



## **How to File a Request to Modify a Non-Dissolution “FD” Court Order Previously Issued By the Court**

### **Superior Court of New Jersey - Chancery Division - Family Part**

#### **Who Should Use This Packet?**

You can use this packet if your **docket number starts with the letters FD**, and you have an order from the court that you want to change. You can also use this packet if you want to respond to the modification request filed by the other party. Some types of modifications you can request with this packet are:

- Change(s) to an existing Child/Spousal Support Order
- Enforcement of the Current Support Order
- Change of existing Custody/Parenting Time Court Order
- Request to Relocate the Child(ren)/Opposition to Relocation
- Request to have a Bench Warrant/Detainer lifted (Incarcerated Defendants Only)
- Emergent Application (Order to Show Cause) - Additional Forms Required. Must Go to Courthouse to File.

ONLY use this packet if your case begins with letters FD.

## Things to Think About Before You Try to Represent Yourself in Court

### Try to Get a Lawyer

The court system can be confusing and it is a good idea to get a lawyer if you can. If you cannot afford a lawyer, you may contact the legal services program in your county to see if you qualify for free legal services. Their telephone number can be found online or in your local yellow pages under “Legal Aid” or “[Legal Services](#).”

If you do not qualify for free legal services and need help in locating an attorney, you can contact the bar association in your county. The telephone number can also be found in your local yellow pages. Most county bar associations have a [Lawyer Referral Service](#). The county bar association Lawyer Referral Service can supply you with the names of attorneys in your area willing to handle your particular type of case and sometimes consult with you for a reduced fee.

There are a variety of organizations of minority lawyers throughout New Jersey, as well as organizations of lawyers who handle specialized types of cases. Ask the Family court staff in your county for a list of lawyer referral services that include these organizations.

### What You Should Expect If You Represent Yourself

While you have the right to represent yourself in court, you should not expect special treatment, help, or attention from the court. The following is a list of things court staff can and cannot do for you.

- We *can* explain and answer questions about how the court works.
- We *can* tell you what the requirements are to have your case considered by the court.
- We *can* give you some information from your case file.

- We *can* provide you with samples of court forms that are available.
- We *can* provide you with guidance on how to fill out forms.
- We *can* usually answer questions about court deadlines.
- We *cannot* give you legal advice. Only your lawyer can give you legal advice.
- We *cannot* give you an opinion about what will happen if you bring your case to court.
- We *cannot* recommend a lawyer, but we can provide you with the telephone number of a local lawyer referral service.
- We *cannot* talk to the judge for you about what will happen in your case.
- We *cannot* let you talk to the judge outside of court.
- We *cannot* change an order issued by a judge.

### Keep Copies of All Papers

Make and keep copies for yourself, of any signed orders, written agreements, Case Information Statements, and other important papers that relate to your case.

### These Papers Are for Filing an Application to Modify a Court Order in a “FD” case

The word *application* used in this packet means a written request in which you ask the court to change or enforce an order it has already made. The court will change an order only if important facts or circumstances have changed from the time the order was issued. This is different from an *appeal*.

### **Notice to Appear**

The court will notice the plaintiff, defendant, listed interested parties, and any attorney connected to your case, through the normal court noticing procedures. You must provide the court with the most current address of the other party that you know and the name of the attorney (if you know it) when you file this modification with the court. All papers you send will be shared with the other party with the notice to appear, unless the court rule prohibits this information from being shared. The plaintiff, defendant, interested parties, and attorneys (if known) will receive a notice to appear when the case is scheduled for court. Your appearance is **mandatory**.

### **If You Want to File an Appeal, Not an Application**

An appeal is a written request asking a higher court to look at the decision of the judge and change that judge's decision. You must make that written request for an appeal within 45 days after the judge decided the case and signed a judgment in the Superior Court.

If you want to file an appeal of a court order, **do not** use this packet of materials. Instead you should contact the Appellate Division in writing or by phone at:

Appellate Division, Superior Court  
Hughes Justice Complex  
P.O. Box 006,  
Trenton, NJ 08625-0006

Their telephone number is (609) 292-4822. The Appellate Division staff will provide you with information on how to file an appeal.

### **“My case is an emergency” (Emergent Application Order to Show Cause)**

An emergent hearing in family court is designed to protect children from substantial and irreparable harm if someone is not restrained for doing something right now. **You must file for an emergent hearing at the courthouse. You cannot file for an emergent hearing through the mail.** Only a judge can determine if your case will qualify as an emergency. If you are denied an emergency hearing, your case may continue under the normal case process.

### **Court Terms Used in FD**

This packet contains a list of frequently used terms the court uses in processing FD cases. They may help you understand the FD application process and how the court handles an FD case.

### **Where to Mail or Bring Your Papers**

You should mail or bring your completed packet to the court house where the child of spouse lives. **You must include a \$25.00 filing fee with the completed packet.** When mailing, make sure you specify the “Family Division” and “Non-Dissolution Intake” in your address to insure your papers arrive at the correct department in the court.

### **Sample Address**

(Name of County) Courthouse  
Family Division  
Non-Dissolution Intake  
1234 Street  
PO Box#  
City, State, Zip code

All court house addresses can be found on [njcourts.gov](http://njcourts.gov)

## Other Papers That You May Have to Complete Depending on Your Case

Each case has unique circumstances that may require different information. Read the next section carefully and include any documents that will be needed for your particular case. Failure to complete certain required documents may result in your application being returned as “deficient” which will delay you getting your day in court.

### [Confidential Litigant Information Sheet](#) (included in this kit)

**This form must be completed by the person filing this application to modify a court order. Failure to do so will result in your papers being returned to you marked “deficient”. This will cause a delay in your case being scheduled for court.**

You must complete the entire form whenever you request to reopen your case and submit it with your papers to the court. If something does not apply to you, put “n/a”. Do not leave any blank spaces. This form is confidential and will **not** be shared with the other party. Each party is required to complete his/her own Confidential Litigant Information Sheet and file it with the court.

### [Federal Child Support Services Application](#) (IV-D Child Support Program)

You should complete this application if you are applying to establish paternity or child support. Applying for support services under the federal child support program insures your case will be enforced through the court’s Probation Division. You may complete this application on line and it will be forwarded to the court through the internet. Follow the instructions on the [NJchildsupport.org](http://NJchildsupport.org) website. This application is in addition to the other court papers you must file to establish your court case.

### [Summary Form for Financial Information](#)

This form must be completed if you are requesting establish or modify child support in an FD case.

You must complete this form if you are filing to establish child support. You must complete the entire form. If something does not apply to you put “n/a”. Do not leave any blank spaces. This completed form must be included in your packet submitted to the court. This form will be shared with the other party pursuant court rule (R. 5:5-3.). The other party must complete this same form and file it with the court. The court will share this information with the filing party at the court hearing.

### [Family Case Information Statement](#) (CIS)

**This form must be completed only if you are married but separated and want to establish or modify spousal support. Spousal support can only be established or modified as a FD case when there is no active divorce case.**

Pursuant to Court Rule R. 5:5-2 a spousal support modification requires the parties to submit a Case Information Statement to the court. You must complete the entire form. If something does not apply to you put “n/a”. Do not leave any blank spaces. This completed form must be included in your packet submitted to the court. **This form will be shared with the other party.** The other party must complete this same form, file it with the court and send a copy to you. The court will provide instructions to the other party about sharing this information with the filing party prior to the court hearing. This document

is confidential pursuant to court rule R. 1:38-3 and is not available for review by any other people besides the two parties involved in the case, their attorneys, and the court.

### **Certification of Paternity**

This form must be completed if you are the unmarried biological mother of a child and you are seeking to establish paternity or child support for the first time and legal paternity of the father that has not been established by a Certificate of Parentage (COP) or a previous court order. This form must also be completed by the biological father filing for legal paternity or the legal caretaker of the child who wants child support, but the legal father has not been identified by the court. Only answer the questions you have personal knowledge about. Put “n/a” if the questions don’t apply to you. This form will be shared with the alleged biological father/mother when they receive the notice to appear.

### **Form for additional information for the Court to consider** (included in this kit)

Use this form if you need additional space to explain to the court what you want the court to consider or your position on a particular issue stated in the complaint. Type or write legibly and be as specific as possible.

## Court Terms Used in FD Cases

**Arrears:** *Arrears* are unpaid or overdue child support, alimony, or spousal support payments.

**Application:** An *application* is a written request in which you ask the court to issue an order or to change an order that has already been issued.

**Bench Warrant:** A *bench warrant* is an order from the court giving legal authority to law enforcement to arrest a person for failure to appear for a court hearing or failure to comply with a court order.

**Certification:** A *certification* is a written statement made to the court when you file papers with the court, swearing that the information contained in the filed papers is true.

**Child Support Number** (also referred to as “CS Number”): The *Child Support Number* is the identifying number assigned to your child, spousal, or alimony support case.

**Complaint:** A *complaint* is a formal document filed in court that starts a case. It typically includes the names of the parties and the issues you are asking the court to decide.

**Court Order:** A *court order* is the written decision issued by a court of law. For example, a child support court order sets forth how often, how much, and what kind of support is to be paid.

**Docket Number:** The *docket number* is the identifying number assigned to every case filed in the court.

**Exhibits:** *Exhibits* are written documents you provide to the court to support what you want the court to decide.

**FD:** The letters the court uses to identify a Non-Dissolution case that involves parents who are not legally married or other adults filing for court relief on behalf of minor children. FD also includes married people who separate but need financial support.

**File:** To *file* means to give the appropriate forms to the court to begin the court’s consideration of your request.

**Income Withholding/Wage Garnishment:** *Income Withholding/Wage Garnishment* is a process where automatic deductions are made from wages or other income to pay your support obligation. Income withholding has been mandatory since the enactment of the Family Support Act of 1988.

**New Jersey Child Support Guidelines:** Both parents are responsible for the financial and emotional support of their children. New Jersey has developed a standard method for calculating child support based on the income of both parents and other factors. The full set of *NJ Child Support Guidelines* is contained in Rule 5:6A of the New Jersey Court Rules.

**NJKiDS** (New Jersey Kids Deserve Support): *NJKiDS* is the New Jersey Child Support automated computer system that tracks child support accounts.

**Obligor/Payor:** An *obligor/payor* is the person ordered by the court to pay support, also known as the non-custodial parent (NCP).

**Obligee/Payee:** An *obligee/payee* is the person, agency, or institution who receives support, also known as the custodial parent (CP).

**Party:** A *party* is a person, business, or governmental agency involved in a court action.

**Petitioner:** *Petitioner* is another name for the person starting the court action by filing the appropriate papers the court will consider.

**Respondent:** *Respondent* is another name for the person who is named as the other party in the court action filed by the petitioner. This person can answer the petitioner by filing a cross application or written response with the court.

**Relief:** To ask for *relief* is to ask the court to grant something such as custody, parenting time, or support.

**Support Obligation:** *Support Obligation* is the amount of support that the court orders the obligor to pay. The court order includes how much and how often support has to be paid (i.e., per week, per month, bi-weekly, etc.).

**Support Enforcement:** The Probation Division is required to enforce court orders that call for the payment of child support, health care coverage, and/or spousal support/alimony. If support is not being paid timely, Probation Support Enforcement has many state and federal tools available to enforce child support orders. These can include, but are not limited to:

- Income withholding
- Court hearing
- Bench warrant
- Tax offset – federal and state
- Judgment (liens attached to property & assets)
- Credit bureau notification
- Financial Institution Data Match (FIDM) – seizure of bank accounts
- Child Support Lien Network (CSLN) – seizure of proceeds from law suits
- Passport denial
- License suspension
- Lottery interception

## **Instructions for Completing the Application/Cross Application to Modify a Court Order**

**IMPORTANT NOTICE:** Look over the entire form and check only the reliefs you are seeking. You may seek more than one relief, but only the ones you check will be considered on the day of your hearing.

- A.** Copy the case title exactly as it appears in the original case you are filing about. You can find the correct case title at the top of your last court order.
- B.** Type or print the names of the parties in the correct order on the “Plaintiff” and “Defendant” lines.
- C.** Type or print the county in which you are filing the application.
- D.** Type or print the docket number that has been issued in your case. You can find that number on the previous court order you received.
- E.** Type or print the CS number that has been issued in your case. You can find that number on the previous court order you received.
- F.** Type or print your name on the line that says “I”. This tells the court who is filing the application to modify the existing court order.
- G.** Select the appropriate checkbox as to whether you are the plaintiff or defendant filing this application.
- H.** Put the plaintiff’s address on the lines provided. Don’t forget the apartment number or floor if it applies.
- I.** Put the defendant’s address on the lines provided. Don’t forget the apartment number or floor if it applies.
- J.** List all of the children who are listed on the support order requesting to be changed. Do not list children that are not supported by the order you want changed.
- K.** List other interested parties that should be noticed to appear in court if it applies to your case.
- 1. If you want to change an existing child or spousal support order, fill in the amount of money the court ordered you to pay or are receiving and the how it is paid (weekly, bi monthly, etc.)**
  - a. Child support (first line)
  - b. Spousal support (second line)

If you are receiving the money put your name on the line “Name of the person receiving spousal support” and date of birth.

Select the appropriate checkbox for what you are seeking. Increase/decrease in child support or Increase/decrease in spousal support.

Select the appropriate checkbox as to whether or not you want to terminate your child support order.



If you selected **to terminate** your child support order, select the reason that applies as to why the child support should be terminated.

If you selected **not to terminate** your child support order, select the reason that applies as to why you are opposed to the application to terminate child support.

Check this box if you want to change the way you receive your money. It will be changed from direct payment to you to payment through Probation.

Check this box if you want the court to end its involvement in the way you receive your support money. In the future, support payments will be made directly between you and the other person. There will be no automatic enforcement activities if the person does not pay.

**2. Enforcement of a Support Order**

Check this box if you are requesting enforcement of a current support order because someone is not paying as they have been ordered.

Check this box if you have already requested enforcement of your child support order through Probation.

**Note: If your child support order is payable through Probation, you should go there first for enforcement.**

**3. Order Change of existing Custody/Parenting Time Court Order**

Check this box if you wish to change the custody or parenting time arrangements in the current order. Write in your own words why you want to change the order in the space provided.

**4. Request to Relocate the Children/Opposition to Relocation**

Select the appropriate checkbox if you are applying to relocate the children out-of-state. Put in where you want to move and the reason you want to move.

Select the appropriate checkbox if you are opposed to the children moving out-of-state and explain why you are opposed in the space provided.

**5. Request to have a Bench Warrant/Detainer Lifted**

Check this box **only** if you are incarcerated and you want a detainer or bench warrant lifted so that you may apply for a work release or half way house program. You must provide the name of the facility where you are now and your inmate number.

**6. The relief I am seeking is not listed above.**

If the relief you are seeking is not contained in any of the numbered items in the form, write in your own words the relief you are seeking for the court. Be as specific as possible.

**7. What else does the court need to know?**

In this space write whatever you feel the court should know to support your request. Write the date of the court order you want changed; if you have it, make a copy and attached to the application.

Court Appearance: Read the information carefully. Your appearance is mandatory even if you have an attorney. You may file a written response to this application if you are the non-moving party. It must be filed with the court and served on the filing party at least **15** days prior to your hearing date. It must not exceed the page numbers listed.

Select the appropriate checkbox regarding your knowledge of DCP&P involvement with the children.

Select the appropriate checkbox about your knowledge regarding the children and public assistance.

Check this box **only** if you are currently incarcerated and you are filing to have your appearance waived.

Read the certification and sign and date the application. Select the appropriate checkbox regarding whether you are the plaintiff, plaintiff/cross applicant, defendant, or defendant/cross applicant.

**Mail or deliver the completed application with a \$25.00 filing fee to the correct court house.**

**SUPERIOR COURT OF NEW JERSEY  
CHANCERY DIVISION - FAMILY PART  
COUNTY: \_\_\_\_\_**

\_\_\_\_\_  
**Plaintiff**

vs.

\_\_\_\_\_  
**Defendant**

**DOCKET NO.: FD - \_\_\_\_\_**

**CS NO: \_\_\_\_\_**

**CIVIL ACTION  
Application for Modification  
of Court Order**

I, \_\_\_\_\_ of full age, hereby certify the following in support of  
this Application/Cross Application to modify the court order of \_\_\_\_\_ .  
date (if known)

I am the  Plaintiff  Defendant in the above-captioned matter.

Plaintiff resides at: Address: \_\_\_\_\_  
City/Town \_\_\_\_\_  
County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Defendant resides at: Address: \_\_\_\_\_  
City/Town \_\_\_\_\_  
County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Child \_\_\_\_\_ DOB \_\_\_\_\_  
Child \_\_\_\_\_ DOB \_\_\_\_\_  
Child \_\_\_\_\_ DOB \_\_\_\_\_  
Child \_\_\_\_\_ DOB \_\_\_\_\_

Other interested parties' name(s) and address(es):

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

**1. Establish or Change to an Existing Child/Spousal Support Order**

(Note: Continue only if you have an established FD Order.)

The current Child Support Court Order is: \$ \_\_\_\_\_ per \_\_\_\_\_  
(Weekly, bi-monthly, etc.)

The current Spousal Support Court Order is \$ \_\_\_\_\_ per \_\_\_\_\_ for support of:  
(Weekly, bi-monthly, etc.)

Name of person receiving spousal support:

\_\_\_\_\_ DOB \_\_\_\_\_

I am seeking an  **increase**  **decrease** in **child** support payments.  
Pursuant to R. 5:5-3, you are required to complete a Financial Statement for Summary Support Actions to serve on the other party, and supply the court with either your most recent Federal income tax return, and your three most recent pay stubs at the hearing.  
Reason for seeking the change in child support \_\_\_\_\_  
\_\_\_\_\_

I am seeking an  **increase**  **decrease** in **spousal** support payments.  
Pursuant to R. 5:5-2, you must complete, supply the court and other party, with a Case Information Statement ten (10) days before the hearing.  
Reason for seeking the change in spousal support \_\_\_\_\_  
\_\_\_\_\_

I am requesting the Court to  **terminate**  **not terminate** child support for:  
Name \_\_\_\_\_ DOB \_\_\_\_\_

- My child turned 18 years of age on \_\_\_\_\_.
- To the best of my knowledge, my child **is not** physically or mentally disabled.
- My child **is** disabled. Describe disability:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- My child is **not** attending high school or any other special education programs.
- My child **is** attending high school or special program. Provide the name of school and most recent date(s) attended:  
\_\_\_\_\_  
\_\_\_\_\_

- My child **is** not married.
- If married, date of marriage: \_\_\_\_\_.
- My child is **not** attending college or any other post-secondary education programs.
- My child **is** attending college or a post-secondary education program. Provide the name of the school and most recent date(s) attended:  
\_\_\_\_\_  
\_\_\_\_\_

- My child is **not** in the military.
- If in the military, date enrolled \_\_\_\_\_ and branch \_\_\_\_\_.

- I am requesting that child/spousal support be made payable through the Probation Division.
- I am requesting that child/spousal support be paid directly to me without court involvement.

**2. Enforcement of the Current Support Order (check all that apply)**

- I am requesting enforcement of the current support court order of \_\_\_\_\_. Attach a copy of  
date (if known)  
the order you want enforced.
- I have already requested enforcement through Probation.

**3. Establish or Change of Existing Custody/Parenting Time Court Order**

- I am requesting to change the custody/parenting time terms of the current court order. Explain the changes you are requesting.

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**4. Request To Relocate The Child(ren)/Opposition To Relocation**

- I am applying to relocate the child(ren) listed above. I believe this move is in the best interest of the child(ren).  
I want to relocate the child(ren) by \_\_\_\_\_.  
date

New location:

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Reason for relocation:

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Attached is the additional information form.

- I am opposed to the relocation of the children listed above. I believe this move is not in the best interest of the child(ren). Explain:

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Attached is the additional information form.

**5. Request to have a Bench Warrant/Detainer lifted (Incarcerated Defendants Only)**

I am currently incarcerated making application to have a child support bench warrant/detainer lifted so that I may participate in a rehabilitation program. I understand that I must report to the court 30 days after my release.  
Facility \_\_\_\_\_ Inmate # \_\_\_\_\_

**6. The relief I am seeking is not listed above.**

I am seeking the following from the court:

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**7. What else does the court need to know pertaining to this Application or Cross Application to modify the court order of \_\_\_\_\_?**  
date (if known)

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## Court Appearance Information

**PLEASE TAKE NOTICE** a hearing will be held, in the Superior Court of New Jersey, Family Part, \_\_\_\_\_ COUNTY, based upon the attached Application and Certification, to modify an order previously issued by the court.

Your appearance is mandatory. You may bring an attorney, although an attorney is not required. If you require assistance in selecting an attorney, you may contact your County Bar Association. If you cannot afford an attorney, you may contact Legal Services of New Jersey at [www.lsnj.org](http://www.lsnj.org). You may file a written response by certification opposing this application/cross application. Any written response you send to the Court must be sent to the other party. Your written response must be filed with the court and served on the other party at **least 15** days prior to the hearing date. If you fail to appear, an Order granting the relief requested by the filing party may be granted although your written response, if filed, will be considered. If you are the filer of this application you may file a certification in support of your application which shall not exceed **fifteen (15)** pages. If you are the person served with this application to modify, you may file a certification in opposition or a certification in support of a cross application which shall not exceed **twenty-five (25)** pages. Any further written responses to the above filed certifications shall not exceed **ten (10)** pages. Forms are available at [njcourts.gov](http://njcourts.gov).

To my knowledge, DCP&P (DYFS)  is  is not actively involved with the child(ren).

To my knowledge, the family  is  is not receiving public assistance.

I am presently incarcerated and would like to appear; however I understand that unless a judge orders my appearance through a court order to the facility of my incarceration, my request will be decided on the papers that I filed.

I/We certify that **all** the statements made above are true. I am aware that if **any** of the statements made by me/us are willfully false, I/we am subject to punishment.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Plaintiff  
 Plaintiff / Cross Applicant

Defendant  
 Defendant / Cross Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Co-Plaintiff  
 Co-Plaintiff / Co-Cross Applicant

Co-Defendant  
 Co-Defendant / Co-Cross Applicant





**New Jersey Judiciary**  
**Confidential Litigant Information Sheet (R. 5:4-2(g))**

To assure accuracy of court records - To be filled out by Plaintiff, or Defendant, or Attorney  
Collection of the following information is pursuant to *N.J.S.A. 2A:17-56.60* and *R. 5:7-4*.

***Confidentiality of this information must be maintained***

Please complete the entire form, leaving no blank spaces. If something does not apply to you, enter "N/A". This form is confidential and will not be shared with the other party.

Docket Number:	CS Number:	Do you have an active Domestic Violence Order with the other party in this case? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Plaintiff					Defendant						
<b>Name (last, first, middle initial)</b>					<b>Name (last, first, middle initial)</b>						
Social Security Number	Date of Birth	Place of Birth			Social Security Number	Date of Birth	Place of Birth				
Address: Street					Address: Street						
City			State	Zip	City			State	Zip		
Plaintiff Telephone Number		Employer Telephone Number			Defendant Telephone Number		Employer Telephone Number				
Employer Name (or other income source)					Employer Name (or other income source)						
Employer Address: Street					Employer Address: Street						
City			State	Zip	City			State	Zip		
Professional, Occupational, Recreational Licenses (include types and license numbers)					Professional, Occupational, Recreational Licenses (include types and license numbers)						
Driver's License Number		State of Issuance			Driver's License Number		State of Issuance				
Sex	Race/Ethnicity	Height	Weight	Eyes	Hair	Sex	Race/Ethnicity	Height	Weight	Eyes	Hair
Auto: License Plate	State	Make	Model	Year		Auto: License Plate	State	Make	Model	Year	
Attorney Name					Attorney Name						
Attorney Address: Street					Attorney Address: Street						
City			State	Zip	City			State	Zip		

**Children Information**

Name (last, first, middle initial)	Date of Birth	Race	Sex	Social Security Number	Place of Birth
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

Health Coverage for Children - available through parent filling out this form ( Plaintiff /  Defendant)

Health Care Provider: _____	Policy Number: _____	Group Number: _____
Health Care Provider: _____	Policy Number: _____	Group Number: _____
Health Care Provider: _____	Policy Number: _____	Group Number: _____

I certify that the foregoing statements made by me are true to the best of my knowledge. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature