the preceding two years and current paystubs are required for income verification purposes. Other sufficient verification shall be required for income and deductions which do not appear on tax returns or paystubs." (See page 1.)

### **Gross Monthly Income**

Gross monthly income is defined under INCOME STANDARD #3: Income sources included in gross monthly income. (See page 1.)

Income exclusions are defined under INCOME STANDARD #4: Income sources excluded from gross monthly income. (See page 2.) Excluded income must be disclosed and listed in Part VIII of the worksheets.

Monthly Average of Income:

- If income varies during the year, divide the annual total of the income by 12.
- If paid weekly, multiply the weekly income by 52 and divide by 12.
- If paid every other week, multiply the two-week income by 26 and divide by 12.
- If paid twice a month (bi-monthly), multiply the bi-monthly income by 24 and divide by 12.

**LINE 1a, Wages and Salaries:** Enter the average monthly total of all salaries, wages, contract-related benefits, bonuses, and income from overtime and second jobs that is not excluded from income by RCW 26.19.071(4)(i).

**LINE 1b, Interest and Dividend Income:** Enter the average monthly total of dividends and interest income.

**LINE 1c, Business Income:** Enter the average monthly income from self-employment, rent, royalties, contracts, proprietorship of a business, or joint ownership of a partnership or closely held corporation.

**LINE 1d, Maintenance Received:** Enter the monthly amount of maintenance actually received.

**LINE 1e, Other Income:** Enter the average monthly total of other income. (Other income includes, but is not limited to: income tax refunds, trust income, severance pay, annuities, capital gains, pension retirement benefits, workers compensation, unemployment benefits, social security benefits and disability insurance benefits.)

**LINE 1f, Imputed Income:** Enter the imputed gross monthly income for a parent who is voluntarily unemployed, underemployed or if you do not have records of a parent's actual earnings. Refer to "INCOME STANDARD #6: Imputation of income." (See page 2.) Impute income using the first method possible based on the information you have in the following order:

Calculate full-time earnings using either:

1. Current rate of pay;
2. Historical rate of pay based on reliable information;
3. Past rate of pay, if current information is incomplete or sporadic;
4. Earnings of 32 hours per week at minimum wage where the parent lives if the parent is on TANF now or recently came off government assistance, is recently released from incarceration, or is a recent high school graduate (if currently enrolled in high school and voluntarily unemployed or underemployed, impute income at 20 hours per week at minimum wage where the parent lives); or
5. Minimum wage where the parent lives when the parent has a history of minimum wage, has never been employed, or has no significant earnings history.

Historical rate of pay information may be available from the Division of Child Support. Use form 18-701: "Request for Income Information for Purposes of Entering a Child Support Order", available online at:

<http://www.dshs.wa.gov/dcs/Resources/Forms.asp> employed, or has no significant earnings history.

If you impute income using one of the five methods, above, enter the amount in line 1f. Also, in line 26 of the Worksheets, explain which method you used to impute income and how you calculated the amount of imputed income.



If you cannot use any of the above methods, impute the parent's net monthly income using the table below, and enter the appropriate amount for the parent's age and gender **on line 1f and on line 3**. The table, below, shows net income, after deductions. So if you impute using this table, you will not enter any deductions on the worksheet under line 2. Leave lines 2a through 2i blank. For this parent, go to line 4.

Also, in line 26 of the Worksheets, explain that net income was imputed using the Approximate Median Net Monthly Income **Table**.

### Approximate Median Net Monthly Income

MALE	age	FEMALE
\$2,088	15-24	\$1,934
\$3,243	25-34	\$2,816
\$4,098	35-44	\$3,321
\$4,232	45-54	\$3,365
\$4,318	55-64	\$3,288
\$4,972	65 +	\$3,858

U.S. Census Bureau, Current Population Survey, 2018 Annual Social and Economic Supplement, Table PINC-01. Selected Characteristics of People 15 Years Old and Over by Total Money Income in 2017, Work Experience in 2017, Race, Hispanic Origin, and Sex, Worked Full Time, Year Round.

[Net income has been determined by subtracting FICA (7.65 percent) and the tax liability for a single person (one withholding allowance).]

**LINE 1g, Total Gross Monthly Income:** Add the monthly income amounts for each parent (lines 1a through 1f) and enter the totals on line 1g.

### Monthly Deductions from Gross Income

Allowable monthly deductions from gross income are defined under INCOME STANDARD #5: Determination of net income. (See page 2.)

**Monthly Average of Deductions:** If a deduction is annual or varies during the year, divide the annual total of the deduction by 12 to determine a monthly amount.

**LINE 2a, Income Taxes:** Enter the net monthly amount actually owed for state and federal income taxes. (The amount of income tax withheld on a paycheck may not be the actual amount of income tax owed due to tax refunds, deductions, etc. It is appropriate to consider tax returns from prior years as indicating the actual amount of income tax owed if income has not changed.)

**LINE 2b, FICA/Self Employment Taxes:** Enter the total monthly amount of FICA, Social Security, Medicare and Self-employment taxes owed.

**LINE 2c, State Industrial Insurance Deductions:** Enter the monthly amount of state industrial insurance deductions such as Medical Aid Fund Tax, Accident Fund Tax, and Supplement Pension Fund Tax. Self-insured employers may use different terms for the deductions.

**LINE 2d, Mandatory Union/Professional Dues:** Enter the monthly cost of mandatory union or professional dues.

**LINE 2e, Mandatory Pension Plan Payments:** Enter the monthly cost of mandatory pension plan payments amount.

**LINE 2f, Voluntary Retirement Contributions:** Enter the monthly cost of voluntary Retirement Contributions. Divide the amount of the voluntary retirement contribution, up to \$5,000 per year, by 12 to calculate the monthly cost. (For more information regarding limitations on the allowable deduction of voluntary retirement contributions, refer to INCOME STANDARD #5: Determination of net income. See page 2.)

**LINE 2g, Maintenance Paid:** Enter the monthly amount of maintenance actually paid pursuant to a court order.

**LINE 2h, Normal Business Expenses:** If self-employed, enter the amount of normal business expenses. (Pursuant to INCOME STANDARD #5: Determination of net income, "justification shall be required for any business expense deduction about which there is a disagreement." See page 2.)

**LINE 2i, Total Deductions From Gross Income:** Add the monthly deductions for each parent (lines 2a through 2h) and enter the totals on line 2i.

**LINE 3, Monthly Net Income:** For each parent, subtract total deductions (line 2i) from total gross monthly income (line 1g) and enter these amounts on line 3.

**LINE 4, Combined Monthly Net Income:** Add the parents' monthly net incomes (line 3) and enter the total on line 4.

**LINE 5, Basic Child Support Obligation:** In the work area provided on line 5, enter the basic support obligation amount determined for each child. Add these amounts together and enter the total in the box on line 5. (To determine a per child basic support obligation, see the following economic table instructions.)

### Economic Table Instructions

To use the Economic Table to determine an individual support amount for each child:

- Locate in the left-hand column the combined monthly net income amount closest to the amount entered on line 4 of Worksheet (round up when the combined monthly net income falls halfway between the two amounts in the left-hand column);



- **Locate on the top row the family size for the number of children for whom child support is being determined** (when determining family size for the required worksheets, do not include child(ren) from other relationships) and **circle the number in the column below the family size that is across from the net income**. The amount circled is the basic support amount for each child.

**LINE 6, Proportional Share of Income:** Divide the monthly net income for each parent (line 3) by the combined monthly net income (line 4) and enter these amounts on line 6. (The entries on line 6 when added together should equal 1.00.)

## **Part II: Basic Child Support Obligation**

**LINE 7, Each Parent's Basic Child Support Obligation without consideration of low income limitations:** Multiply the total basic child support obligation (amount in box on line 5) by the income share proportion for each parent (line 6) and enter these amounts on line 7. (The amounts entered on line 7 added together should equal the amount entered on line 5.)

**LINE 8, Calculating low income limitations:** Fill in only those that apply:

To calculate the low-income limitation standards in lines 8b and 8c, you will need to know the self-support reserve amount, which is 125% of the current federal poverty guideline for a one-person family. As of January 15, 2020, the self-support reserve is \$1,329. The guideline and self-support reserve change roughly annually. To check the current self-support reserve amount go to the courts' web site at: [www.courts.wa.gov](http://www.courts.wa.gov), or go to [www.WashingtonLawHelp.org](http://www.WashingtonLawHelp.org). Enter the self-support reserve amount in the space provided in line 8. (For more information, see Limitation Standard #2 on page 3 of the Definitions and Standards.)

**8a. Is combined net income less than \$1,000?** If combined net monthly income on line 4 is less than \$1,000, enter each parent's presumptive support obligation of \$50 per child. Do not enter an amount on line 8a if combined income on line 4 is more than \$1,000.

**8b. Is monthly net income less than self-support reserve?** For each parent whose monthly net income on line 3 is less than the self-support reserve, enter the parent's presumptive support obligation of \$50 per child. Do not use this box for a parent whose net income on line 3 is greater than the self-support reserve.

**8c. Is monthly net income equal to or more than self-support reserve?** Subtract the self-support reserve from line 3 and enter this amount or enter \$50 per child whichever is greater. Do not use this box if the amount is greater than the amount in line 7.

**LINE 9, Each parent's basic child support obligation after calculating applicable limitations:** For each parent, enter the lowest amount from line 7, 8a – 8c, but not less than the presumptive \$50 per child.

## **Part III: Health Care, Day Care, and Special Child Rearing Expenses**

Pursuant to ALLOCATION STANDARD #4: "the court may exercise its discretion to determine the necessity for and the reasonableness of all amounts ordered in excess of the basic child support obligation." (See page 2.)

Pursuant to ALLOCATION STANDARD #2: Health care expenses and #3: Day care and special child rearing expenses, health care, day care, and special child rearing expenses shall be shared by the parents in the same proportion as the basic support obligation. (See page 2.) NOTE: The court order should reflect that health care, day care and special child rearing expenses not listed should be apportioned by the same percentage as the basic child support obligation.

Monthly Average of Expenses: If a health care, day care, or special child rearing expense is annual or varies during the year, divide the annual total of the expense by 12 to determine a monthly amount.

## **Health Care Expenses**

**LINE 10a, Monthly Health Insurance Premiums Paid For Child(ren):** List the monthly amount paid by each parent for health care insurance for the child(ren) of the relationship. (When determining an insurance premium amount, do not include the portion of the premium paid by an employer or other third party and/or the portion of the premium that covers the parent or other household members.)

**LINE 10b, Uninsured Monthly Health Care Expenses Paid For Child(ren):** List the monthly amount paid by each parent for the child(ren)'s health care expenses not reimbursed by insurance.

**LINE 10c, Total Monthly Health Care Expenses:** For each parent add the health insurance premium payments (line 10a) to the uninsured health care payments (line 10b) and enter these amounts on line 10c.

**LINE 10d, Combined Monthly Health Care Expenses:** Add the parents' total health care payments (line 10c) and enter this amount on line 10d.



## Day Care and Special Expenses

**LINE 11a, Day Care Expenses:** Enter average monthly day care costs.

**LINE 11b, Education Expenses:** Enter the average monthly costs of tuition and other related educational expenses.

**LINE 11c, Long Distance Transportation Expenses:** Enter the average monthly costs of long distance travel incurred pursuant to the residential or visitation schedule.


**LINE 11d, Other Special Expenses:** Identify any other special expenses and enter the average monthly cost of each.

**LINE 11e, Total Day Care and Special Expenses:** Add the monthly expenses for each parent (lines 11a through 11d) and enter these totals on line 11e.

**LINE 12, Combined Monthly Total of Day Care and Special Expenses:** Add the parents' total expenses (line 11e) and enter this total on line 12.

**LINE 13, Total Health Care, Day Care and Special Expenses:** Add the health care expenses (line 10d) to the combined monthly total of day care and special expenses (line 12) and enter this amount on line 13.

**LINE 14, Each Parent's Obligation For Health Care, Day Care And Special Expenses:** Multiply the total health care, day care, and special expense amount (line 13) by the income proportion for each parent (line 6) and enter these amounts on line 14.

 **LINE 15, Gross Child Support Obligation:** For each parent, add the basic child support obligation (line 9) to the obligation for extraordinary health care, day care and special expenses (line 14). Enter these amounts on line 15.

## Part V: Child Support Credits

Child support credits are provided in cases where parents make direct payments to third parties for the cost of goods and services which are included in the standard calculation support obligation (e.g., payments to an insurance company or a day care provider).

**LINE 16a, Monthly Health Care Expenses Credit:** Enter the total monthly health care expenses amounts from line 10c for each parent.

**LINE 16b, Day Care And Special Expenses Credit:** Enter the total day care and special expenses amounts from line 11e for each parent.

**LINE 16c, Other Ordinary Expense Credit:** If approval of another ordinary expense credit is being requested, in the space provided, specify the expense and enter the average monthly cost in the column of the parent to receive the credit. (It is generally assumed that ordinary expenses are paid in accordance with the child(ren)'s residence. If payment of a specific ordinary expense does not follow this assumption, the parent paying for this expense may request approval of an ordinary expense credit. This credit is discretionary with the court.)

**LINE 16d, Total Support Credits:** For each parent, add the entries on lines 16 a through c and enter the totals on line 16d.

## Part VI: Standard Calculation/Presumptive Transfer Payment

**LINE 17, For Each Parent:** subtract the total support credits (line 16d) from the gross child support obligation (line 15) and enter the resulting amounts on line 17. If the amount is less than \$50 per child for either parent, then enter the presumptive minimum support obligation of \$50 per child, instead of the lower amount.

## Part VII: Additional Informational Calculations

**LINE 18, 45% of Each Parent's Net Income From Line 3:** For each parent, multiply line 3 by .45. Refer to LIMITATIONS Standards #1: Limit at 45% of a parent's net income.

**LINE 19, 25% of Each Parent's Basic Support Obligation from Line 9:** For each parent, multiply line 9 by .25.

## Part VIII: Additional Factors for Consideration

Pursuant to INCOME STANDARD #1: Consideration of all income: "all income and resources of each parent's household shall be disclosed and considered by the court when the court determines the child support obligation of each parent." (See page 1.)

**LINE 20 a-h, Household Assets:** Enter the estimated present value of assets of the household.

**LINE 21, Household Debt:** Describe and enter the amount of liens against assets owned by the household and/or any extraordinary debt.



## Other Household Income

**LINE 22a, Income of Current Spouse or Domestic Partner:** If a parent is currently married to or in a domestic partnership with someone other than the parent of the child(ren) for whom support is being determined, list the name and enter the income of the present spouse or domestic partner.

**LINE 22b, Income of Other Adults In The Household:** List the names and enter the incomes of other adults residing in the household.

**LINE 22c, Gross income from overtime or from second jobs the party is asking the court to exclude per INCOME STANDARD #4:** Income sources excluded from gross monthly income (see page 2).

**LINE 22d, Income of Children:** If the amount is considered to be extraordinary, list the name and enter the income of children residing in the home.

**LINE 22e, Income from Child Support:** List the name of the child(ren) for whom support is received and enter the amount of the support income. Do not include the child(ren) for whom support is being determined.

**LINE 22f, Income from Assistance Programs:** List the program and enter the amount of any income received from assistance programs. (Assistance programs include, but are not limited to: temporary assistance for needy families, SSI, general assistance, food stamps and aid and attendance allowances.)

**LINE 22g, Other Income:** Describe and enter the amount of any other income of the household. (Include income from gifts and prizes on this line.)

**LINE 23, Nonrecurring Income:** Describe and enter the amount of any income included in the calculation of gross income (LINE 1g) which is nonrecurring. (Pursuant to DEVIATION STANDARD #1b: Nonrecurring income, “depending on the circumstances, nonrecurring income may include overtime, contract-related benefits, bonuses or income from second jobs.” See page 3.)

**LINE 24, Monthly Child Support Ordered for Other Children:** List the names and ages and enter the amount of child support owed for other children, (not the children for whom support is being determined). Is the support paid? Check ☐ Yes or ☐ No.

**LINE 25, Other Child(ren) Living in Each Household:** List the names and ages of children, other than those for whom support is being determined, who are living in each household.

**LINE 26, Other Factors For Consideration:** In the space provided list any other factors that should be considered in determining the child support obligation. (For information regarding other factors for consideration, refer to DEVIATION STANDARDS. See page 3.) Also use this space to explain how you calculated the income and deductions in lines 1 and 2.

Nonparental Custody Cases: When the children do not reside with either parent, the household income and resources of the children’s custodian(s) should be listed on line 26.



# Washington State Child Support Schedule Economic Table

## Monthly Basic Support Obligation

### Per Child

Combined Monthly Net Income	One Child Family	Two Children Family	Three Children Family	Four Children Family	Five Children Family
For income less than \$1,000, the obligation is based upon the resources and living expenses of each household. Minimum support shall not be less than \$50 per child per month except when allowed by RCW 26.19.065(2)					
1000	216	167	136	114	100
1100	238	184	150	125	110
1200	260	200	163	137	120
1300	281	217	177	148	130
1400	303	234	191	160	141
1500	325	251	204	171	151
1600	346	267	218	182	161
1700	368	284	231	194	171
1800	390	301	245	205	180
1900	412	317	258	216	190
2000	433	334	271	227	200
2100	455	350	285	239	210
2200	477	367	298	250	220
2300	499	384	311	261	230
2400	521	400	325	272	239
2500	543	417	338	283	249
2600	565	433	351	294	259
2700	587	450	365	305	269
2800	609	467	378	317	279
2900	630	483	391	328	288
3000	652	500	405	339	298
3100	674	516	418	350	308
3200	696	533	431	361	318
3300	718	550	444	372	328
3400	740	566	458	384	337
3500	762	583	471	395	347
3600	784	599	484	406	357
3700	803	614	496	416	366
3800	816	624	503	422	371
3900	830	634	511	428	377
4000	843	643	518	434	382
4100	857	653	526	440	388
4200	867	660	531	445	392
4300	877	668	537	450	396
4400	887	675	543	455	400
4500	896	682	548	459	404
4600	906	689	554	464	408
4700	916	697	559	469	412
4800	927	705	566	474	417
4900	939	714	573	480	422
5000	951	723	580	486	428



5100	963	732	587	492	433
5200	975	741	594	498	438
5300	987	750	602	504	443
5400	999	759	609	510	449
5500	1011	768	616	516	454
5600	1023	777	623	522	459
5700	1030	782	627	525	462
5800	1036	786	630	528	465
5900	1042	791	634	531	467
6000	1048	795	637	534	470
6100	1054	800	641	537	472
6200	1061	804	644	540	475
6300	1067	809	648	543	477
6400	1073	813	651	545	480
6500	1081	819	656	549	483
6600	1096	830	665	557	490
6700	1111	842	674	564	497
6800	1126	853	683	572	503
6900	1141	864	692	579	510
7000	1156	875	701	587	516
7100	1170	886	710	594	523
7200	1185	898	719	602	530
7300	1200	909	727	609	536
7400	1212	918	734	615	541
7500	1222	925	740	620	545
7600	1231	932	745	624	549
7700	1241	939	751	629	554
7800	1251	946	756	634	558
7900	1261	953	762	638	562
8000	1270	960	767	643	566
8100	1280	968	773	647	570
8200	1290	975	778	652	574
8300	1299	981	783	656	577
8400	1308	987	788	660	581
8500	1316	994	793	664	584
8600	1325	1000	797	668	588
8700	1334	1007	802	672	591
8800	1343	1013	807	676	595
8900	1352	1019	812	680	599
9000	1361	1026	817	684	602
9100	1370	1032	822	689	606
9200	1379	1040	828	694	611
9300	1387	1047	835	699	616
9400	1396	1055	841	705	620
9500	1405	1062	848	710	625
9600	1414	1069	854	716	630
9700	1423	1077	861	721	635
9800	1432	1084	867	727	639
9900	1441	1092	874	732	644
10000	1451	1099	879	737	648
10100	1462	1107	885	741	652



10200	1473	1114	890	745	656
10300	1484	1122	895	750	660
10400	1495	1129	900	754	664
10500	1507	1136	906	759	668
10600	1518	1144	911	763	672
10700	1529	1151	916	767	675
10800	1539	1159	921	772	679
10900	1542	1161	924	774	681
11000	1545	1164	926	776	683
11100	1548	1166	928	778	684
11200	1551	1169	931	780	686
11300	1554	1172	933	782	688
11400	1556	1174	936	784	690
11500	1559	1177	938	786	692
11600	1562	1179	940	788	693
11700	1565	1182	943	790	695
11800	1568	1184	945	792	697
11900	1571	1187	948	794	699
12000	1573	1190	950	796	700

The economic table is presumptive for combined monthly net incomes up to and including twelve thousand dollars. When combined monthly net income exceeds twelve thousand dollars, the court may exceed the maximum presumptive amount of support upon written findings of fact.