

ATTENTION

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

FILING A CIVIL CASE IS \$207.00 CASH W/OUT SERVICE AND IF YOU HAVE TO SERVE THE OTHER PARTY IT IS \$257.00 IF YOU HAVE TO RUN A PUBLICATION IN THE NEWS PAPER THAT IS AN ADDITIONAL COST THAT MUST BE PAID TO THE ROME NEWS TRIBUNE AND YOU MUST DISCUSS THE PUBLICATION FEE WITH THEM

BARBARA PENSON
CLERK OF COURT

Superior Court - Pro Se Divorce

Pro Se, (prō-say) - appearing for oneself instead of retaining a lawyer

Divorce can be a very complicated process. You have full responsibility for complying with all procedural and substantive requirements of the law. **If all documents are not completed, signed, notarized, and filed as required by law, the divorce pleadings are not in compliance with the law, a judge cannot grant your request for divorce and may dismiss your case.** You are responsible for scheduling with the Court any hearings related to your divorce proceeding. The Court cannot act as your attorney, nor can the Court help you prove or defend your case. This action involves important legal rights, and the Rome Judicial Circuit **urges you to hire an attorney.** An attorney will be familiar not only with the law, but will also be familiar with the procedures of this Court. **Due to the changing nature of the law and the factual differences in each person's situation, these forms may or may not be appropriate in your particular case. The information on the website may also become outdated. USE THE FORMS AT YOUR OWN RISK.** The information provided below may or may not be useful in understanding the different aspects of appearing in Court, including the paperwork and/or forms necessary. **IF YOU AGREE TO ALL TERMS ABOVE and still wish to proceed without an attorney, please click the appropriate link below and follow the instructions.**

[Divorce WITHOUT Minor Children](#)

[Divorce WITH Minor Children](#)

STATE LAW OCGA § 15-19-51 PROHIBITS COURT PERSONNEL (INCLUDING STAFF ATTORNEYS OR LAW CLERKS, CALENDAR CLERKS, CLERK'S OFFICE STAFF, AND SHERIFF'S DEPARTMENT STAFF) FROM GIVING LEGAL ADVICE OR ANSWERING LEGAL QUESTIONS.

YOU MAY NEED AN ATTORNEY IF

The case is contested and your spouse has a lawyer.

You cannot locate your spouse to serve him or her with your papers.

You or your spouse has a house pension or large amount of property or income

You might lose custody of your children

You think you will have difficulty getting documents from your spouse about retirement funds income etc

Even if it is a friendly divorce you should talk to a lawyer before you sign any settlement paper or file anything in court

Contact

Barbara Penson

3 Government Plaza

Pome GA 30161

P 706 291 5190

pensonb@floydcountyga.org

Citizen Survey

Do you find our new website easier to use than our previous site?

Yes

No

Next

Domestic Relations Case Filing Information Form

Superior Court County _____ Date Filed _____
MM DD YYYY

Docket # _____

Plaintiff(s)

Defendant(s)

Last First Middle Initial Suffix Prefix Maiden

Last First Middle Initial Suffix Prefix Maiden

Last First Middle Initial Suffix Prefix Maiden

Last First Middle Initial Suffix Prefix Maiden

Plaintiff/Petitioner's Attorney Pro Se

Last First Middle Initial Suffix

Bar # _____

Check Case Type (one or more)

- Divorce (includes annulment)
- Separate Maintenance
- Adoption
- Paternity (includes legitimation)
- Interstate Support Enforcement Action
- Domestication of Foreign Custody Decree
- Family Violence Act Petition

MODIFICATION

- Modification Custody and or Visitation
- Modification Child Support and Alimony
- Modification Child Support
- Modification Alimony

CONTEMPT

- Contempt Custody and or Visitation
- Contempt Child Support and Alimony
- Contempt Child Support
- Contempt Alimony
- Other Domestic Contempt

Other Domestic Relations Specify _____

FAMILY VIOLENCE

Additional Information Ex Parte Relief

Did the initial pleading include a request for relief

- 1 From alleged family violence? Yes No
- 2 Was ex parte relief requested? Yes No
- 3 Was ex parte relief granted? Yes No

**IN THE SUPERIOR COURT OF FLOYD COUNTY
STATE OF GEORGIA
FAMILY DIVISION**

Petitioner _____
and
Respondent _____

Civil Action File No _____

PETITION FOR DIVORCE

I _____ representing myself state that

1 **Subject Matter Jurisdiction** I am the Petitioner in this action and *(Check (a) or (b))*

- a) I have been a resident of the State of Georgia for more than six (6) months prior to filing this action
- b) I am not a resident of the State of Georgia but my spouse has been a resident of the State of Georgia and a resident of _____ County for at least six (6) months prior to my filing of this action

2 **Venue** My spouse s name is _____ He/She is the Respondent in this action *(Check (a) (b) (c) or (d))*

- a) The Respondent is a resident of _____ County and is subject to the jurisdiction of this Court *(Check (1) (2) (3) or (4))*
 - 1) The Respondent has consented to the Jurisdiction of this Court and has acknowledged service of process and jurisdiction of this Court *(Check the box below if you and your spouse have a separation agreement that you want to have made a part of your divorce decree)*
 - Attached to this Complaint for Divorce is a Separation Agreement which my spouse and I desire to be incorporated into our final judgment and decree for divorce
- 2) The Respondent may be served at Respondent s residence address of _____
- 3) The Respondent may be served at Respondent s work address of _____
- The Respondent works in _____ County and shall be served by second original
- 4) The Respondent s whereabouts are unknown to me as shown by my Affidavit of Due Diligence attached hereto and incorporated by reference marked Exhibit

A The Respondent shall be served by publication as is provided by law in the case of those who cannot be found within the State pursuant to O C G A 9 11 4(e)(1) The clerk shall mail a copy of the Notice Order for Service by Publication Petition for Divorce to the last known address of Respondent which is _____ within 15 days of filing of the Order of Service by Publication

b) The Respondent is a resident of _____ County but Respondent and I lived together in _____ County at the time we separated Respondent has only moved from _____ County within the past six months from the date of this filing and I am a resident of _____ County The Respondent shall be served by second original at his/her home/work address of _____

c) The Respondent is a resident of _____ County and I live in _____ County The Respondent has consented to the jurisdiction of this Court and has acknowledged service of process and venue of this Court (Check the box below if you and your spouse have a separation agreement that you want to have made a part of your divorce decree)

Attached to this Complaint for Divorce is a Separation Agreement which my spouse and I desire to be incorporated into our final judgment and decree for divorce

d) The Respondent is not a resident of the State of Georgia but I am resident of _____ County and (Check (1) (2) (3) or (4))

1) The Respondent was formerly a resident of the State of Georgia and presently is a resident of the State of _____ Respondent may be served by second original pursuant to the Long Arm Statute O C G A 9 10 91(5) Respondent may be served at Respondent s residence address of _____

2) The Respondent has never resided in the State of Georgia and currently resides in the State of _____ as shown by my Affidavit of Nonresident attached hereto and incorporated by reference marked Exhibit B The Respondent shall be served by publication as is provided by law in the case of those who cannot be found within the State pursuant to O C G A 9 11 4(e)(1) The clerk shall mail a copy of the Notice Order for Service by Publication and Petition for Divorce to the address of the Respondent which is _____ within 15 days of the filing of the Order for Service by Publication

3) The Respondent s whereabouts are unknown to me as shown by my Affidavit of Due Diligence attached hereto and incorporated by reference marked Exhibit A The Respondent shall be served by publication as is provided by law in the case of those who cannot be found within the State pursuant to O C G A 9 11 4(e)(1) The clerk shall mail a copy of the Notice Order for Service by Publication and Petition for Divorce to the last known address of Respondent which _____ within 15 days of the filing of the Order for Service by Publication

4) The Respondent has consented to the Jurisdiction of this Court and has acknowledged service of process and jurisdiction of this Court (Check the box below if you and your spouse have a separation agreement that you want to have made a part of your divorce decree)

Attached to this Complaint for Divorce is a Separation Agreement which my spouse and I desire to be incorporated into our final judgment and decree for divorce

e) I am a resident of _____ County and the Respondent's whereabouts are unknown to me as shown by my Affidavit of Due Diligence attached hereto and incorporated by reference marked Exhibit A. The Respondent shall be served by publication as is provided by law in the case of those who cannot be found within the State pursuant to O.C.G.A. § 9-11-4(e)(1). The clerk shall mail a copy of the Notice Order for Service by Publication and Petition for Divorce to the last known address of Respondent which is _____ within 15 days of the filing of the Order of Service by Publication

3 **Date of Marriage** (Check (a) or (b))

a) The Respondent and I were lawfully married on _____

b) The Respondent and I are common law married having entered into a common law marriage before January 1, 1997 as of _____

4 **Date of Separation** Respondent and I separated on _____ and have remained in a bona fide state of separation since that date

5 **Children** (Check (a) or (b))

a) There are no minor children of this marriage

b) Respondent and I are the parents of _____ minor children

<u>Name of child</u>	<u>Sex (m/f)</u>	<u>Date of Birth</u>	<u>Resides with mother/father/other</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

6 **Custody/Visitation** (If there are minor children check (a) (b) or (c))

a) I am entitled to the temporary and permanent sole legal and physical custody of these children

b) I am entitled to joint legal and physical custody of these children

c) I am entitled to reasonable visitation with these children

7 **Children's Place of Residence** (If there are minor children please complete)

The minor children of the parties currently reside at _____ with _____ During the past five years the minor children have lived at the addresses below with the following persons

<u>Address</u>	<u>Resided with</u>
_____	_____
_____	_____
_____	_____

8 **Other Custody Actions** (If there are minor children check (a) or (b))

a) I have not participated as a party or witness or in any capacity in any other litigation concerning the custody of the minor children in this or any other state I do not know of any custody proceeding concerning the minor children which may be pending in a Court in this or any other state

b) The minor children have been involved in the following custody actions

<u>County/State/Court</u>	<u>Type of custody action</u>	<u>Date Filed</u>	<u>Status</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9 **Other Persons with Claims to Children** (If there are minor children check (a) or (b))

a) I know of no other person not a party to this proceeding who has physical custody of the children or claims to have custody or visitation rights with respect to the minor children

b) The following persons who are not a party to this proceeding have custody or visitation rights with the minor children

<u>Name</u>	<u>Claim</u>
_____	_____
_____	_____

10 **Child Support/Alimony** (Complete if there are minor children and/or you are seeking alimony)

a) I am employed by _____ earning _____ per month The Respondent is an able bodied person capable of earning sufficient money to support (the minor children/ the minor children and me/ me) Respondent is employed by _____ earning _____ per month and I am in need of financial assistance from the Respondent for the support of (Check one)
 The minor children The minor children and me Me

b) The issues of child support and alimony cannot be decided in this action because Georgia does not have personal jurisdiction over my spouse

11 **Health Insurance for Minor Children** (Complete if there are minor children (Check (a) (b) or (c))

a) Respondent should be ordered to maintain a policy for dental medical and hospitalization insurance for the minor children Respondent should also be responsible for any other expenses for the children s medical or dental treatment if such expenses are not covered by insurance policies

b) Respondent and I should share the costs of dental medical and hospitalization insurance for the minor children

c) The issue of health insurance for the children cannot be decided in this action because Georgia does not have jurisdiction over my spouse

12 **Life Insurance for the Minor Children** (Check if there are minor children and you want your spouse to have life insurance for the minor children Check (a) or (b))

a) Respondent should be ordered to maintain life insurance for the benefit of the minor children

b) The issue of obtaining life insurance cannot be decided in this action because Georgia does not have personal jurisdiction over my spouse

13 **Alimony** I am/am not seeking alimony because _____

The issue of alimony cannot be decided in this action because Georgia does not have personal jurisdiction over my spouse

14 **Marital Property** (Check (a) (b) or (c))

a) Respondent and I have no marital property

b) Respondent and I have already divided our marital property to our mutual satisfaction

c) Respondent and I have the following marital property that I have checked and I am seeking an equitable division of this property

House located at _____

Pension (mine _____ spouse s _____)

Motor vehicles (model/year _____)

Furniture (list or attach list _____)

Bank accounts and investments (list or attach list _____)

Other (list or attach list _____)

d) The issue of the division of marital property cannot be decided in this action because Georgia does not have personal jurisdiction over my spouse

15 **Joint Debts** Check (a) or (b)

a) Respondent and I have no outstanding joint debts

b) Respondent and I have the following outstanding joint debts and he/she should be (solely liable for payment of these debts/ jointly liable for payment of these debts/responsible for payment of the debts that I checked)

Creditor

Balance

c) The issue of the division of joint debts cannot be decided in this action because Georgia does not have personal jurisdiction over my spouse

16 **Restore Former Name** My former name is _____ and I request that it be restored to me

- 17 **Grounds for Divorce** My grounds for an absolute divorce are *(Check the grounds that you can prove at trial)*
- a) The marriage is **irretrievably broken** My Spouse and I can no longer live together There is no hope of that the two of us will get back together
- b) **Cruel treatment** My spouse committed the following acts of cruel treatment to me such that I am afraid that he/she will hurt me in the future

- c) **Adultery** My spouse has had sexual intercourse outside of the marriage
- d) **Desertion** On or about _____ my spouse without just cause or reason intentionally abandoned and deserted me for a period of at least one year as follows _____

- e) **Intermarriage** My spouse and I are related as follows

- f) **Mental incapacity** I did not have the mental capacity to enter into a marriage when we married because _____
- g) **Impotency** My spouse was impotent at the time of our marriage and I was not aware of this
- h) **Force menace duress fraud in obtaining the marriage** I entered into this marriage against my will as a result of _____
- i) **Pregnancy** of the wife at the time of the marriage unknown to the husband I did not know that my spouse was pregnant by another man when we got married
- j) **Conviction** of party for an offense involving **moral turpitude** On or about _____ my spouse was sentenced to serve at least two years in the penitentiary for the following _____

- k) **Habitual intoxication** My spouse is repeatedly intoxicated
- l) **Incurable mental illness** My spouse has been adjudged mentally ill by a court of competent jurisdiction My spouse has been confined in an institution for the mentally ill for a period of at least two years immediately preceding this action My spouse's mental illness has been determined to be incurable by competent examiners and I have attached a certified statement that it is this person's opinion that my spouse is hopelessly and incurably mentally ill
- m) **Habitual Drug Addiction** My spouse is addicted to drugs as follows _____

FOR THESE REASONS I request *(check all that apply)*

- a) That a Rule Nisi be issued directing the Respondent to show cause why my prayers should not be granted

- b) Temporary and Permanent Custody of the minor children
- c) Joint custody of the minor children
- d) Visitation with the minor children
- e) Child Support
- f) Medical Dental and Hospitalization insurance for the children
- g) Life Insurance for the benefit of the minor children
- h) Alimony
- i) An award of the marital property listed in paragraph (14c)
- j) Respondent to pay the joint debts listed in paragraph (15b)
- k) That all issues of child support health insurance for the minor children life insurance for the minor children alimony division of property and debts be held in abeyance until such time as this court has personal jurisdiction over my spouse
- l) A change back to my former name
- m) A restraining order to restrain and enjoin the Respondent from harassing molesting or threatening me in any way whatsoever
- n) A total divorce a vinculo matrimonii from Respondent
- o) Respondent be served with a copy of my Complaint for Divorce
- p) That the Separation Agreement attached to this petition be made the Order of this Court and
- q) Any other appropriate relief

This the _____ day of _____ 2_____
 [Date] [Month] [Year]

Respectfully submitted

 (Sign your name here) PRO SE
 Petitioner s name (print or type) _____
 Petitioner s address _____
 Petitioner s telephone number _____

IN THE SUPERIOR COURT OF FLOYD COUNTY
STATE OF GEORGIA

Petitioner _____

and

Civil Action File
No _____

Respondent _____

VERIFICATION

I _____ personally appeared before the undersigned Notary Public and say under oath that I am the Petitioner in the above styled action and that the facts stated in the Petition for Divorce are true and correct

This the _____ day of _____ 20_____

(Sign your name here in front of the Notary)
Name (print or type) _____
Address _____

Telephone number _____

Sworn to and subscribed before me this
_____ day of _____ 20_____

NOTARY PUBLIC
My Commission Expires
(Notary Seal)

IN THE SUPERIOR COURT OF FLOYD COUNTY
STATE OF GEORGIA

Petitioner _____

and

Respondent _____

Civil Action File
No _____

ACKNOWLEDGMENT OF SERVICE

The undersigned Respondent hereby acknowledges service of the above Petition for _____ and states that (s)he has received a copy of said Petition and Respondent hereby waives any and all further notice service and issuance of process

This the _____ day of _____ 20_____

Respondent's Signature (Sign in front of the Notary)

Respondent's Name (Print)

Address

Telephone number

Sworn and subscribed before me this
_____ day of _____ 20_____

NOTARY PUBLIC
My commission expires

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

Plaintiff

vs

Civil Action File No _____

Defendant

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

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

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

This _____ day of _____ 20____

Affiant

Notary Public

Sworn to and subscribed before me this _____ day of _____ 20____

In the Superior Court of Floyd County Georgia

_____)	
Petitioner)	
)	
vs)	Civil Action No _____
)	
_____)	
Respondent)	

DOMESTIC RELATIONS FINANCIAL AFFIDAVIT

1 AFFIANT S NAME _____ Age _____

Spouse s Name _____ Age _____

Date of Marriage _____ Date of Separation _____

Names and birth dates of children for whom support is to be determined in this action

Name	Date of Birth	Resides with
------	---------------	--------------

Names and birth dates of affiant s other children

Name	Date of Birth	Resides with
------	---------------	--------------

2 SUMMARY OF AFFIANT S INCOME AND NEEDS

(a) Gross monthly income (from item 3A) \$ _____

(b) Net monthly income (from item 3C) _____

(c) Average monthly expenses (item 5A) \$ _____

Monthly payments to creditors + _____

Total monthly expenses and payments to creditors (item 5C) _____

3 A AFFIANT S GROSS MONTHLY INCOME (complete this section or attach Child Support Schedule A)
(All income must be entered based on monthly average regardless of date of receipt)

Salary or Wages \$ _____
ATTACH COPIES OF 2 MOST RECENT WAGE STATEMENTS

Commissions Fees Tips \$ _____

Income from self employment partnership close corporations
and independent contracts (gross receipts minus ordinary
and necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Rental Income (gross receipts minus ordinary and
necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Bonuses \$ _____

Overtime Payments \$ _____

Severance Pay \$ _____

Recurring Income from Pensions or Retirement Plans \$ _____

Interest and Dividends \$ _____

Trust Income \$ _____

Income from Annuities \$ _____

Capital Gains \$ _____

Social Security Disability or Retirement Benefits \$ _____

Workers Compensation Benefits \$ _____

Unemployment Benefits \$ _____

Judgments from Personal Injury or Other Civil Cases \$ _____

Gifts (cash or other gifts that can be converted to cash) \$ _____

Prizes/Lottery Winnings \$ _____

Alimony and maintenance from persons not in this case \$ _____

Assets which are used for support of family \$ _____

Fringe Benefits (if significantly reduce living expenses) \$ _____

Any other income (do NOT include means tested
Public assistance such as TANF or food stamps) \$ _____

GROSS MONTHLY INCOME \$ _____

B Affiant's Net Monthly Income from employment
(deducting only state and federal taxes and FICA) \$ _____

Affiant's pay period (i.e. weekly, monthly, etc.) _____

Number of exemptions claimed _____

4 ASSETS

(If you claim or agree that all or part of an asset is non-marital, indicate the non-marital portion under the appropriate spouse's column and state the amount and the basis: pre-marital, gift, inheritance, source of funds, etc.)

Description	Value	Separate Asset of the Husband	Separate Asset of the Wife	Basis of the Claim
Cash	\$ _____	_____	_____	_____
Stocks/bonds	\$ _____	_____	_____	_____
CD's/Money Market Accounts	\$ _____	_____	_____	_____
Bank Accounts (list each account)				
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
Retirement/Pensions 401K, IRA, or Profit Sharing	\$ _____	_____	_____	_____
Money owed you	\$ _____	_____	_____	_____
Tax Refund owed you	\$ _____	_____	_____	_____
Real Estate				
home	\$ _____	_____	_____	_____
debt owed	\$ _____	_____	_____	_____
other	\$ _____	_____	_____	_____
debt owed	\$ _____	_____	_____	_____
Automobiles/Vehicles				
Vehicle 1	\$ _____	_____	_____	_____
debt owed	\$ _____	_____	_____	_____

Vehicle 2	\$ _____	_____	_____	_____
debt owed	\$ _____			
Life Insurance (net cash value)	\$ _____	_____	_____	_____
Furniture/furnishings	\$ _____	_____	_____	_____
Jewelry	\$ _____	_____	_____	_____
Collectibles	\$ _____	_____	_____	_____
Other Assets	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
Total Assets	\$ _____	_____	_____	_____

5 A AVERAGE MONTHLY EXPENSES

HOUSEHOLD

Mortgage or rent payments	\$ _____	Cable TV	\$ _____
Property taxes	\$ _____	Misc household and grocery Items	\$ _____
Homeowner/Renter Insurance	\$ _____	Meals outside the home	\$ _____
Electricity	\$ _____	Other	\$ _____
Water	\$ _____	AUTOMOBILE	
Garbage and Sewer	\$ _____	Gasoline and oil	\$ _____
Telephone		Repairs	\$ _____
residential line	\$ _____	Auto tags and license	\$ _____
cellular telephone	\$ _____	Insurance	\$ _____
Gas	\$ _____	OTHER VEHICLES (boats trailers RVs etc)	
Repairs and maintenance	\$ _____	Gasoline and oil	\$ _____
Lawn Care	\$ _____	Repairs	\$ _____
Pest Control	\$ _____	Tags and license	\$ _____
		Insurance	\$ _____

CHILDREN S EXPENSES

Child care (total monthly cost) \$ _____

School tuition \$ _____

Tutoring \$ _____

Private lessons (e g music dance) \$ _____

School supplies/expenses \$ _____

Lunch Money \$ _____

Other Educational Expenses (list)

_____ \$ _____

_____ \$ _____

Allowance \$ _____

Clothing \$ _____

Diapers \$ _____

Medical dental prescription
(out of pocket/uncovered expenses) \$ _____

Grooming hygiene \$ _____

Gifts from children to others \$ _____

Entertainment \$ _____

Activities (including extra curricular
school religious cultural etc) \$ _____

Summer Camps \$ _____

OTHER INSURANCE

Health \$ _____

Child(ren) s portion

Dental \$ _____

Child(ren) s portion

Vision \$ _____

Child(ren) s portion

Life \$ _____

Relationship of Beneficiary

Disability \$ _____

Other(specify) \$ _____

AFFIANT S OTHER EXPENSES

Dry cleaning/laundry \$ _____

Clothing \$ _____

Medical dental prescription
(out of pocket/uncovered expenses) \$ _____

Affiant s gifts (special holidays) \$ _____

Entertainment \$ _____

Recreational Expenses (e g
fitness) \$ _____

Vacations \$ _____

Travel Expenses for Visitation \$ _____

Publications \$ _____

Dues clubs \$ _____

Religious and charities \$ _____

Pet expenses \$ _____

Alimony paid to former spouse \$ _____

Child support paid for other
children \$ _____

Date of initial order _____

Other (attach sheet) \$ _____

TOTAL ABOVE EXPENSES \$ _____

B PAYMENTS TO CREDITORS

(please check one)

To Whom	Balance Due	Monthly Payment	Joint	Plaintiff	Defendant

TOTAL MONTHLY PAYMENTS TO CREDITORS \$ _____

C TOTAL MONTHLY EXPENSES \$ _____

This _____ day of _____ 20_____

Notary Public

Affiant

SEPARATION AND PROPERTY SETTLEMENT AGREEMENT

This agreement is made between _____ (the Wife) and _____ (the Husband) to settle all financial matters by mutual agreement and having reached this agreement on this date do execute this instrument as follows

1 Children

No Children were born unto the parties and wife is not now pregnant

2 Property

2.1 The Marital Home

The parties jointly own real estate located at [address] _____ [state] _____, [zip code] _____ (the House) The Husband/Wife will convey to the Husband/Wife all of his right title and interest in the House by quitclaim deed The Wife/Husband will have all rights to the escrow account The Husband/Wife will be solely responsible for and will pay the mortgage debt on the House as it matures The Husband/Wife will hold the Husband/Wife harmless from the mortgage debt on the House

The parties do not jointly own a marital home

2.2 Automobiles

Each party will retain the vehicle or vehicles already owned or leased in his or her sole name and shall hold the other party harmless from any liability arising from indebtedness or lease obligations related to such vehicle(s)

Husband shall entitled to the _____ automobile with VIN _____ and make all payments thereon and hold wife harmless for the payment of same Wife shall convey all interest in said vehicle to Husband

Wife shall entitled to the _____ automobile with VIN _____ and make all payments thereon and hold husband harmless for the payment of same Wife shall convey all interest in said vehicle to Husband

2.3 Bank Accounts

The joint bank account at _____ is hereby awarded to the Wife. The Wife will either close this account or have the Husband's name removed from it.

The joint bank account at _____ is hereby awarded to the Husband. The Husband will either close this account or have the Wife's name removed from it.

The parties have already agreed on a division of their remaining bank accounts. Each party will retain sole ownership in the accounts that bear his or her name.

2.4 Other Personal Property

The Husband and the Wife have agreed to an equitable division of their personal property.

All other items of personal or real property currently in the Husband's name or belonging solely to him (except as specifically described in this Agreement) including without limitation cash, bank accounts, clothing, clothing accessories, jewelry, securities, retirement plans, business interests, partnerships, insurance policies, and books, music, art, tools, equipment, and intellectual property shall be his sole property, and the Wife hereby renounces any interest that she may have therein.

All other items of personal or real property currently in the Wife's name or belonging solely to her (except as specifically described in this Agreement) including without limitation cash, bank accounts, clothing, clothing accessories, jewelry, securities, retirement plans, business interests, partnerships, insurance policies, and books, music, art, tools, equipment, and intellectual property shall be her sole property, and the Husband hereby renounces any interest that he may have therein.

3 Marital Obligations

Each party will be responsible for the debts incurred in that party's sole name and will hold the other party harmless from any liability arising from said indebtedness.

Husband shall be responsible for the following joint debts of the parties and hold wife harmless for the payment of same:

(a)

(b)

(c)

(d)

Wife shall be responsible for the following joint debts and hold the Husband harmless for the payment of same

(a)

(b)

(c)

(d)

Other

4 Alimony

Both the Husband and the Wife waive any and all right to receive periodic alimony past present and future

5 Miscellaneous

5.1 Taxes

Each party will each prepare and file separate federal and state tax returns for year _____ at each party's sole expense. Each party will pay his or her own deficiency, if any, and each party will retain his or her own refund(s), if any.

The parties agree that the Wife provided the funds to pay the property taxes and mortgage interest on the House during _____ and that she is entitled to deduct these expenses on her _____ income tax return.

The parties agree that the Husband provided the funds to pay the property taxes and mortgage interest on the House during _____ and that he is entitled to deduct these expenses on his _____ income tax return.

Any tax refund which has not been received for the year _____ shall be the property of Husband Wife divided equally between Husband and wife.

5 2 **Execution**

Each party shall execute any and all documents necessary to effectuate the terms of this agreement including but not limited to deeds bills of sale certificates of title tax forms real estate contracts and the like If this Agreement requires the Husband or the Wife to accomplish an act but doesn t state a time limit for completion the act will be completed within 60 days after the divorce is effective

5 3 **Wife s Name**

The Wife s maiden name _____ will be restored to her
 No restoration of maiden name is sought

5 4 **Costs**

Each party shall pay his or her respective attorney if any _____ shall pay court costs

5 5 **Law**

This agreement shall be controlled by the laws of the State of Georgia

THE PARTIES HAVE EXECUTED THIS AGREEMENT to be effective on the date the divorce is effective

Witness _____
_____ Wife

Witness _____
_____ Husband

Sworn and subscribed before me this _____ day of _____ 20_____

NOTARY PUBLIC
My commission expires

FLOYD COUNTY SUPERIOR COURT
STATE OF GEORGIA

_____)
 Petitioner) Civil Action No _____
 vs)
 _____)
 Respondent)

PERMANENT PARENTING PLAN

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

This plan has been prepared by the judge.

This Plan is a new plan
 modifies an existing Parenting Plan dated _____
 modifies an existing Order/Judgment dated _____

1 Custody and Decision Making

A Legal Custody shall be (choose one)

with the Mother with the Father Joint

B Primary Physical Custodian

For each of the children named below the primary physical custodian is

	DOB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Mother	Father	Joint
	DOB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Mother	Father	Joint
	DOB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Mother	Father	Joint
	DOB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Mother	Father	Joint

Mother's Initials

Father's Initials

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

C Day-To-Day Decisions

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

D Major Decisions

Major decisions regarding each child shall be made as follows

- Educational decisions [] Mother [] Father [] Joint
- Non emergency healthcare [] Mother [] Father [] Joint
- Religious upbringing [] Mother [] Father [] Joint
- Extracurricular activities [] Mother [] Father [] Joint
- _____ [] Mother [] Father [] Joint
- _____ [] Mother [] Father [] Joint
- _____ [] Mother [] Father [] Joint

E Disagreements

Where parents elect joint decision making in Section 1(D) directly above please explain how disagreements for final decision making will be resolved

- [] Primary physical custodial parent has final decision making authority
- [] The plan detailed below which must provide a tie breaker method so that a final decision will be promptly made)

2 Parenting Time/Visitation Schedules

A Definitions & Times for Weekend & Weekday Parenting

For the purposes of this parenting plan the following definitions and times apply

Weekend A weekend starts at _____ p m on (select day)

Thursday Friday Saturday Other _____]

and ends at _____ m on (select day) Sunday Monday

Other _____]

Weekday Weekday visitation listed below begins at _____ p m

and ends

at _____ p m or

at the designated time when the child(ren) is/are to be returned to school or day care on the next morning or

Other _____

This parenting schedule begins _____

date of Court's Order (day and time)

During the term of this parenting plan the non custodial parent shall have at a minimum the following rights of parenting time/visitation (*choose applicable items*)

The first and third weekend of each month

The first third and alternate fifth weekend of each month

The second and fourth weekend of each month

The second fourth and alternative fifth weekend of each month

Every other weekend starting on _____

Weekday parenting time/visitation on (*choose an item*)

None

Every _____ (*insert day of week*) evening

[] Every other _____ (insert day of week) evening during the week before a non visitation weekend

[] Every _____ (insert day of week) and _____ (insert day of week) evening

[] Other _____

[] In the event any parenting time set forth hereinabove is denied the *Non-Primary Physical Custodial Parent* (NPPCP) because of any unforeseen emergency or illness the *Primary Physical Custodial Parent* (PPCP) shall promptly notify NPPCP and the parents shall at that time agree to an alternate time for make up time with the child(ren) so as to insure that NPPCP's total number of days with the child(ren) shall not be decreased. In the event the parents cannot agree at that time as to the appropriate make up time then the NPPCP's default make up time shall be the very next non holiday weekend/weekday thereafter

B Major Holidays and Vacation Periods

Thanksgiving

[] Odd numbered years The [] mother [] father shall have the children from _____ m on Wednesday until _____ m on Sunday

[] Even numbered years The [] mother [] father shall have the children from _____ m on Wednesday until _____ m on Sunday

[] Other _____

Winter Vacation

(First period begins on the date school is dismissed The second period begins on the date chosen by the parties and ends on the day before school resumes The same schedule applies to pre school age children The parents shall follow the annual Gwinnett County Public School calendar unless otherwise indicated herein)

First period The [] mother [] father shall have the child(ren) for the *first* period from the day and time school is dismissed until December _____ at _____ m in [] odd numbered years [] even numbered years [] every year

Second period The other parent will have the child(ren) for the *second*

period from the day and time indicated above until _____ m on the evening before school resumes Unless otherwise indicated the parties shall alternate the first and second periods each year

Other agreement of the parents _____

Summer Vacation (Define summer vacation period)

[] Weeks during the months of June July and August from when the traditional school ends until the beginning of the traditional school year

[] Other definition _____

Each parent has the right to have sole and exclusive summer vacation time with the child(ren) which supersedes other weekend and other visitations

(check applicable)

Fixed Annual Summer Vacation Period

[] The Mother shall have summer vacation with the child(ren) each year from the [] first [] second [] third [] fourth _____ *(insert day of week)* of _____ *(month)* until the [] first [] second [] third [] fourth _____ *(insert day of week)* of _____ *(month)* for a total of _____ weeks

[] The Father shall have summer vacation with the child(ren) each year from the [] first [] second [] third [] fourth _____ *(insert day of week)* of _____ *(month)* until the [] first [] second [] third [] fourth _____ *(insert day of week)* of _____ *(month)* for a total of _____ weeks

Summer Vacation Period Chosen Annually

[] The plan incorporates the duty to give advance notices effect of failure to give timely notice and summer vacation times periods to be chosen on a year to year basis

Mother

Father

Advance notice shall be given no later than

By April _____

By April _____

(Intent of this advance notice provision requires that the parents coordinate their respective vacation plans and any summer camp for any child)

Failure to give notice

Then Father has first priority to select his weeks

He must give 14 days notice and is subject to Mother s camp/vacation plans already made

Amount of time shall be inclusive of week ends times with that parent and shall be consecutive

A period(s) of _____ weeks

A period(s) of _____ weeks

In no event will the non primary custodial parent s time with each child be within the first seven (7) days after the academic school year ends or within seven (7) days before the academic school year begins

[] Other The regular day to day schedule shall apply unless other arrangements are set forth below *(if applicable)*

beginning _____

Spring Vacation *(if applicable)*

[] Consecutive days during the month(s) of March or April when the traditional school year calendar has a one week holiday period (May include and supersede Easter Sunday in certain years)

[] Other definition _____

[] The **Mother** shall have Spring Vacation with the child(ren)
[] odd [] even numbered years from _____ m on the day the child(ren) is/are released from school until _____ m on the day before the child(ren) is/are to return to school

[] The **Father** shall have Spring Vacation with the child(ren) [] odd [] even numbered years from _____ m on the day the child(ren) is/are released from school until _____ m on the day before the child(ren) is/are to return to school

[] The day to day schedule shall apply unless other arrangements are set forth *(if applicable)*

beginning _____

Fall Vacation *(if applicable)*

Define _____

[] The day to day schedule shall apply unless other arrangements are set forth *(if applicable)*

beginning _____

C Other Holiday Schedule (if applicable)

Indicate if child(ren) will be with the parent in ODD or EVEN numbered years or indicate EVERY year Holiday weekends begin at _____ p m on the Friday before the holiday and end at _____ p m on the holiday unless otherwise specified Holiday weekends supersede normal weekend parenting times but holidays are superseded by spring/summer vacation as may be applicable in a given year

	Mother	Father
Martin Luther King holiday weekend	_____	_____
President s Day	_____	_____
Easter weekend	_____	_____
Memorial Day holiday weekend	_____	_____
Mother s Day weekend	_____	_____
Father s Day weekend	_____	_____
4 th of July holiday (from _____ _ m on July ___ and ending at _____ _ m on July ____ Summer vacation supersedes)	_____	_____
Labor Day holiday weekend	_____	_____
Halloween evening (_____ p m until _____ p m)	_____	_____
Child s birthday _____ _ m until _____ p m	_____	_____
Mother s birthday _____ _ m until _____ p m	_____	_____
Father s birthday _____ _ m until _____ p m	_____	_____
Other holidays/religious days	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Mother s Initials

Father s Initials

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

E Start and end dates for holiday visitation

For the purposes of this parenting plan the holiday will start and end as follows

Holidays that fall on Friday include the following Saturday and Sunday

Holidays that fall on Monday include the preceding Saturday and Sunday

[] Other _____

F Coordination of Parenting Schedules

Check as applicable if any

The holiday parenting time/visitation schedule takes precedence over the regular parenting time/visitation schedule unless otherwise indicated below

The spring/summer parenting time/visitation schedule takes precedence over the regular parenting time/visitation and holiday parenting time/visitation schedule unless otherwise indicated below

For Plans Including Extended Summer Parenting Time

[] When the child(ren) is/are with a parent for an extended parenting time/visitation period (such as more than customary vacation time during the summer) the other parent shall be entitled to visit with the child(ren) during this extended period which is defined as a period of more than _____ weeks (normally a period equaling or exceeding 4 weeks) In such event then as follows

[] Weekend visitation on the same rotating schedule as this parent would typically have during the school year when the child(ren) reside with that parent

[] Other _____

G Transportation of Children & Personal Effects

For visitation the exchange of the child(ren) shall take place as follows unless prior arrangements have been made and agreed to by both parents at the residence of

Mother Father Other _____

The Mother Father shall be responsible for transportation of the child(ren) for all visitation periods

OR

The Mother Father will be responsible for transportation of the child at the beginning of visitation

The Mother Father will be responsible for transportation of the child at the conclusion of visitation

Transportation costs if any will be allocated as follows

Parent responsible for transportation of the child(ren) incurs the costs

Other provisions _____

Each parent shall take such reasonable and necessary steps to insure that the child(ren) is/are ready to be promptly transported at the designated time

Each parent shall return all the child's clothes and personal effects delivered to them by the other parent when the child(ren) is/are exchanged for visitation purposes

Each parent may designate from time to time hereafter a responsible adult to assist them in transporting the children

Each parent acknowledges that as each child gets older each child will become more involved in school activities and other extra-curricular activities. In the event a child has any scheduled school or extra-curricular activities on a week night or week end when the non-custodial parent has parenting time the non-custodial parent shall use his/her best efforts to handle each child's transportation to and from these activities. The primary physical custodial parent furthermore shall use his/her best reasonable efforts to avoid scheduling such events on the time periods scheduled for the non-custodial parent unless he/she has attempted to reasonably confer with the non-custodial parent. The non-custodial parent's consent to such activities shall not be unreasonably withheld.

H Contacting the child

When the child(ren) is/are are in the physical custody of one parent the other parent has the right to contact the child(ren) as follows

Reasonable telephone access

- Reasonable text message or email provided the child has proper access to receive such communication
- By cell phone provided to the child(ren) at the sole expense of the parent requesting to utilize this provision the Mother Father
- Other _____

The purpose of this provision is to maintain reasonable contact with the child(ren) and shall not be used to harass, annoy interfere or unreasonably pry into the personal life of the other parent Each parent shall maintain a working telephone

- Other Limitations on contact if any _____

I Supervision of Parenting Time (if applicable)

- Check here if Applicable

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

Place _____

Person/Organization supervising _____

Responsibility for cost & immediate payment Mother Father Joint

J Communication & Notice Concerning Parenting Times *Check applicable*

General

Unless otherwise modified below each parent shall promptly notify the other parent of a change of address phone number or cell phone number A parent changing residence must give at least 30 days advance notice of the change and provide the full address of the new residence and phone number

- Neither parent shall disparage the other parent in the presence of the minor child(ren)
- Neither parent shall place the child(ren) in the position of relaying messages or communications between the parents The parents shall communicate between themselves and not through the child(ren) Both parents acknowledge and agree that having the child(ren) act as the messenger between them is unfairly and unnecessarily stressful to the child(ren)
- Due to prior acts of family violence the address of the child(ren) and victim of family violence shall be kept confidential The protected parent shall promptly notify the other parent through a third party of any change in contact information necessary to conduct visitation No further communication is required

Not Exercising Parenting Times

Unless otherwise modified herein it is presumed the non custodial parent will exercise all available parenting times set forth in this Order. However if the non custodial parent is **NOT** going to exercise a specific parenting time or **NOT** going to exercise parenting time for a specified period of time then the non custodial parent shall give notice to the primary custodial parent by phone text message or email of his/her intent to **NOT** exercise parenting times as follows

Weekend & weekday – at least 72 hours advance notice

Other holiday(s) dates Thanksgiving Winter & Spring vacation(s) at least 7 days advance notice

Summer vacation – at least 4 weeks notice

No parenting time for a specified period *i.e. weeks months etc* immediate notice

[] Other (if applicable) _____

3 Access to Records and Information

Rights of the Parents

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

[] Limitations on access rights (if any) _____

Other Information Sharing Provisions (if any) _____

4 Modification of Plan or Disagreements

Parties may by mutual agreement vary the parenting time/visitation however such agreement shall not be a binding court order

Custody and child support may ONLY be lawfully modified by court order

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

Mother s Initials

Father s Initials

5 Special Considerations

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

6 Parents Consent

Please review the following and initial

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

Mother's Initials _____ Father's Initials _____

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

Mother's Initials _____ Father's Initials _____

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

Mother's Initials _____ Father's Initials _____

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

Father's Signature

Mother's Signature

ORDER

The Court has reviewed the foregoing Parenting Plan and it is hereby made the order of this Court. Each party is ORDERED and directed to comply with the terms and provisions set forth herein. **HEREIN FAIL NOT SO ORDERED,** this

_____ day of _____ 20 _____

JUDGE FLOYD SUPERIOR COURT

Mother's Initials

Father's Initials

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____,)
)
Plaintiff)
)
v) CIVIL ACTION FILE
)
) NO _____
)
_____)
)
Defendant)
_____)

INCOME DEDUCTION ORDER

This Court having entered an order establishing modifying or enforcing a child support obligation owed by the [Plaintiff]/[Defendant] (hereafter Obligor) and the Court having determined that an Income Deduction Order (IDO) should be entered in accordance with Official Code of Georgia Annotated § 19 6 30 et seq. it is ORDERED AND ADJUDGED

1 Identification of Parties

Obligor is _____

Obligor's Address is _____

Obligee is _____

Child(ren)

Name _____ Year of Birth _____

Name _____ Year of Birth _____

Name _____ Year of Birth _____

2 Service

The Obligees shall be responsible for initiating the wage withholding by completing and transmitting all documents and notices required by *O C G A § 19 6 31* et seq *42 USC 666(b)(6)(4)(ii)* and the Georgia Family Support Registry. Additionally a copy of this order and all further papers required to be served pursuant to *O C G A §19 6 30* et seq shall be served by the Obligees upon the Obligor by personal service certified mail or statutory overnight delivery return receipt requested or by regular mail in accordance with the alternative service provisions of *O C G A §§ 9 11 4(j)* and *19 6 30(b)*. A copy of this Order shall also be mailed by the Obligees to

Family Support Registry
P O Box 1800
Carrollton Georgia 30112 1800

3 Effective Date of this Order

() Immediately

() Upon a delinquency equal to one month's support. This Court finds that good cause was shown to delay the effective date of this Order. The Obligees or the IV D agency may enforce this Income Deduction Order by serving a Notice of Delinquency on the Obligor as provided in *O C G A § 19 6 32(f)*

4 Duration of this Order

This Order hereby supersedes any previous income deduction order and it shall remain in force so long as the order of support upon which it is based is effective or arrearages remain upon payment due thereunder or until further order of this court. Thus this Order shall continue until [check one] the child reaches the age of majority the child graduates from high school and reaches the age of majority or reaches the age of 20 years whichever shall first occur. See *O C G A § 19 6 13(e)*

5 Income Deduction

The Obligor's employer future employer or any other person private entity federal or state government or any unit of local government providing or administering any periodic form of payment due to the Obligor regardless of source including without

limitation wages salary commissions bonus worker's compensation disability payments from a pension or retirement program a personal injury award or settlement and interest shall deduct from all monies due the Obligor the following amounts

6 **Amount of Deduction**

- (a) Current Support \$ _____ per month
- (b) Alimony \$ _____ per month
- (c) Past Due Support \$ _____ per month
- (d) Family Support Registry
(FSR) Fee \$ _____ **per deduction payment per
O C G A §19 6 3 1(j)

** Five percent (5%) of the amount deducted for current or past child support or a maximum fee of \$1 50 whichever is less

7 **Past Due Support**

The Obligor named above owes Past Due Support in the amount of \$ _____ as of _____ 20__ The Obligees shall have the right to any additional arrearage that may accrue through the date of the first deduction of income and for all other periods of non payment

8 **Payment Address**

The total amount deducted shall be forwarded by the Employer (Payor) within two (2) business days after each payment date to

Family Support Registry
P O Box 1800
Carrollton Georgia 30112 1800

9 **Payment Instructions**

(a) If Pavor is deducting child support for more than one IDO Pavor must upon future modification by Child Support Services or court order deduct the FSR Fee for each IDO If the amount Pavor is deducting for any one case is \$40 00 or more the

FSR Fee for that IDO is \$1.50. If the deduction is less than \$40.00, the FSR Fee is five percent (5%) of the amount deducted, but in no event shall the fee exceed \$1.50.

(b) The total amount of the Child Support Deduction will decrease if applicable after all Past Due Support is paid in full. At that point, the amount deducted will be the amount of Current Support plus the FSR Fee.

10 Consumer Protection Act

The maximum amount to be deducted by a payor shall not exceed that allowable under Section 305(b) of the federal Consumer Protection Act, 15 U.S.C. § 1673(b), as amended.

11 Duty of Obligor to Insure Compliance

The Obligor is hereby ordered to perform all acts necessary for the proper withholding of the sums stated in this IDO, including delivery of the same to his employer and future employers, and to personally monitor and confirm on an ongoing basis that the payments withheld are timely and properly deducted from his/her income and forwarded as ordered, correctly identified with the above case. Failure of the employer to perform under this order does not relieve the Obligor of his/her obligation to insure that payment is made.

12 Wrongful Discharge

No payor shall discharge an obligor by reason of the fact that income has been subjected to an income deduction order under O.C.G.A. § 19-6-22. A payor who violates this paragraph is subject to a civil penalty not to exceed \$250.00 for the first violation or \$500.00 for any subsequent violation. Penalties shall be paid to the Obligee or the

Division of Child Support Services whichever is enforcing the income deduction order if any support is due and payable. If no support is due and payable the penalty shall be paid to the Obligor.

SO ORDERED this _____ day of _____ 20____

Judge
Superior Court of _____ County

Prepared and presented by

STATE OF GEORGIA
Report of Divorce, Annulment or Dissolution of Marriage
 Type or print all information

1 Civil Action Number	2 Date Decree Granted (mo day year)	3 County Decree Granted
4 Wife's Name (first middle last)	5 Maiden (Birth) Last Name	6 Date of Birth (mo day year)
7 County of Residence	8 Number of This Marriage (1 st 2 nd etc)	
9 Husband's Name (first middle last generation)	10 Date of Birth (mo day year)	11 County of Residence
12 Number of This Marriage (1 st 2 nd etc)	13 Date of This Marriage (mo day year)	
14 Specify Grounds For Divorce (19-3 OCGA)	15 Number of Children Less Than 18 Affected by This Decree	

This above Report may be reproduced by use of a computer. However, the finished Report must be a close reproduction of the original and prior review and approval must be obtained from the State Registrar before use
 (31-10-7 OCGA)

31-10-22 Record of divorce dissolutions and annulments

(a) A record of each divorce dissolution of marriage or annulment granted by any court of competent jurisdiction in this state shall be filed by the clerk of the court with the department and shall be re-registered if it has been completed and filed in accordance with this Code section. The records shall be prepared by the petitioner or the petitioner's legal representative on a form prescribed and furnished by the state registrar and shall be presented to the clerk of the court with the petition. In all cases the completed record shall be a prerequisite to the granting of the final decree.

(b) The clerk of the superior courts shall complete and forward to the department on or before the tenth day of each calendar month the records of each divorce dissolution of marriage or annulment decree granted during the preceding calendar month.

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

Plaintiff

CIVIL ACTION

v

NO _____

Defendant

CHILD SUPPORT ADDENDUM

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

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

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

1 Gross Income The Father's gross monthly income (before taxes) is \$ _____
the Mother's gross monthly income is \$ _____ (before taxes)

2 Number of Children The number of **children** for whom **support** is being provided under this order is _____

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

4 Child Support Amount The _____ shall pay to the _____
for the **support** of the minor **children** the sum of \$ _____ per month beginning
on _____ 20 ____

5 Duration of Child Support

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

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

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

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

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

(d) **Until Specific Date** The **child support** shall continue monthly thereafter until _____

6 Deviation from Presumptive Amount

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

(a) **No Deviation** It has been determined that none of the Deviations allowed under OCGA § 19-6-13 applies in this case as shown by the attached *Schedule E*. The amount of support in Paragraph 4 above is the Presumptive Amount of Child Support shown on the attached *Child Support Worksheet*

(b) **Deviation** It has been determined that one or more of the Deviations allowed under OCGA § 19-6-13 applies in this case as shown by the attached *Schedule E*. The Presumptive Amount of Child Support that would have been required under OCGA § 19-6-13 if the deviations had not been applied is \$ _____ per month as shown on the attached *Child Support Worksheet*. The attached *Schedule E* explains the reasons for the deviation how the application of the guidelines would be unjust or inappropriate considering the relative ability of each parent to provide support and how the best interest of the children who are subject to this child support determination is served by deviation from the presumptive amount of child support

7 Split Parenting A split parenting situation occurs when the parents have two or more children together where at least one of the children spend more than 50% of the time with one parent and at least one of the children spends more than 30% of the time with the other parent

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

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

(b) **Split Parenting Case** This is a Split Parenting case. Separate *Child Support Worksheets* have been filed for the **children** living with the Mother and for the **children** living with the Father and a *Child Support Order Addendum* has been entered in this action for each parent. At this time the Mother is obligated to pay the sum of \$ _____ per month to the Father and the Father is obligated to pay the sum of \$ _____ per month to the Mother

[If you checked (b) above you must check & complete only one of the following subparagraphs]

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

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

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

8 Health Dental & Vision Insurance for Children

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

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

Health (medical mental health and hospitalization) Dental Vision

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

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

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

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

Health (medical mental health and hospitalization) Dental Vision

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

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

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

11 **Social Security Benefits**

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

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

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

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

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

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

12 **Modification**

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

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

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

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

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

The date of the initial support Order concerning this child support case was ____

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

14 **Income Deduction Order**

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

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

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

- (1) immediately upon entry by the Court
- (2) upon accrual of a delinquency equal to one month's support. The *Income Deduction Order* may be enforced by serving a Notice of Delinquency as provided in OCGA § 19-6-32 **(f)**

(b) The parties agree that an *Income Deduction Order* is not immediately necessary

(c) The Court finds that there is good cause not to require income deduction having determined that income deduction will not serve the **children's best interests** and that there has been sufficient proof of timely payment of any previously ordered **support**

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

Father's Signature

Mother's Signature

ORDER

The Court has reviewed the for~~feiture~~ *Child Support Addendum* and it is hereby made the Order of this Court.

This Order entered on _____ 20 ____

JUDGE SUPERIOR COURT OF FLOYD COUNTY

Instructions for Using the Pen and Paper EZ Worksheet

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

This packet includes the following forms and information in this order

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

General Information Complete the worksheet form in black or blue ink only

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

Documents or information you need to begin using this form

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

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

Important If this worksheet includes a nonparent custodian do not include income for that person

You may view the actual child support guidelines statute on the Internet at

<http://www.georgiacourts.gov/csc/>

Instructions for Calculating Begin Here

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

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

Example (a) Mother's income \$1017 90 + (b) Father's income \$1950 00 = (c) Combined income \$2967 90

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

Helpful tip If the calculated percentage is for example 0 6570% you may round to a whole percentage such as 0 66% rather than 0 6570%

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

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

Line 3 Basic Child Support Obligation (BCSO) from Child Support Obligation Table

Find the amount on the table based on the number of children and the parents' combined gross income (income from Line 1 column (c)) that is closest to the combined adjusted gross income amount set out in the first column of the table.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Guide of Useful Definitions

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

1 Basic Child Support Obligation means the monthly amount of support displayed on the child support obligation table which corresponds to the combined adjusted income and the number of children for whom child support is being determined

2 Health Insurance means the cost of premiums for any general health or medical policy paid by the Mother Father and/or Nonparent Custodian for children included in this action Costs for vision dental or life insurance are not considered a part of Health Insurance If the child's portion of the health insurance premium is not known divide the total premium cost by the total number of persons included in the policy Multiply that answer by the total number of children included in the policy to determine a per child premium cost (Example Total Monthly Health Insurance Premium of \$200 divided by 4 persons = \$50 per person multiplied by 2 children covered and included in this action = \$100 Answer Each child's portion of the health insurance premium is \$50 per month)

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

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

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

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

6 ‘Social Security’

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

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

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

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

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

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

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

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

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

Type of Court _____

County _____

Court/Civil Action/OSAH Case Number _____

DHS/IV D Case Number (if applicable) _____

Check box if DHS is Petitioner

Mother's name (please print) _____

Custodial Parent / Noncustodial Parent (check one)

Father's name (please print) _____

Custodial Parent / Noncustodial Parent (check one)

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

Initial Action / Modification Action (check one)

Date of Initial Child Support Order _____

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

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

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

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

	(a) Mother	(b) Father	(c) Nonparent Custodian	(d) Combined
Additional Expenses				
5 Monthly Work Related Child Care Costs <i>(If none enter 0)</i>	\$	\$	\$	\$
6 Monthly Health Insurance premium paid for the Children <i>(If none enter 0)</i>	\$	\$	\$	\$
7 Total Monthly Work Related Child Care and Health Insurance Costs <i>(If none enter 0)</i>	\$	\$	\$	\$
8 Parents' percentage (%) of Income from Line 2	%	%		100%
9 Parents share of Work Related Child Care and Health Insurance Costs <i>Multiply % on Line 8 for each parent by total monthly amount on Line 7</i>	\$	\$		\$
10 Parents' Adjusted Child Support Obligation <i>Each parent's monthly BCSO from Line 4 plus parent's share of work related child care expenses & health insurance costs</i>	\$	\$		
11 Credit for Monthly Amounts parents actually pay or will pay for Work Related Child Care and/or Health Insurance Costs	\$	\$		
12 Total Parents' Presumptive Child Support Obligation	\$	\$		
13 Subtract Social Security offset – <i>If a child receives Title II Social Security benefits (i.e. RSDI SSD for parent's disability retirement) as a dependent on noncustodial parent's account enter monthly amount child receives under that parent's column. If none enter 0.</i>	\$	\$		
14 Final monthly child support obligation amount for each parent <i>Only the noncustodial parent(s) will have the duty to pay.</i>	\$	\$		
The amount on Line 14 is the Final Child Support Amount				
Uninsured Health Expenses				
15 Uninsured Health Expenses – <i>Carry down the percentage from Line 7 or enter a percentage agreed upon by the parties or ordered by the court.</i>	%	%		

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

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

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

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

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

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

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

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

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

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

COMBINED ADJUSTED GROSS INCOME		S h d i f B Chld's pp Oblg					
SIX CHILDREN	FIVE CHILDREN	FOUR CHILDREN	THREE CHILDREN	TWO CHILDREN	ONE CHILD	ADJUSTED GROSS INCOME	
440	404	367	330	283	40	40	185
463	425	387	347	298	1747	1901	1901
486	447	406	364	417	1747	1917	1917
509	468	425	381	445	1777	1933	1933
532	489	441	398	469	1792	1949	1949
554	510	463	415	487	1807	1966	1966
577	530	482	432	507	1821	1982	1982
600	551	499	449	521	1831	1992	1992
622	572	520	466	541	1835	1997	1997
645	593	548	483	559	1839	2001	2001
668	614	577	517	584	1844	2006	2006
690	634	597	544	604	1848	2011	2011
711	654	617	563	624	1852	2015	2015
733	673	637	582	643	1857	2020	2020
754	693	657	601	662	1861	2025	2025
775	712	677	620	681	1865	2029	2029
796	732	697	639	700	1870	2034	2034
817	751	717	658	719	1874	2039	2039
838	771	737	677	738	1878	2044	2044
860	790	756	696	757	1883	2048	2048
881	809	775	715	776	1887	2053	2053
902	829	794	734	795	1891	2058	2058
923	848	813	753	814	1896	2063	2063
944	868	832	772	833	1901	2068	2068
965	889	851	791	852	1906	2073	2073
986	909	870	810	871	1911	2078	2078
1006	929	889	829	890	1918	2083	2083
1026	948	908	848	909	1925	2088	2088
1045	967	927	867	928	1932	2093	2093
1065	986	946	886	947	1939	2098	2098
1085	1005	965	905	966	1947	2103	2103
1105	1024	984	924	985	1954	2108	2108
1125	1043	1003	943	1004	1961	2113	2113
1145	1062	1022	962	1023	1968	2118	2118
1165	1081	1041	981	1042	1975	2123	2123
1185	1100	1060	1000	1061	1982	2128	2128
1205	1119	1079	1019	1080	1989	2133	2133
1225	1138	1098	1038	1100	1996	2138	2138
1245	1157	1117	1057	1119	2003	2143	2143
1265	1176	1136	1076	1138	2010	2148	2148
1285	1195	1155	1095	1157	2017	2153	2153
1305	1214	1174	1114	1176	2024	2158	2158
1325	1233	1193	1133	1195	2031	2163	2163
1345	1252	1212	1152	1214	2038	2168	2168
1365	1271	1231	1171	1233	2045	2173	2173
1385	1290	1250	1190	1252	2052	2178	2178
1405	1309	1269	1209	1271	2059	2183	2183
1425	1328	1288	1228	1290	2066	2188	2188
1445	1347	1307	1247	1309	2073	2193	2193
1465	1366	1326	1266	1328	2080	2198	2198
1485	1385	1345	1285	1347	2087	2203	2203
1505	1404	1364	1304	1366	2094	2208	2208
1525	1423	1383	1323	1385	2101	2213	2213
1545	1442	1402	1342	1404	2108	2218	2218
1565	1461	1421	1361	1423	2115	2223	2223
1585	1480	1440	1380	1442	2122	2228	2228
1605	1499	1459	1399	1461	2129	2233	2233
1625	1518	1478	1418	1480	2136	2238	2238
1645	1537	1497	1437	1499	2143	2243	2243
1665	1556	1516	1456	1518	2150	2248	2248
1685	1575	1535	1475	1537	2157	2253	2253
1705	1594	1554	1494	1556	2164	2258	2258
1725	1613	1573	1513	1575	2171	2263	2263
1745	1632	1592	1532	1594	2178	2268	2268
1765	1651	1611	1551	1613	2185	2273	2273
1785	1670	1630	1570	1632	2192	2278	2278
1805	1689	1649	1589	1651	2199	2283	2283
1825	1708	1668	1608	1670	2206	2288	2288
1845	1727	1687	1627	1689	2213	2293	2293
1865	1746	1706	1646	1708	2220	2298	2298
1885	1765	1725	1665	1727	2227	2303	2303
1905	1784	1744	1684	1746	2234	2308	2308
1925	1803	1763	1703	1765	2241	2313	2313
1945	1822	1782	1722	1784	2248	2318	2318
1965	1841	1801	1741	1803	2255	2323	2323
1985	1860	1820	1760	1822	2262	2328	2328
2005	1879	1839	1779	1841	2269	2333	2333
2025	1898	1858	1798	1860	2276	2338	2338
2045	1917	1877	1817	1879	2283	2343	2343
2065	1936	1896	1836	1898	2290	2348	2348
2085	1955	1915	1855	1917	2297	2353	2353
2105	1974	1934	1874	1936	2304	2358	2358
2125	1993	1953	1893	1955	2311	2363	2363
2145	2012	1972	1912	1974	2318	2368	2368
2165	2031	1991	1931	1993	2325	2373	2373
2185	2050	2010	1950	2012	2332	2378	2378
2205	2069	2029	1969	2031	2339	2383	2383
2225	2088	2048	1988	2050	2346	2388	2388
2245	2107	2067	2007	2069	2353	2393	2393
2265	2126	2086	2026	2088	2360	2398	2398
2285	2145	2105	2045	2107	2367	2403	2403
2305	2164	2124	2064	2126	2374	2408	2408
2325	2183	2143	2083	2145	2381	2413	2413
2345	2202	2162	2102	2164	2388	2418	2418
2365	2221	2181	2121	2183	2395	2423	2423
2385	2240	2200	2140	2202	2402	2428	2428
2405	2259	2219	2159	2221	2409	2433	2433
2425	2278	2238	2178	2240	2416	2438	2438
2445	2297	2257	2197	2259	2423	2443	2443
2465	2316	2276	2216	2278	2430	2448	2448
2485	2335	2295	2235	2297	2437	2453	2453
2505	2354	2314	2254	2316	2444	2458	2458
2525	2373	2333	2273	2335	2451	2463	2463
2545	2392	2352	2292	2354	2458	2468	2468
2565	2411	2371	2311	2373	2465	2473	2473
2585	2430	2390	2330	2392	2472	2478	2478
2605	2449	2409	2349	2411	2479	2483	2483
2625	2468	2428	2368	2430	2486	2488	2488
2645	2487	2447	2387	2449	2493	2493	2493
2665	2506	2466	2406	2468	2500	2498	2498
2685	2525	2485	2425	2487	2507	2503	2503
2705	2544	2504	2444	2506	2514	2508	2508
2725	2563	2523	2463	2525	2521	2513	2513
2745	2582	2542	2482	2544	2528	2518	2518
2765	2601	2561	2501	2563	2535	2523	2523
2785	2620	2580	2520	2582	2542	2528	2528
2805	2639	2599	2539	2601	2549	2533	2533
2825	2658	2618	2558	2620	2556	2538	2538
2845	2677	2637	2577	2639	2563	2543	2543
2865	2696	2656	2596	2658	2570	2548	2548
2885	2715	2675	2615	2677	2577	2553	2553
2905	2734	2694	2634	2696	2584	2558	2558
2925	2753	2713	2653	2715	2591	2563	2563
2945	2772	2732	2672	2734	2598	2568	2568
2965	2791	2751	2691	2753	2605	2573	2573
2985	2810	2770	2710	2772	2612	2578	2578
3005	2829	2789	2729	2791	2619	2583	2583
3025	2848	2808	2748	2810	2626	2588	2588
3045	2867	2827	2767	2829	2633	2593	2593
3065	2886	2846	2786	2848	2640	2598	2598
3085	2905	2865	2805	2867	2647	2603	2603
3105	2924	2884	2824	2886	2654	2608	2608
3125	2943	2903	2843	2905	2661	2613	2613
3145	2962	2922	2862	2924	2668	2618	2618
3165	2981	2941	2881	2943	2675	2623	2623
3185	3000	2960	2900	2962	2682	2628	2628
3205	3019	2979	2919	2981	2689	2633	2633
3225	3038	2998	2938	3000	2696	2638	2638
3245	3057	3017	2957	3019	2703	2643	2643
3265	3076	3036	2976	3038	2710	2648	2648
3285	3095	3055	2995	3057	2717	2653	2653
3305	3114	3074	3014	3076	2724	2658	2658
3325	3133	3093	3033	3095	2731	2663	2663
3345	3152	3112	3052	3114	2738	2668	2668
3365	3171	3131	3071	3133	2745	2673	2673
3385	3190	3150	3090	3152	2752	2678	2678
3405	3209	3169	3109	3171	2759	2683	2683
3425	3228	3188	3128	3190	2766	2688	2688
3445	3247	3207	3147	3209	2773	2693	2693
3465	3266	3226	3166	3228	2780	2698	2698
3485	3285	3245	3185	3247	2787	2703	2703
3505	3304	3264	3204	3266	2794	2708	2708
3525	3323	3283	3223	3285	2801	2713	2713
3545	3342	3302	3242	3304	2808	2718	2718
3565	3361	3321	3261	3323	2815	2723	2723
3585	3380	3340	3280	3342	2822	2728	2728
3605	3399	3359	3299	3361	2829	2733	2733
3625	3418	3378	3318	3380	2836	2738	2738
3645	3437	3397	3337	3399	2843	2743	2743
3665	3456	3416	3356	3418	2850	2748	2748
3685	3475	3435	3375	3437	28		

g						
M	O E L	TWO	TH EE	R	E	L E
AD						
ME						
8 300	1,133	1 576	1,797	2,004	2 204	2 398
8 350	1 134	1 578	1 799	2 006	2 206	2 400
8 400	1 135	1 579	1,800	2 007	2 208	2,402
8 450	1 136	1 590	1 802	2 009	2 210	2 404
8 500	1 138	1,582	1,803	2 010	2,211	2 406
8 5 0	1 139	1 583	1 804	2 012	2 213	2 408
8 600	1,140	1 585	1 806	2,013	2,215	2 410
8 50	1 141	1 586	1 807	2 015	2 2 6	2 411
8 700	1,142	1 588	1 808	2,016	2 218	2,413
8 750	1 144	1 589	1 810	2 018	2 0	2 41
8 800	1,145	1,591	1 811	2 019	2,221	2 417
8 850	1,146	1 59	1 813	2 021	2 23	2 419
8 900	1,147	1,593	1 814	2 023	2,225	2 421
8 950	1 149	1 595	1 815	2 024	2 26	2 422
9 000	1 150	1 596	1 817	2 026	2,228	2 424
9 050	1 153	1 601	1 8 2	2 032	2 235	2 431
9 100	1 159	1 609	1,831	2 042	2 246	2 443
9 150	1 164	1 617	1 8 0	2 05	257	2 455
9 200	1 170	1,624	1 849	2 062	2,268	2 467
9 50	1 175	1 632	1 853	071	79	2 479
9 300	1 181	1 640	1 867	2 081	2 290	2 491
9 350	1 187	1 48	1 876	2 091	2 301	2 503
9 400	1,192	1 656	1,885	2 101	2 311	2,515
9 450	1 198	1 63	1 894	2 111	2 32	2 527
9 500	1 203	1,671	1 902	2 121	2,333	2 539
9 5 0	1 09	1 79	1 911	2 131	344	2 51
9 600	1 214	1 687	1 920	2 141	2,355	2 563
9 650	1 2 0	1 694	1 9 9	2 1 1	2 366	2 574
9 700	1,226	1 702	1 938	2 161	2,377	2 586
9 750	1 31	1 710	1 94	2 1 1	388	2 98
9 800	1 237	1 718	1,956	2 181	2 399	2 610
9 3 0	1 24	1 725	1 965	2 191	410	2 622
9 900	1 248	1,733	1 974	2 201	2,421	2 634
9 950	1 53	1 741	1 983	2 11	2 432	2 646
10 000	1 259	1,749	1 992	2 221	2,443	2 658
10 0 0	1 264	1 7 7	2 001	2 31	2 454	2 70
10 100	1 270	1 764	2 010	2 241	2,465	2 682
10 1 0	1 276	1 77	019	51	2 4 6	2 94
10 200	1 281	1 780	2 028	2 261	2 487	2 706
10 50	1 287	1 788	2 036	2 71	2 498	2 718
10 300	1 292	1 795	2 045	2 281	2 509	2 729
10 3 0	1 98	1 803	2 054	291	520	2 741
10 400	1,303	1 811	2 063	2,301	2 531	2 753
10 4 0	1 309	1 819	2 07	2 311	2 42	2 765
10 500	1 313	1 825	2,079	2 318	2 550	2,774
10 5 0	1 317	1 830	2 085	2 325	2 5 7	2 782
10 600	1 321	1 835	2 091	2 331	2,564	2 790
10 50	1 325	1 841	096	2 338	2 71	2 798
10 700	1 329	1,846	2 102	2 344	2 578	2 805
10 750	1 332	1 851	2 108	2 351	586	2 813
10 800	1,336	1 856	2 114	2,357	2 593	2,821
10 850	1 340	1 86	2 120	2 3 4	2 00	2 829
10 900	1 344	1 867	2 126	2 370	2 607	2 836
10 950	1 3 8	1 87	131	377	2 14	2 844
11 000	1 351	1,877	2 137	2 383	2,621	2 852
11 050	1 35	1 883	2 143	2 390	8	2 860
11 100	1,359	1 888	2 149	2,396	2 636	2 868
11 150	1 363	1 893	15	403	2 43	2 875
11 200	1,367	1 898	2,161	2,409	2 650	2,883
11 50	1 371	1 904	2 16	2 415	2 7	891
11,300	1 374	1,909	2,172	2 422	2,664	2 899
11 350	1 378	1 914	178	2 4 8	671	2 906
11 400	1 382	1,919	2 184	2 435	2 678	2 914
11 4 0	1 386	1 9 5	2 190	2 441	2 86	2 9 2
11 500	1,390	1 930	2 195	2 448	2 693	2 930
11 5 0	1 394	1 935	2 201	2 454	2 700	938
11,600	1 397	1 940	2,207	2 461	2 707	2 945
11 50	1 401	1 9 6	2 213	2 467	714	2 953
11,700	1 405	1,951	2 219	2 474	2,721	2 961
11 750	1 409	1 95	2 2 5	2 480	728	2 969
11 800	1 413	1 961	2 230	2 487	2 736	2 976
11 850	1 417	1 967	36	493	2 743	2 984
11 900	1,420	1 972	2,242	2,500	2 750	2 992
11 950	1 424	1 9 7	2 248	2 06	2 757	3 000
12,000	1 428	1,982	2 254	2 513	2,764	3 007
1 050	1 432	1 988	2 260	2 519	771	3 01
12 100	1 436	1,993	2 265	2 526	2,779	3 023
1 1 0	1 439	1 998	2 271	2 32	786	3 031

E	E	TW	TH E	E	D E	
RO	L					
M						
12,200	1 443	2,003	2 277	2 539	2,793	3 039
12 250	1 447	2 009	2 283	2 5 5	2 800	3 046
12 300	1 451	2,014	2 289	2 552	2,807	3 054
12 3 0	1 45	2 019	2 95	2 553	2 814	3 062
12 400	1,459	2 024	2 300	2,565	2 821	3 070
1 450	1 462	2 030	2 306	2 571	2 829	3 077
12,500	1 466	2 035	2,312	2 578	2 836	3 085
12 550	1 470	2 040	2 318	2 84	2 843	3 093
12 600	1 474	2,045	2 324	2 591	2,850	3 101
12 50	1 77	2 050	2 329	2 97	2 857	3 108
12 700	1,481	2 055	2 335	2,603	2 863	3 115
12 750	1 48	2 060	2 340	2 09	2 870	3 123
12 800	1,487	2 064	2,345	2,615	2 877	3 130
12 850	1 491	2 069	2 351	2 621	2 883	3 137
12 900	1 494	2 074	2 356	2 627	2 890	3 144
12 950	1 497	2 078	361	2 33	2 896	3 1 1
13 000	1 501	2,083	2 367	2 639	2,903	3 158
13 050	1 504	2 08	2 372	2 645	2 909	3 165
13 100	1,507	2 092	2 377	2,651	2 916	3 172
13 1 0	1 10	2 097	383	2 57	2 922	3 180
13 200	1 514	2 101	2,388	2 663	2 929	3 187
13 250	1 17	2 106	2 393	2 668	2 935	3 193
13 300	1 520	2,110	2 398	2 674	2 941	3 200
13 350	1 23	2 114	403	2 679	2 947	3 206
13 400	1,526	2 118	2 408	2,685	2 953	3 213
13 450	1 529	2 123	2 13	2 90	2 959	3 2 0
13 500	1,532	2 127	2 418	2,696	2 965	3 226
13 5 0	1 535	2 131	2 4 3	2 701	971	3 233
13 600	1 538	2 136	2,428	2 707	2 977	3 239
13 6 0	1 541	2 140	2 432	2 712	2 983	3
13 700	1 544	2 144	2 437	2 718	2 989	3 253
13 750	1 547	2 148	2 442	2 723	2 996	3 259
13 800	1,550	2 153	2 447	2 729	3 002	3 266
13 850	1 53	2 157	2 452	2 73	3 008	3 27
13 900	1,556	2 161	2 457	2 740	3 014	3 279
13 950	1 5 9	2 1 6	2 462	2 745	3 020	3 28
14 000	1 562	2 160	2 467	2 751	3 026	3 292
14 050	1 5	2 174	2 47	2 75	3 032	3 299
14 100	1 568	2 178	2 477	2 762	3 038	3 305
14 1 0	1 71	2 183	2 482	2 767	3 044	3 312
14 200	1,574	2 187	2 487	2 773	3 050	3 318
14 50	1 577	2 191	2 492	2 778	3 05	3 325
14,300	1 581	2 195	2 497	2 784	3 062	3 332
14 350	1 584	2 00	2 502	2 789	3 068	3 338
14 400	1 587	2 204	2 506	2 795	3 074	3 345
14 450	1 590	2 08	2 11	2 800	3 080	3 351
14 500	1,593	2 213	2 516	2 806	3 086	3 358
14 50	1 596	2 17	2 21	811	3 09	3 36
14 600	1,599	2 221	2 526	2 817	3 098	3 371
14 650	1 602	2 225	531	2 82	3 104	3 378
14 700	1 605	2,230	2 536	2 828	3 111	3 384
14 750	1 608	34	2 41	833	3 117	3 391
14 800	1 611	2 238	2 546	2 839	3 123	3 397
14 850	1 614	43	2 1	2 844	3 1 9	3 404
14 900	1 617	2 247	2 556	2 850	3 135	3 411
14 950	1 620	2 251	2 1	85	3 141	3 417
15,000	1 623	2 255	2 566	2 861	3 147	3 424
15 050	1 626	2 260	2 71	2 866	3 153	3 430
15 100	1 629	2,264	2 576	2 872	3 159	3 437
15 1 0	1 632	2 68	2 581	377	3 1 5	3 444
15 200	1 635	2 272	2 585	2 883	3 171	3 450
15 250	1 638	2 277	2 590	888	3 177	3 457
15 300	1 641	2 281	2 595	2 894	3 183	3 463
1 3 0	1 644	2 285	2 00	2 899	3 189	3 470
15 400	1 647	2 290	2 605	2 905	3 195	3 476
1 450	1 50	2 94	2 10	2 910	3 201	3 483
15 500	1 653	2,298	2 615	2 916	3 207	3 490
1 5 0	1 5	2 302	2 620	2 9 1	3 213	3 496
15 600	1 659	2 307	2 625	2 927	3 219	3 503
15 50	1 663	2 311	2 30	2 932	3 2 6	3 09
15 700	1 666	2 315	2 635	2 938	3 232	3 516
1 750	1 669	2 3 0	2 40	2 943	3 38	3 523
15,800	1 672	2 324	2 645	2 949	3 244	3 529
1 8 0	1 75	2 328	50	954	3 50	3 36
15 900	1 678	2 332	2 655	2 960	3 256	3 542
15 950	1 81	2 337	2 659	2 965	3 262	3 49
16 000	1 684	2 341	2 664	2 971	3 268	3 555
1 050	1 87	345	9	2 976	3 274	3

	M	AD	M	E	CHL	E	TW	R	H	TH	E	E
3 65	20 000	1 896	2 622	2 971	3 313	3 644	3 970	3 975	3 970	3 649	3 970	3 965
3 955	20 000	1 901	2 627	2 975	3 317	3 649	3 975	3 980	3 649	3 975	3 970	3 965
3 950	20 000	1 906	2 632	2 980	3 322	3 654	3 980	3 985	3 654	3 980	3 975	3 970
3 945	20 000	1 911	2 637	2 985	3 327	3 659	3 985	3 990	3 659	3 985	3 980	3 975
3 940	20 000	1 916	2 642	2 990	3 332	3 664	3 990	3 995	3 664	3 990	3 985	3 980
3 935	20 000	1 921	2 647	2 995	3 337	3 669	3 995	4 000	3 669	3 995	3 990	3 985
3 930	20 000	1 926	2 652	3 000	3 342	3 674	4 000	4 005	3 674	4 000	3 995	3 990
3 925	20 000	1 931	2 657	3 005	3 347	3 679	4 005	4 010	3 679	4 005	4 000	3 995
3 920	20 000	1 936	2 662	3 010	3 352	3 684	4 010	4 015	3 684	4 010	4 005	4 000
3 915	20 000	1 941	2 667	3 015	3 357	3 689	4 015	4 020	3 689	4 015	4 010	4 005
3 910	20 000	1 946	2 672	3 020	3 362	3 694	4 020	4 025	3 694	4 020	4 015	4 010
3 905	20 000	1 951	2 677	3 025	3 367	3 699	4 025	4 030	3 699	4 025	4 020	4 015
3 900	20 000	1 956	2 682	3 030	3 372	3 704	4 030	4 035	3 704	4 030	4 025	4 020
3 895	20 000	1 961	2 687	3 035	3 377	3 709	4 035	4 040	3 709	4 035	4 030	4 025
3 890	20 000	1 966	2 692	3 040	3 382	3 714	4 040	4 045	3 714	4 040	4 035	4 030
3 885	20 000	1 971	2 697	3 045	3 387	3 719	4 045	4 050	3 719	4 045	4 040	4 035
3 880	20 000	1 976	2 702	3 050	3 392	3 724	4 050	4 055	3 724	4 050	4 045	4 040
3 875	20 000	1 981	2 707	3 055	3 397	3 729	4 055	4 060	3 729	4 055	4 050	4 045
3 870	20 000	1 986	2 712	3 060	3 402	3 734	4 060	4 065	3 734	4 060	4 055	4 050
3 865	20 000	1 991	2 717	3 065	3 407	3 739	4 065	4 070	3 739	4 065	4 060	4 055
3 860	20 000	1 996	2 722	3 070	3 412	3 744	4 070	4 075	3 744	4 070	4 065	4 060
3 855	20 000	2 001	2 727	3 075	3 417	3 749	4 075	4 080	3 749	4 075	4 070	4 065
3 850	20 000	2 006	2 732	3 080	3 422	3 754	4 080	4 085	3 754	4 080	4 075	4 070
3 845	20 000	2 011	2 737	3 085	3 427	3 759	4 085	4 090	3 759	4 085	4 080	4 075
3 840	20 000	2 016	2 742	3 090	3 432	3 764	4 090	4 095	3 764	4 090	4 085	4 080
3 835	20 000	2 021	2 747	3 095	3 437	3 769	4 095	4 100	3 769	4 095	4 090	4 085
3 830	20 000	2 026	2 752	3 100	3 442	3 774	4 100	4 105	3 774	4 100	4 095	4 090
3 825	20 000	2 031	2 757	3 105	3 447	3 779	4 105	4 110	3 779	4 105	4 100	4 095
3 820	20 000	2 036	2 762	3 110	3 452	3 784	4 110	4 115	3 784	4 110	4 105	4 100
3 815	20 000	2 041	2 767	3 115	3 457	3 789	4 115	4 120	3 789	4 115	4 110	4 105
3 810	20 000	2 046	2 772	3 120	3 462	3 794	4 120	4 125	3 794	4 120	4 115	4 110
3 805	20 000	2 051	2 777	3 125	3 467	3 799	4 125	4 130	3 799	4 125	4 120	4 115
3 800	20 000	2 056	2 782	3 130	3 472	3 804	4 130	4 135	3 804	4 130	4 125	4 120
3 795	20 000	2 061	2 787	3 135	3 477	3 809	4 135	4 140	3 809	4 135	4 130	4 125
3 790	20 000	2 066	2 792	3 140	3 482	3 814	4 140	4 145	3 814	4 140	4 135	4 130
3 785	20 000	2 071	2 797	3 145	3 487	3 819	4 145	4 150	3 819	4 145	4 140	4 135
3 780	20 000	2 076	2 802	3 150	3 492	3 824	4 150	4 155	3 824	4 150	4 145	4 140
3 775	20 000	2 081	2 807	3 155	3 497	3 829	4 155	4 160	3 829	4 155	4 150	4 145
3 770	20 000	2 086	2 812	3 160	3 502	3 834	4 160	4 165	3 834	4 160	4 155	4 150
3 765	20 000	2 091	2 817	3 165	3 507	3 839	4 165	4 170	3 839	4 165	4 160	4 155
3 760	20 000	2 096	2 822	3 170	3 512	3 844	4 170	4 175	3 844	4 170	4 165	4 160
3 755	20 000	2 101	2 827	3 175	3 517	3 849	4 175	4 180	3 849	4 175	4 170	4 165
3 750	20 000	2 106	2 832	3 180	3 522	3 854	4 180	4 185	3 854	4 180	4 175	4 170
3 745	20 000	2 111	2 837	3 185	3 527	3 859	4 185	4 190	3 859	4 185	4 180	4 175
3 740	20 000	2 116	2 842	3 190	3 532	3 864	4 190	4 195	3 864	4 190	4 185	4 180
3 735	20 000	2 121	2 847	3 195	3 537	3 869	4 195	4 200	3 869	4 195	4 190	4 185
3 730	20 000	2 126	2 852	3 200	3 542	3 874	4 200	4 205	3 874	4 200	4 195	4 190
3 725	20 000	2 131	2 857	3 205	3 547	3 879	4 205	4 210	3 879	4 205	4 200	4 195
3 720	20 000	2 136	2 862	3 210	3 552	3 884	4 210	4 215	3 884	4 210	4 205	4 200
3 715	20 000	2 141	2 867	3 215	3 557	3 889	4 215	4 220	3 889	4 215	4 210	4 205
3 710	20 000	2 146	2 872	3 220	3 562	3 894	4 220	4 225	3 894	4 220	4 215	4 210
3 705	20 000	2 151	2 877	3 225	3 567	3 899	4 225	4 230	3 899	4 225	4 220	4 215
3 700	20 000	2 156	2 882	3 230	3 572	3 904	4 230	4 235	3 904	4 230	4 225	4 220
3 695	20 000	2 161	2 887	3 235	3 577	3 909	4 235	4 240	3 909	4 235	4 230	4 225
3 690	20 000	2 166	2 892	3 240	3 582	3 914	4 240	4 245	3 914	4 240	4 235	4 230
3 685	20 000	2 171	2 897	3 245	3 587	3 919	4 245	4 250	3 919	4 245	4 240	4 235
3 680	20 000	2 176	2 902	3 250	3 592	3 924	4 250	4 255	3 924	4 250	4 245	4 240
3 675	20 000	2 181	2 907	3 255	3 597	3 929	4 255	4 260	3 929	4 255	4 250	4 245
3 670	20 000	2 186	2 912	3 260	3 602	3 934	4 260	4 265	3 934	4 260	4 255	4 250
3 665	20 000	2 191	2 917	3 265	3 607	3 939	4 265	4 270	3 939	4 265	4 260	4 255
3 660	20 000	2 196	2 922	3 270	3 612	3 944	4 270	4 275	3 944	4 270	4 265	4 260
3 655	20 000	2 201	2 927	3 275	3 617	3 949	4 275	4 280	3 949	4 275	4 270	4 265
3 650	20 000	2 206	2 932	3 280	3 622	3 954	4 280	4 285	3 954	4 280	4 275	4 270
3 645	20 000	2 211	2 937	3 285	3 627	3 959	4 285	4 290	3 959	4 285	4 280	4 275
3 640	20 000	2 216	2 942	3 290	3 632	3 964	4 290	4 295	3 964	4 290	4 285	4 280
3 635	20 000	2 221	2 947	3 295	3 637	3 969	4 295	4 300	3 969	4 295	4 290	4 285
3 630	20 000	2 226	2 952	3 300	3 642	3 974	4 300	4 305	3 974	4 300	4 295	4 290
3 625	20 000	2 231	2 957	3 305	3 647	3 979	4 305	4 310	3 979	4 305	4 300	4 295
3 620	20 000	2 236	2 962	3 310	3 652	3 984	4 310	4 315	3 984	4 310	4 305	4 300
3 615	20 000	2 241	2 967	3 315	3 657	3 989	4 315	4 320	3 989	4 315	4 310	4 305
3 610	20 000	2 246	2 972	3 320	3 662	3 994	4 320	4 325	3 994	4 320	4 315	4 310
3 605	20 000	2 251	2 977	3 325	3 667	3 999	4 325	4 330	3 999	4 325	4 320	4 315
3 600	20 000	2 256	2 982	3 330	3 672	4 004	4 330	4 335	4 004	4 330	4 325	4 320
3 595	20 000	2 261	2 987	3 335	3 677	4 009	4 335	4 340	4 009	4 335	4 330	4 325
3 590	20 000	2 266	2 992	3 340	3 682	4 014	4 340	4 345	4 014	4 340	4 335	4 330
3 585	20 000	2 271	2 997	3 345	3 687	4 019	4 345	4 350	4 019	4 345	4 340	4 335
3 580	20 000	2 276	3 002	3 350	3 692	4 024	4 350	4 355	4 024	4 350	4 345	4 340
3 575	20 000	2 281	3 007	3 355	3 697	4 029	4 355	4 360	4 029	4 355	4 350	4 345
3 570	20 000	2 286	3 012	3 360	3 702	4 034	4 360	4 365	4 034	4 360	4 355	4 350
3 565	20 000	2 291	3 017	3 365	3 707	4 039	4 365	4 370	4 039	4 365	4 360	4 355
3 560	20 000	2 296	3 022	3 370	3 712	4 044	4 370	4 375	4 044	4 370	4 365	4 360
3 555	20 000	2 301	3 027	3 375	3 717	4 049	4 375	4 380	4 049	4 375	4 370	4 365
3 550	20 000	2 306	3 032	3 380	3 722	4 054	4 380	4 385	4 054	4 380	4 375	4 370
3 545	20 000	2 311	3 037	3 385	3 727	4 059	4 385	4 390	4 059	4 385	4 380	4 375
3 540	20 000	2 316	3 042	3 390	3 732	4 064	4 390	4 395	4 064	4 390	4 385	4 380
3 535	20 000	2 321	3 047	3 395	3 737	4 069	4 395	4 400	4 069	4 395	4 390	4 385
3 530	20 000	2 326	3 052	3 400	3 742	4 074	4 400	4 405	4 074	4 400	4 395	4 390
3 525	20 000	2 331	3 057	3 405	3 747	4 079	4 405	4 410	4 079	4 405	4 400	4 395
3 520	20 000	2 336	3 062	3 410	3 752	4 084	4 410	4 415	4 084	4 410	4 405	4 400
3 515	20 000											

S f C S O							
CO	US E GROSS COM	O E C LD	TWO C L	H EE C L E	FOU C I E	F E R E	S C L
23 900	2 065	2 843	3 208	3 577	3 935	4 282	
23 950	2 066	2 845	3 210	3 579	3 938	4 284	
24 000	2 068	2 847	3 212	3 581	3 940	4 287	
24 050	2 069	2 849	3 214	3 583	3 942	4 289	
24 100	2 070	2 851	3 216	3 585	3 945	4 292	
24 150	2 072	2 852	3 217	3 587	3 947	4 294	
24 200	2 073	2 854	3 219	3 589	3 949	4 297	
24 250	2 075	2 855	3 221	3 592	3 951	4 299	
24 300	2 076	2 858	3 223	3 594	3 954	4 302	
24 350	2 077	2 860	3 225	3 596	3 956	4 304	
24 400	2 079	2 862	3 227	3 598	3 958	4 307	
24 450	2 080	2 864	3 228	3 600	3 961	4 309	
24 500	2 082	2 865	3 230	3 602	3 963	4 312	
24 550	2 083	2 867	3 232	3 604	3 965	4 314	
24 600	2 085	2 869	3 234	3 606	3 967	4 317	
24 650	2 086	2 871	3 236	3 608	3 970	4 319	
24 700	2 087	2 873	3 238	3 610	3 972	4 322	
24 750	2 089	2 875	3 240	3 612	3 974	4 324	
24 800	2 090	2 876	3 241	3 614	3 977	4 326	
24 8 0	2 092	2 873	3 243	3 611	3 979	4 329	
24 900	2 093	2 880	3 245	3 618	3 981	4 331	
24 950	2 094	2 882	3 247	3 620	3 983	4 334	
25 000	2 096	2 884	3 249	3 622	3 986	4 336	
25 050	2 097	2 885	3 251	3 624	3 988	4 339	
25 100	2 099	2 887	3 252	3 626	3 990	4 341	
25 150	2 100	2 889	3 254	3 629	3 993	4 344	
25 200	2 102	2 891	3 256	3 631	3 995	4 346	
25 250	2 103	2 893	3 258	3 633	3 997	4 349	
25 300	2 104	2 895	3 260	3 635	3 999	4 351	
25 3 0	2 10	2 897	3 262	3 637	4 002	4 3 4	
25 400	2 107	2 899	3 264	3 639	4 004	4 356	
25 450	2 109	2 900	3 265	3 641	4 006	4 359	
25 500	2 110	2 902	3 267	3 643	4 009	4 361	
25 5 0	2 111	2 904	3 69	3 4	4 011	4 36	
25 600	2 113	2 906	3 271	3 647	4 013	4 366	
25 650	2 114	2 908	3 273	3 6 9	4 015	4 369	
25 700	2 116	2 910	3 275	3 651	4 018	4 371	
25 7 0	2 117	2 911	3 27	3 653	4 020	4 374	
25 800	2 119	2 913	3 278	3 655	4 022	4 376	
25 8 0	120	2 91	3 280	3 5	4 024	4 379	
25 900	2 121	2 917	3 282	3 659	4 027	4 381	
25 950	2 1 3	2 919	3 84	3 1	4 029	4 38	
26 000	2 124	2 921	3 286	3 663	4 031	4 386	
26 050	2 126	2 923	3 87	3 6	4 034	4 389	
26 100	2 127	2 924	3 289	3 668	4 036	4 391	
26 1 0	2 128	2 9 6	3 291	3 70	4 038	4 394	
26 200	2 130	2 928	3 293	3 672	4 040	4 396	
26 250	2 131	2 930	3 29	3 74	4 043	4 399	
26 300	2 133	2 932	3 297	3 676	4 045	4 401	
26 350	2 134	2 934	3 299	3 8	4 047	4 403	
26 400	2 136	2 935	3 300	3 680	4 050	4 406	
26 450	2 137	2 937	3 302	3 82	4 05	4 408	
26 500	2 138	2 939	3 304	3 684	4 054	4 411	
26 550	2 140	2 941	3 306	3 86	4 05	4 413	
26 600	2 141	2 943	3 308	3 688	4 059	4 416	
26 650	2 143	2 945	3 310	3 90	4 061	4 418	
26 700	2 144	2 947	3 311	3 692	4 063	4 421	
26 750	2 145	2 948	3 313	3 694	4 066	4 423	
26 800	2 147	2 950	3 315	3 696	4 068	4 426	
26 850	2 148	2 952	3 317	3 698	4 070	4 428	
26 900	2 150	2 954	3 319	3 701	4 072	4 431	
26 950	2 151	2 955	3 321	3 703	4 0 5	4 433	
27 000	2 153	2 958	3 323	3 705	4 077	4 436	
27 050	2 1 4	2 9 9	3 324	3 707	4 079	4 438	
27 100	2 155	2 961	3 326	3 709	4 082	4 441	
27 1 0	2 157	2 963	3 328	3 711	4 084	4 443	
27 200	2 158	2 965	3 330	3 713	4 086	4 446	
27 250	2 1 0	2 9 7	3 332	3 71	4 088	4 448	
27 300	2 161	2 969	3 334	3 717	4 091	4 451	
27 350	2 1 2	2 970	3 335	3 719	4 093	4 453	
27 400	2 164	2 972	3 337	3 721	4 095	4 456	
27 450	2 1 5	2 974	3 339	3 723	4 098	4 458	
27 500	2 167	2 976	3 341	3 725	4 100	4 461	
27 5 0	2 1 8	2 978	3 343	3 727	4 102	4 463	
27 600	2 170	2 980	3 345	3 729	4 104	4 466	
27 650	2 171	2 982	3 347	3 731	4 107	4 468	
27 700	2 172	2 983	3 348	3 733	4 109	4 471	
27 750	2 174	2 985	3 350	3 735	4 111	4 473	

S h i f C S O						
CO	JUSTED G OSS CO	O E C L	TWO C L E	TH E C L E	O C LD E C	E
27 800	2 175	2 987	3 352	3 738	4 114	4 475
27 850	2 177	2 989	3 354	3 740	4 116	4 478
27 900	2 178	2 991	3 356	3 742	4 118	4 480
27 950	2 179	2 993	3 3 7	3 744	4 120	4 483
28 000	2 181	2 994	3 359	3 746	4 122	4 485
28 050	2 182	2 996	3 361	3 748	4 125	4 488
28 100	2 184	2 998	3 363	3 750	4 127	4 490
28 150	2 185	3 000	3 36	3 7 2	4 129	4 492
28 200	2 186	3 001	3 366	3 754	4 131	4 495
28 250	2 188	3 003	3 368	3 75	4 133	4 497
28 300	2 189	3 005	3 370	3 758	4 136	4 500
28 350	2 190	3 007	3 372	3 7 9	4 138	4 502
28 400	2 192	3 009	3 374	3 761	4 140	4 504
28 4 0	2 193	3 010	3 375	3 763	4 142	4 507
28 500	2 194	3 012	3 377	3 765	4 145	4 509
28 5 0	2 196	3 014	3 379	3 767	4 147	4 512
28 600	2 197	3 016	3 381	3 769	4 149	4 514
28 650	2 199	3 017	3 38	3 771	4 1 1	4 516
28 700	2 200	3 019	3 384	3 773	4 153	4 519
28 750	2 201	3 021	3 38	3 775	4 1	4 521
28 800	2 203	3 023	3 388	3 777	4 158	4 524
28 8 0	2 204	3 025	3 390	3 779	4 1 0	4 526
28 900	2 205	3 026	3 391	3 781	4 162	4 528
28 950	2 207	3 028	3 393	3 783	4 1 4	4 531
29 000	2 208	3 030	3 395	3 785	4 167	4 533
29 050	2 210	3 032	3 397	3 787	4 1 9	4 536
29 100	2 211	3 034	3 398	3 789	4 171	4 538
29 1 0	2 212	3 035	3 400	3 791	4 173	4 540
29 200	2 214	3 037	3 402	3 793	4 175	4 543
29 2 0	2 21	3 039	3 404	3 795	4 178	4 545
29 300	2 216	3 041	3 406	3 797	4 180	4 548
29 350	2 218	3 042	3 407	3 799	4 182	4 550
29 400	2 219	3 044	3 409	3 801	4 184	4 552
29 450	2 2 0	3 04	3 411	3 803	4 186	4 55
29 500	2 222	3 048	3 413	3 805	4 189	4 557
29 5 0	2 2 3	3 050	3 41	3 807	4 191	4 560
29 600	2 225	3 051	3 416	3 809	4 193	4 562
29 650	2 226	3 053	3 413	3 811	4 195	4 565
29 700	2 227	3 055	3 420	3 813	4 197	4 567
29 750	2 2 9	3 057	3 42	3 815	4 200	4 5 9
29 800	2 230	3 058	3 423	3 817	4 202	4 572
29 850	2 231	3 060	3 425	3 819	4 204	4 574
29 900	2 233	3 062	3 427	3 821	4 206	4 576
29 950	2 234	3 064	3 429	3 823	4 208	4 579
30 000	2 236	3 066	3 431	3 825	4 211	4 581

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

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

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

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

Type of Court Superior County Liberty

CV 12345 N/A
Court/Civil Action/OSAH Case Number DHS/IV-D Case Number (if applicable)

Check box if DHS is Petitioner

Mother's Full Name Father's Full Name

Mother's name (please print) Father's name (please print)

Custodial Parent / Noncustodial Parent (check one) Custodial Parent / Noncustodial Parent (check one)

N/A Initial Action / Modification Action (check one)
Nonparent Custodian's name if any (please print) Date of Initial Child Support Order _____

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

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

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

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

	(a) Mother	(b) Father	(c) Nonparent Custodian	(d) Combined
Additional Expenses				
5 Monthly Work Related Child Care Costs <i>(If none enter 0)</i>	\$300 00	\$	\$	\$300 00
6 Monthly Health Insurance premium paid for the Children <i>(If none enter 0)</i>	\$100 00	\$	\$	\$100 00
7 Total Monthly Work Related Child Care and Health Insurance Costs <i>(If none enter 0)</i>	\$400 00	\$	\$	\$400 00
8 Parents percentage (%) of Income from Line 2	34%	66%		100%
9 Parents share of Work Related Child Care and Health Insurance Costs <i>Multiply % on Line 8 for each parent by total monthly amount on Line 7</i>	\$136 00	\$264 00		\$400 00
10 Parents' Adjusted Child Support Obligation <i>Each parent's monthly BCSO from Line 4 plus parent's share of work related child care expenses & health insurance costs</i>	\$431 12	\$836 88		
11 Credit for Monthly Amounts parents actually pay or will pay for Work Related Child Care and/or Health Insurance Costs	\$400 00	\$ 0 00		
12 Total Parents Presumptive Child Support Obligation	\$ 31 12	\$836 88		
13 Subtract Social Security offset – <i>If a child receives Title II Social Security benefits (i.e. RSDI SSD for parent's disability retirement) as a dependent on noncustodial parent's account enter monthly amount child receives under that parent's column. If none enter 0.</i>	\$	\$ 0 00		
14 Final monthly child support obligation amount for each parent <i>Only the noncustodial parent(s) will have the duty to pay</i>	\$ 31 12	\$836 88		
The amount on Line 14 is the Final Child Support Amount				
Uninsured Health Expenses				
15 Uninsured Health Expenses – <i>Carry down the percentage from Line 7 or enter a percentage agreed upon by the parties or ordered by the court</i>	50%	50%		

ROME JUDICIAL CIRCUIT DIVORCE FILING FINAL CHECKLIST—WITH Minor Children

- This is a final checklist of all of the required forms to file for a divorce without any minor children in Floyd County Georgia Please feel free to use the column labeled Petitioner below to review your forms and check that you have recorded all the necessary information
- This checklist **MUST** be given to the Floyd County Staff Attorney for final review prior to scheduling a Final Hearing with the Court It is your responsibility to schedule and attend your Final Hearing and ensure that all of your information is accurate to your knowledge

FORM	PETITIONER		FLOYD COUNTY STAFF ATTORNEY	
Domestic Relations Case Filing Form				
Petition for Divorce				
Verification				
Service	Option #1 Acknowledgment + Consent		Option #1 Acknowledgment + Consent	
	Option #2 Acknowledgment + Consent		Option #2 Acknowledgment + Consent	
	Option #3 Sheriff s Service		Option #3 Sheriff's Service	
	Option #4 Service by Publication		Option #4 Service by Publication	
Domestic Relations Financial Affidavit				
Separation and Property Settlement Agreement				
Parenting Plan				
<i>Trans</i> Parenting Seminar	Petitioner		Petitioner	
	Respondent		Respondent	
Child Support EZ Worksheet				
Income Deduction Order				
State of Georgia Form 3907				

*****THIS PAGE IS TO BE COMPLETED BY THE FLOYD COUNTY STAFF ATTORNEY*****

Additional Comments

YOU MAY SCHEDULE YOUR FINAL HEARING

31 Days or more – after service or filing of Acknowledgment and both parties have completed signed and notarized the Written Consent to Trial form

46 Days or more – after personal service of the Petition on the Respondent by the Sheriff

61 Days or more – after date of first publication

IN THE SUPERIOR COURT OF **Floyd** COUNTY
STATE OF GEORGIA

Plaintiff
vs

Defendant

Civil Action
Case Number _____

**FINAL JUDGMENT AND DECREE OF DIVORCE
INCORPORATING SETTLEMENT AGREEMENT**

Upon consideration of this case upon evidence submitted as provided by law it is the judgment of the Court that a total divorce be granted between the parties to this case It is hereby ordered that the marriage contract entered into between the parties is hereby set aside from this date and fully dissolved Plaintiff and Defendant in the future shall be held and considered as separate and distinct persons altogether unconnected by any nuptial union or civil contract whatsoever and both shall have the right to remarry

THE COURT FURTHER ORDERS THAT

1 SETTLEMENT AGREEMENT

The *Settlement Agreement* made between the parties is hereby approved and made a part of this *Final Judgment* as if fully set forth here Both parties are ordered to strictly obey all of its terms

2 RESTORATION OF NAME

The Wife's former name of _____ shall be restored

3 CHILD SUPPORT GUIDELINES

[You must check one of the following boxes]

- The case does not determine or modify child support so OCGA §19-6-15 does not apply
- The *Child Support Addendum Child Support Worksheet* and appropriate schedules have been attached and are hereby made a part of this order

This decree entered on _____ 20____

JUDGE
Floyd County Superior Court