MOTHER'S PATERNITY FORMS

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(These forms may be used by a mother asking for orders of paternity, custody and support.)

Introduction

These forms are available to you at no cost on the Representing Yourself website. Some courts may provide paper copies of these forms for a fee. Only a lawyer may charge you a fee for preparing these forms. You are required to complete the Litigant Awareness Program on selfrepresent.mo.gov before preparing these forms. Your local court may also have other educational programs available to help you in the preparation of these forms.

General Information about Forms

The forms must be downloaded with Adobe Acrobat Reader or Adobe Acrobat DC to save the information you enter. Adobe Acrobat Reader DC is available for free from the Adobe website. Save the forms before you begin entering information. After you have filled in the forms on your computer, save the information and print the forms to file them with the court.

If you are working on a public computer, **don't save your personal information on the public computer**. Use a USB memory stick or other removable device.

The forms listed below are interactive. If you fill in the forms on your computer, some of the information you enter on one line may automatically transfer to another line. The forms also contain bookmarks that help you to navigate through the forms. In addition, there are "links" embedded in the forms. These links are usually blue and can take you to a related location in the forms or to a related website.

Most documents that are filed with the court can be seen by anyone online. Some information on documents is considered confidential and **must** be removed or hidden.

▶ If you are filing a document with the court YOU must be aware of what information is considered confidential.

What is confidential information?

Confidential information often used in family court matters can include information listed in Court Operating Rule 2.02(c). This is not a complete list. If you are filing attachments to any forms from this website, confidential information might be on those documents also.

► YOU are responsible for <u>redacting</u> (removing) information you are filing with the court that is confidential.

How do I remove information?

Redact means to remove or hide information listed on a document before you file it with the court. Below are two ways you can redact confidential information:

Option One

- 1) Fill out your documents completely (including confidential information).
- 2) Make a copy of all documents that have confidential information.
- 3) Go through the **copied** documents and black out or white out any confidential information.

Option Two

1) Fill out your documents using generic descriptions for any confidential information you do not want to provide. For example, use initials or "Child One" instead of the full name of a child.

If you remove any information, you are required to show the court what you removed when you complete the *Confidential Case Filing Information Sheet* (FI10). Do not redact the *Confidential Case Filing Information Sheet* (FI10) or the *Redaction Certification* form (GN320).

▶ YOU must confirm you have followed the rules for redaction.

How do I do this?

After you have done option one or two above, confirm you have followed the rules by filling out the *Redaction Certification* form (GN320). You have to fill out this form even if you did not remove any information.

- ▶ YOU must file with the court all unredacted <u>and</u> redacted documents and the *Redaction Certification* form (GN320).
- ▶ IF you think SOMEONE HAS NOT CORRECTLY REDACTED INFORMATION, file the *Motion to Correct Redaction* form (GN325) to bring it to the attention of the court. The form is available from the Home page of this website under Approved Court Forms.

You are the Petitioner. The other parties to your case are Respondents.

What do I need to do?

- 1. <u>Complete</u> the Litigant Awareness Program on selfrepresent.mo.gov. Upon completion, print your Certificate of completion of the Litigant Awareness Program.
- 2. Completely and fully fill out the following forms.
 - 1. Confidential Case Filing Information Sheet (Form FI-10)

This form is required by most courts to enter the information about your case into the court's computer system.

2. Redaction Certification (Form GN320)

The filer certifies that all documents in this submission for filing with the court comply with all redaction requirements of Court Operating Rule 2.

- 3. Mother's Petition for Declaration of Paternity, Custody and Support (Form CAFC302)
- 4. Petition, Consent and Order for Appointment as Next Friend in Paternity Action (Form CAFC751)

The court must appoint someone to represent the interests of the child(ren) in a paternity action. That person is called the "Next Friend." This person may be the mother, father or another person with legal or physical custody of the child(ren). If your child(ren) are 14 or older, they must sign this form consenting to the appointment of their Next Friend.

5. Parenting Plan (Form CAFC501)

There are two parts to this form, Part A and Part B. Part A deals with custody issues of the children, and Part B deals with support issues of the children. You must complete both parts of the *Parenting Plan*.

If you have different custody or support arrangements for some of the children, you must complete a separate *Parenting Plan* for each set of children.

If the parents agree on the *Parenting Plan*, you may both sign and file one plan. This *Parenting Plan* can then be introduced into evidence at your hearing for the court to approve.

6. Statement of Income and Expenses (For use in Paternity Action) (Form CAFC252)
This form requires you to list income and expenses for both you and the other parent.

- 7. Statement of Property and Debt (For use in Paternity Action) (Form CAFC242) This form requires you to list your property and debt.
- 8. Answer to Petition for Declaration of Paternity, Custody and Support (Form CAFC315-R)
 The Respondents may complete this form in response to your petition. A respondent may file this answer with the court if they do not want to be personally served with your petition. By signing this form, the Respondent is allowing the court to decide your case. The Respondent may also use this form to disagree with your statements on your forms.

9. Notice of Hearing (Form CAFC721)

In Missouri, the circuit court keeps its schedule of hearings, called the docket. Some circuits require a pretrial hearing, case management, or settlement conference before the final hearing. In some circuits, a litigant will not be placed on the docket automatically, but will need to request a hearing to get on the docket. You should check with your local court to determine how your court schedules its docket.

10. Judgment of Paternity (Form CAFC370)

This is the proposed judgment you will offer to the court. Different courts handle the preparation of the judgment in different ways. In some courts, the judge will direct you to prepare a judgment, and in other courts, the judge will prepare the judgment.

3. <u>File</u> the following signed forms with the court. **As shown below, you may need to file more than one copy of certain forms.**

	Original	Copy of Original for Other Party	Redacted Version (if applicable)
Confidential Case Filing Information Sheet	Х		
Redaction Certification	Х	Х	
Mother's Petition for Declaration of Paternity,	Х	Х	X
Custody and Support			
Petition, Consent and Order for Appointment	Х	Х	X
as Next Friend in Paternity Action			
Parenting Plan, Part A and B	Х	Х	X
Statement of Income and Expenses (For use	Х	Х	X
in Paternity Action)			
Statement of Property and Debt (For use in	Х	Х	X
Paternity Action)			
Family Court Cover Sheet, if it applies	Х	Х	Х
Notice of Hearing	Х	Х	Х
Judgment of Paternity	Х	Х	Х
Certificate of completion of Litigant Awareness	Х		
Program			

- 4. Each of the parties listed in question 6 of *Mother's Petition for Declaration of Paternity, Custody and Support* is a Respondent.
- 5. Unless a Respondent files an *Answer to Petition for Declaration of Paternity, Custody and Support* before being served, you must file a copy of all of the forms filed for each Respondent. The copies will be used to personally serve the Respondents with the forms.
- 6. If a Respondent files an *Answer to Petition for Declaration of Paternity, Custody and Support* before being served, you still must provide that Respondent with a copy of all the forms, except the Confidential Case Filing Information Sheet.

- 7. You should also keep a copy of these forms for your records.
- 8. You must pay the required filing fee. Check with your local court to determine amounts due.
- 9. You should check with your local court to see if additional forms are required.



FOR COURT USE ONLY

Confidential Case Filing Information Sheet – Domestic Relations Cases Required at Time of Filing Petition and with an Answer

Filing Date: County/City of St. Louis:
Style of Case:
i.e., Petitioner v. Respondent.)
Case Type Code: Case Type Description:
Petitioner Information:
Party Type Code and Description: (Select one) A list of party types can be found at www.courts.mo.gov on the Court Forms/Filing Information page.
PETP Party Type Description: Petitioner Acting Pro Se (with no attorney)
PET Party Type Description: Petitioner (with attorney)
Party Type Description:
Name: (Last)(First)
(Middle) (Suffix)
Address:
City: State: Zip:
Contact Telephone Number:
Email Address:
Date of Birth: Sex: Male Female SSN:
Race and Ethnicity: (Select one or more)
Race & Ethnicity Source: (Select one)
Race & Ethnicity is self-identified observed/perceived. (Select one)
Attorney Name (if represented by counsel):
Bar ID: Party Type Code:

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Respondent Information:

Party Type Code and Description: (Sel A list of party types can be found at ww	lect one) ww.courts.mo.gov on the Court Forms/Filing Information p	age.
_	Respondent Acting Pro Se (with no attorney)	
RES Party Type Description:	Respondent (with attorney)	
Party Type Description: _		
Name: (Last)	(First)	
(Middle)	(Suffix)	
Address:		
City:	State: Zip:	
Email Address:		
Date of Birth:	Sex: Male Female SSN:	
☐ Black or African American ☐ N	Native Hawaiian or other Pacific Islander White	Asian (nown
Race & Ethnicity Source: (Select one) Law Enforcement Jail Another State Agency Drive	<u> </u>	
Race & Ethnicity is Self-identified	observed/perceived. (Select one)	
Attorney Name (if represented by coun	nsel):	
Bar ID: Party Type	e Code:	
Additional Parties:		
Party Type Code: Party T	ype Description:	
Name: (Last)	(First)	
	(Suffix)	
Address:		
	State: Zip:	
Email Address:		
Date of Birth:	Sex: Male Female SSN:	

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Check if more than four parties and attach additional sheet.

Bar ID: Party Type Code:

	Case Number (Fo	r Court Use Only)	_
Employer Information:			
Petitioner Employer Name:			_
Employer Address:			
City:			_
Contact Telephone Number:			_
Email Address:			_
Respondent Employer Name:			
Employer Address:			
City:			_
Contact Telephone Number:			_
Email Address:			_
The following information regarding the action of this case.	g children is required. Complete	this section for any child subject to)
Children:			
Name:			_
Date of Birth:		SSN:	_
Name:			
Date of Birth:		SSN:	_
Name:			
Date of Birth:	Sex: Male Female	SSN:	-
Bate of Birati.	COX. Wale Formale		_
Name:			
Date of Birth:	Sex: Male Female	SSN:	_
Name:			_
Date of Birth:	Sex: Male Female	SSN:	_
Name:			_
Date of Birth:	Sex: Male Female	SSN:	_
Name:			_
Date of Birth:	Sex: Male Female	SSN:	_

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Name:						
Date of	Birth:	Sex: Male Female S	SN:			
Name:						
Date of	Birth:	Sex: Male Female	SSN:			
Name:						
Date of	Birth:	Sex: Male Female	SSN:			
☐ Che	eck if more than ten childre	en and attach additional sheet				
Instructions						
✓ Complete this form for all parties known at the time of filing. Provide the most appropriate Case Type and Party Type codes and descriptions. (Found on the Case Types List at www.courts.mo.gov on the Court Forms/Filing Information page.)						
✓ If ac	✓ If additional space is needed, complete additional Confidential Case Filing Information Sheets.					
NOTE:	RSMo. This is a confider This information is used cases deemed public un	Security Number (SSN) is required ntial document due to the SSN and to open a case in the courts case mader Missouri statutes can be access, and confidential addresses are NC	possible confidential addresses. nanagement system. While sed through Case.net, the day			
Submit	ted bv:	Bar ID (required	if attornev):			
		State				
		Email Address:				
IMPORTANT: It is the parties' responsibility to keep the court informed of any change of address or employment.						

Case Number (For Court Use Only) _

Instructions to Clerk

This document must be saved in the case management system with a document security level of 6 making this a sealed document.

IN THE	
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IN THE JUDICIAL CIRCUIT, COUNTY, MISSOURI

IN THE JUDICIAL CIRCU		VIII, MIISSOURI				
Name:	Case Number:					
Address:	Case Type:					
	Style of Case:					
Document Filed:	_					
		(Date File Stamp)				
Redaction Certification						
The filer certifies that all documents in this subrrequirements of Rules 19.10, 55.025, or 84.015.	nission for filing with the court comply with all	redaction				

COR 2.02

The responsibility for redacting confidential information rests solely with the counsel, parties, or any other person filing the document. Courts will not review each case document to ensure compliance and will not refuse to accept or file a document on that basis.

On and after the Expanded Remote Access Implementation Date: July 1, 2023

- 1. All redactions shall be done in a manner that makes it clear that information has been redacted. If necessary to reference the redacted information in a redacted document, filers shall use generic descriptors.
- 2. When a filer redacts information from a document offered for filing in any court, the filer also must file a confidential redacted information filing sheet that either:
 - has the unredacted version of the document attached; or
 - sets out the information redacted from the document with an explanation referencing where the information was redacted from in the document or the generic descriptors used in the document to reference the redacted information.
- 3. All filers shall affirmatively certify compliance with the redaction requirements in Rules 19.10, 55.025, and 84.015 when a document is filed. This certification shall be accomplished through an automated process implemented in the electronic filing system for its authorized users or, for filers who are not authorized users of the electronic filing system, by a paper form attached to the document or on the document itself.
- 4. When a motion is filed alleging a document filed with the court contains insufficiently redacted confidential information, the clerk shall raise the document's security level to a confidential setting. The court shall dispose of the motion within 30 days. If the court determines the document is sufficiently redacted, the clerk shall reset the document's security level to allow for proper public access.

I HAVE READ AND UNDERSTAND THE ABOVE.	
Date	Filer's Signature

		\			
(First Name) (Mir Petitioner, (Enter your full	ddle Name) (Last Name) legal name above)	(Jr./Sr./III)			
-and-					N
The MINOR CHILD(REN in question 1 of the <i>Motle Custody and Support</i> , By Next Friend,	•	tion of Paternity,	Case Number _ (Will be assi	igned when d	case is filed)
v.			,0		
Respondents shall be liste	d in the order used in ques	tion 6 of this <i>Petition</i> .			
,	ddle Name) (Last Name) I legal name of Respondent 1	above)	Division		
-and-		5	Number	igned when d	case is filed)
,	ddle Name) (Last Name) legal name of Respondent 2	(Jr./Sr./III)			
-and-	regar name of Nespondent 2				
· ·	ddle Name) (Last Name) I legal name of Respondent 3	(Jr./Sr./III) above)			
	BLL				
Mother's Pet	tition for Declarati	on of Paternity,	Custody a	and Sup	port
	74	-	-	-	
The Parties					
must file a separate Mot	t this case you will alway	ation of Paternity, Cus	tody and Sup	port for ea	ch father of
_	etermine paternity for the	following child(ren):			
a (First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)	(Child's Age)

(County where court is located. City of Saint Louis is considered a county.)

(Middle Name)

(Last Name)

(First Name)

IN THE CIRCUIT COURT OF

(Child's Age)

(Jr./Sr./III)

, MISSOURI

	C.							
	(First Name)	(Middle I	Vame)	(Last Nam	e)		(Jr./Sr./III)	(Child's Age)
	d(First Name)	(Middle I	Vame)	(Last Nam	e)		(Jr./Sr./III)	(Child's Age)
	e(First Name)	(Middle I	Vame)	(Last Nam	e)		(Jr./Sr./III)	(Child's Age)
	f(First Name)	(Middle I	Vame)	(Last Nam	e)		(Jr./Sr./III)	(Child's Age)
2.	I ask this court to	find			(i della Niana)	<u> </u>		(15/05/111)
	is the father of th	(First Name) e child(ren) listed in	this Pet	•	⁄iiddle Name)	(Last Name)		(Jr./Sr./III)
3.	Petition? (Check	d to a man at the tim	•	ecame pi	egnant with	any child(re	n) listed in	this
	☐ Yes ☐ No					18		
	If yes, who were		Name)		(Middle Name)	(Last Name	·)	(Jr./Sr./III)
4.	Were you marrie one of the two bo	d to a man at the time time time times.	ne any o	of the child	Iren listed in	this <i>Petitior</i>	were born	า? (Check
	If yes, who were		Name)		(Middle Name)	(Loot Name		— // In /Cn ////
		(First	ivarne)	0	(Middle Name)	(Last Name	")	(Jr./Sr./III)
5.	certificate. Did ar	nent of paternity is and man sign an acknown any other time? <i>(Cl</i>	owledgi	ment of pa	aternity for th	•		
	If yes, who listed	himself as the fathe	r on the	acknowle	edgment of p	aternity or t	oirth certific	cate?
	(First Name)	(Middle Name	(Last	Name)	(Jr./S	Sr./III)		
6.	List the names o to this <i>Petition</i> .	f all men you named	in ques	stions 2, 3	, 4 and 5. Th	ese person	s are the F	Respondents
	pages answering	than 3 different per the questions 15 th additional Directions ndent.	rough 2	3 of this F	Petition for ea	ch addition	al Respon	dent. You
	Respondent 1 -						· · · · · · · · · · · · · · · · · · ·	
		(First Name)	(Mid	ale Name)	(Last Name)		(Jr./Sr./III)	
•	Respondent 2 -	(First Name)	(Mid	dle Name)	(Last Name)		(Jr./Sr./III)	
	Respondent 3 -	(First Name)	(Mid	dle Name)	(Last Name)		(Jr./Sr./III)	
		1 3	(iviid)	tarrio)	((,,,	

This is the address the court will use to send information about your case to you. If you move during the time this care pending, you must send a letter to the court notifying it of your new address. This address is not necessarily the same the address at which you live. Even if you do not wish to give the address at which you live, you must still give the comailing address. Because court actions are a matter of public record, the address you list will be available to the public record, the address you list will be	formation about Petitior	er			
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(City) (State) (Zip)					
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 Yes □ No 10. I live in □ the United States □ another country, which is	XXX-XX			0_1	
 Yes □ No 10. I live in □ the United States □ another country, which is	A	albtoon 0 (Obook one	of the two bears)		
10. I live in _ the United States _ another country, which is 11. I live in _ Missouri _ another state, which is 12. I live in the county of City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should write "Saint Louis city" in the blank. 13. What is your current employment status? (Check one of the three boxes) _ Employed _ Unemployed _ Self-employed		gnteen? (Check one	of the two boxes)		
 11. I live in Missouri another state, which is 12. I live in the county of City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should write "Saint Louis city" in the blank. 13. What is your current employment status? (Check one of the three boxes) Employed Unemployed Self-employed 	Yes No No				
 11. I live in Missouri another state, which is 12. I live in the county of City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should write "Saint Louis city" in the blank. 13. What is your current employment status? (Check one of the three boxes) Employed Unemployed Self-employed 			m, , , , la la la la		
 12. I live in the county of City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should write "Saint Louis city" in the blank. 13. What is your current employment status? (Check one of the three boxes) Employed Unemployed Self-employed 	. I live in _ the United Stat	es another count	ry, which is		·
 12. I live in the county of City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should write "Saint Louis city" in the blank. 13. What is your current employment status? (Check one of the three boxes) Employed Unemployed Self-employed 	Llive in □ Missouri □ ar	other state which is	,5		
City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should write "Saint Louis city" in the blank. 13. What is your current employment status? (Check one of the three boxes) □ Employed □ Unemployed □ Self-employed		other state, which is			•
City of Saint Louis is considered a county. If you live in the city of Saint Louis, you should write "Saint Louis city" in the blank. 13. What is your current employment status? (Check one of the three boxes) □ Employed □ Unemployed □ Self-employed	. I live in the county of				
blank. 13. What is your current employment status? (Check one of the three boxes) ☐ Employed ☐ Unemployed ☐ Self-employed	•	ed a county. If you live in t	the city of Saint Louis	vou should write "Sain	t Louis city" in the
☐ Employed ☐ Unemployed ☐ Self-employed		a a coamy ii you ii o	and only or count zoons,	, ou on our mile oum	. 200.0 0.1,0
☐ Employed ☐ Unemployed ☐ Self-employed					
☐ Employed ☐ Unemployed ☐ Self-employed 14. If you are employed or self-employed, where do you currently work?	. What is your current empl	oyment status? (Che	eck one of the three	e boxes)	
14. If you are employed or self-employed, where do you currently work?	☐ Employed ☐ Unemployed ☐ Unemployed ☐ Unemployed ☐ Unemployed	loyed Self-emple	oyed		
14. If you are employed or self-employed, where do you currently work?					
14. If you are employed of Self-employed, where do you currently work?	. If you are employed or se	f-employed, where d	o you currently wo	rk?	
If you are self-employed, enter a brief description of the type of work you perform such as "Landscaping" or "Day car					
the line for the name of your employer. If you are self-employed, you should also enter the address information for your		nployer. If you are self-en	nployed, you should al	so enter the address in	nformation for your
self-employment.	self-employment.				
(Employer's name or type of self-employment)	(Employer's name or type of se	lf-emplovment)			
<u> </u>	(6)				
(Street)	(Street)				
				_	
(City) (State) (Zip)	(City)	(State)	(Zip)		

Information about Respondent 1

Provide information for Respondent 1 as listed in response to question 6 of this *Petition*. Respondents shall be listed in the order used in question 6 of this *Petition*.

	et Name) (Mi er the full legal name of Respond	ddle Name) (Last Name) ent 1 on the lines above)	(.	Jr./Sr./III)
15.	What is Respondent 1's m	nailing address?		
	·	urt will use to send information		to this Respondent. If you do not know this address.
				× 2,
	(Street)			
	(City)	(State)		1,5
	()			
	(Telephone Number with Area C	Code) (E-mail Address - Opti	onal)	
16.	What are the last four num Do not leave this field blank. If	•		number? ity number, enter "Unknown" in this field.
	XXX-XX		, S//	
17.	Is Respondent 1 over the ☐ Yes ☐ No	age of eighteen? <i>(Check</i>	one of the two	boxes)
18.	Respondent 1 lives in \Box t	he United States 🗌 anot	her country, w	hich is
19.	Respondent 1 lives in	Missouri another state	e, which is	·
20.	Respondent 1 lives in the City of Saint Louis is considere city" in the blank.	•	lives in the city o	f Saint Louis, you should write "Saint Louis
21.	Respondent 1 is currently (Check one of the four box		oyed 🗌 self-e	mployed employment unknown.
22.	If Respondent 1 is employ	ed or self-employed, whe	ere do they cui	rently work?
	If this Respondent is self-emple "Day care," on the line for the raddress information for their se	name of the employer. If this Re	of the type of wor espondent is self-	k they perform, such as "Landscaping" or employed you should also enter the
	STI.			
	(Employer's name or type of sea	f-employment)		
	5			
(1)	(Street)			
	(City)	(State)	(Zip)	•
23.	If this Respondent is on active	judgment without this Respor	United States, th	eck "is" or "is not") se Servicemembers Civil Relief Act (SCRA) ou should contact a lawyer about this

Information about Respondent 2

Provide information for Respondent 2 as listed in response to question 6 of this *Petition*. Respondents shall be listed in the order used in question 6 of this *Petition*.

	t Name) er the full legal name of Re	(Middle Name) (Last Name) espondent 2 on the lines above)		(Jr./Sr./III)
24.	What is Respondent	2's mailing address?		-O
	This is the address that			se to this Respondent. If you do not know this wn address.
	(Street)			
	(City)	(State)	(Zip)	-
	()			
	(Telephone Number with	Area Code) (E-mail Address - Op	otional)	
25.		or numbers of Respondent 2's ank. If you do not know this Respond		ity number? curity number, enter "Unknown" in this field.
	XXX-XX-	_	,5	×
26.	Is Respondent 2 ove ☐ Yes ☐ No	r the age of eighteen? (Check	k one of the t	two boxes)
27.	Respondent 2 lives i	n \square the United States \square ano	ther country	, which is
28.	Respondent 2 lives i	n 🗌 Missouri 🗌 another sta	te, which is _	
29.	Respondent 2 lives i City of Saint Louis is co- city" in the blank.		t lives in the cit	y of Saint Louis, you should write "Saint Louis
30.	Respondent 2 is curr (Check one of the fo		oloyed 🗌 sel	f-employed employment unknown.
31.	If Respondent 2 is e	mployed or self-employed, wh	ere do they	currently work?
		or the name of the employer. If this R		work they perform, such as "Landscaping" or elf-employed you should also enter the
	6714			
	(Employer's name or type	e of self-employment)		
	G			
	(Street)			
*	(City)	(State)	(Zip)	
32.	If this Respondent is on	etting a judgment without this Respo	e United States	Check "is" or "is not") s, the Servicemembers Civil Relief Act (SCRA) at. You should contact a lawyer about this

Information about Respondent 3

Provide information for Respondent 3 as listed in response to question 6 of this *Petition*. Respondents shall be listed in the order used in question 6 of this *Petition*.

	t Name) er the full legal name of Respo	Middle Name) (Last Name) Indent 3 on the lines above)	(Jr./S	Sr./III)
33.	What is Respondent 3's	mailing address?		-03
	This is the address that the	<u> </u>		his Respondent. If you do not know this dress.
	(Street)			
	(City)	(State)	(Zip)	1,5 [×]
	()			0
	(Telephone Number with Area	Germail Address - Option	nal)	
34.	What are the last four nu	ımbers of Respondent 3's s	ocial security nu	ımber?
	Do not leave this field blank.	If you do not know this Responde	ent's social security	number, enter "Unknown" in this field.
	XXX-XX		6	
35.	Is Respondent 3 over th	e age of eighteen? (Check	one of the two b	oxes)
36	Respondent 3 lives in	the United States 🗌 anoth	per country, which	ch is
		_	•	
37.	Respondent 3 lives in	Missouri another state	e, which is	·
38.	Respondent 3 lives in the City of Saint Louis is considerable.	-	ives in the city of Sa	 aint Louis, you should write "Saint Louis
39.	Respondent 3 is current (Check one of the four b		oyed 🗌 self-emp	oloyed employment unknown
40.	If Respondent 3 is employed	oyed or self-employed, whe	re do they curre	ntly work?
	If this Respondent is self-em "Day care," on the line for the address information for their	e name of the employer. If this Re	f the type of work th spondent is self-em	ney perform, such as "Landscaping" or uployed you should also enter the
	P.I.			
	(Employer's name or type of s	self-employment)		
	5			
	(Street)			
	(City)	(State)	(Zip)	
41.	If this Respondent is on activ	g a judgment without this Respond	United States, the S	("is" or "is not") Servicemembers Civil Relief Act (SCRA) should contact a lawyer about this

Information about the Children

	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
	(Street)				10.
	(City)	(State)	(Zip)	(Dates)	
(2)	(First Name)	(Middle Name)	(Last Name)	,5	(Jr./Sr./III)
	(Street)				
	(City)	(State)	(Zip)	(Dates)	
(3)	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
	(Street)				
	(City)	(State)	(Zip)	(Dates)	
chi	Idren or claims to have the two boxes) Yes No you have information a court of this or any o	other than you or the or ye custody or visitation of a about any other custoo other state? (Check one	rights with respect	ct to any of the concerning any of	hildren? <i>(Check (</i>
	Yes ☐ No	other litigation concern	ning the custody	of any of the chil	dren in this or an
in a	ve you participated in ner state? (Check one Yes \square No				
in a	her state? (Check one Yes \square No		e or neglect? (Ch	neck one of the tw	vo boxes)

42. List the name of the parent or guardian with whom the children have lived and the address where

	uestions 3 through 5 of this <i>Petition</i> be			hat any other persons listed n.
	de element (b. e. Kelleren ek (b. e. ele 9 d/ee e.). Pe			
I an	n requesting that	(Middle Name)	(Last Name)	
Re	quest for Relief			
	If yes, you must serve the Family Su of Paternity, Custody and Support ar serve the Family Support Division are	nd other forms filed v	vith this <i>Petition</i> . I	
	benefits in the past? (Check one of the Yes No	,		
49.	Do any of the children listed in this P Families (TANF) benefits through the	Petition currently rece Family Support Div	eive Temporary As	
	☐ Yes ☐ No List the judicial case number(s)			٦.
	If yes, list the eight digit IV-D number If yes, has the Family Support Division			_ ck one of the two boxes)
	Petition? (Check one of the two boxe ☐ Yes ☐ No		,	(ren) listed in this

rst Name)	(Middle Name)	(Last Name)	(Jr./Sr./	III)
ou must fill out letition.	Directions for Se	rvice on each p	oerson listed in I	response to question 6 of this
neck one of the	following service	options:		
Support, which Support. Ther	n is being filed with efore, do not issue	n the <i>Mother's F</i> e a summons. Answer to Petition	Petition for Declar of for Declaration of Pa	ration of Paternity, Custody and ration of Paternity, Custody and aternity, Custody and Support at the same of a notary public.
Respondent 1	should be served	with a summon	s at their home:	
Respondent 1 m served, you mu	nust be served within 3 ust file another copy	0 days of the issua	ance of the summons ents in this case to	. If you are going to have Respondent be served on Respondent 1.
(Street)				<u> </u>
(City)		(State)	(Zip)	-
Respondent 1	should be served	with a summon	s at their place of	f employment:
				. If you are going to have Respondent be served on Respondent 1.
oor rou, you me	iot mo unotifor copy	or an your accum		ao con tou on neoponuoni n
(Employer's Nam	ne)	0-1		(Hours of Employment)
(Street)		, KO,		
		(State)	(Zip)	-

If you request a summons to be served outside of the county where you filed this *Petition*, the court will mail the summons to you. You must then deliver the summons to the sheriff of the county where the summons will be served. You must also pay the appropriate service fee to that sheriff.

Firs	t Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	
	ı must fill out Dire ition.	ctions for Sei	vice on each _l	person listed in re	sponse to question 6 of this
he	eck one of the follo	wing service	options:		
	Support, which is to Support. Therefore If you check this box,	peing filed with e, do not issue you must file the	n the <i>Mother's F</i> a summons. Answer to Petition	Petition for Declarat	tion of Paternity, Custody and ion of Paternity, Custody and rnity, Custody and Support at the same of a notary public.
	Respondent 2 sho	uld be served	with a summor	ns at their home:	
_	Respondent 2 must b	e served within 3	0 days of the issua	ance of the summons. If	you are going to have Respondent 2 served on Respondent 2.
					48
	(Street)				
	(City)		(State)	(Zip)	
	Respondent 2 sho	uld be served	with a summor	ns at their place of e	mployment:
					you are going to have Respondent 2 served on Respondent 2.
	(Employer's Name)		2		(Hours of Employment)
	(Street)		· <0,		
	(City)		(State)	(Zip)	

If you request a summons to be served outside of the county where you filed this *Petition*, the court will mail the summons to you. You must then deliver the summons to the sheriff of the county where the summons will be served. You must also pay the appropriate service fee to that sheriff.

Dire	ections for Serv	vice on Respo	ndent 3 (Enter	the name of Re	espondent 3 on the lines below)	
(Firs	t Name)	(Middle Name)	(Last Name)	(Jr./Sr./	//II)	
	ı must fill out Dir ition.	ections for Ser	vice on each p	erson listed in	response to question 6 of this	
Che	eck one of the fo	llowing service	options:			7
	Support, which is Support. Therefore If you check this bo	s being filed with ore, do not issue ox, you must file the	the <i>Mother's Peasummons</i> . Answer to Petition	etition for Declar for Declaration of Pa	ration of Paternity, Custody and ration of Paternity, Custody and raternity, Custody and Support at the same of a notary public.	ıe
	Respondent 3 sh			•		
	Respondent 3 mus	t be served within 3	0 days of the issuar	nce of the summons	s. If you are going to have Respondent be served on Respondent 3.	3
					Z.S.	
	(Street)				R	
	(City)		(State)	(Zip)	/	
	Respondent 3 sh	nould be served	with a summons	at their place o	of employment:	
					s. If you are going to have Respondent be served on Respondent 3.	3
	(Employer's Name)		2	·	(Hours of Employment)	
	(Street)		⁽ 0)			
	(City)		(State)	(Zip)	_	
	•			•	oy registered mail is requested. A See Missouri Supreme Court Rule	
cou	rt will mail the s inty where the su	ummons to you	ı. You must the	n deliver the si	nere you filed this <i>Petition</i> , the ummons to the sheriff of the ne appropriate service fee to the	at
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	SFO					

Mother's Petition for Declaration of Paternity, Custody and Support ${\tt Form~CAFC302~07/01/2018}$

Service on Family Support Division (if necessary) If any child listed in this Petition receives Temporary Assistance for Needy Families (TANF) benefits, you must serve the Family Support Division with a copy of your Petition and Parenting Plan. The child(ren) receive TANF benefits through the Family Support Division. The Family Support Division shall be served at the following address: Director, Family Support Division 615 Howerton Court Jefferson City, Missouri 65102 Sign Below in the Presence of a Notary Public Your Mother's Petition for Declaration of Paternity, Custody and Support is required to be verified in the presence of a notary public. Petitioner, of lawful age, being duly sworn on his or her oath, states that he or she is the Petitioner named above and that the facts stated in the Mother's Petition for Declaration of Paternity, Custody and Support are true according to his or her best knowledge, information and belief. (Sign above in the presence of a Notary Public) (Print your name above) The following information must be completed by a notary public. STATE OF **COUNTY OF** On this _____ day of _ , 20____ , before me personally appeared , to me known to be the person described in and who executed the foregoing instrument and acknowledged that he/she executed the same as his/her free act and deed. IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the County and

State aforesaid, the day and year first above written.

My commission expires:

Attorney Information

/A**		(Missouri Bar Number)
(Attorney - Print your name above)		
(Street)		
(City)	(State)	(Zip)
(Telephone Number with Area Code)	(Fax Number with Area Code)	(E-mail Address - Optional)
		SV
	L KOR	
	ABL	
ENAIL	ABL	
ORMIS AVAIL	ABL.	
(HIS FORMIS AVAIL	ABL	
SHORMISAVAIL	ABL	

(Co	ounty where court is	located. City of Saint Lo	uis is considered a county.)
		_	
(First Name) (Middle Nam Petitioner, (Enter your full legal nam	e) (Last Name) ne above)	(Jr./Sr./III)	Case Number
v.			(Will be assigned when case is filed)
(First Name) (Middle Nam Respondent 1, (Enter full legal nam	e) (Last Name) me of Respondent 1	(Jr./Sr./III) above)	
and-			Division
(First Name) (Middle Name) Respondent 2, (Enter full legal name)	, ,	(Jr./Sr./III) above)	Number
-and-		,5	
(First Name) (Middle Nam Respondent 3. (Enter full legal nam	e) (Last Name) me of Respondent 3	(Jr./Sr./III)	
Petition, Conse		er for Appointm ernity Action	ent as Next Friend
You are bringing this action on be represent their interests because Friend."		• • • • • • • • • • • • • • • • • • • •	An adult must be appointed to . The court calls that person a "Ne
1. I request that the court appoint Me Someone else (Enter na	`	of the two boxes)	
al la			
(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
as Next Friend for the follow	vina minor child(ren).	
5	virig minor crilia(
a(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III) (Child's Ag

(Middle Name)

(Last Name)

(First Name)

IN THE CIRCUIT COURT OF

(Child's Age)

(Jr./Sr./III)

_ , MISSOURI

d.				
(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	(Child's Age)
e (First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	(Child's Age)
f	(Middle Name)	(Last Name)	(Jr./Sr./III)	(Child's Age)
Check one of the three & The Next Friend is the Next Friend is the Next Friend is not the child(ren).	ne mother of the chi ne father of the child		r physical c	ustody of
Next Friend's mailing ad	dress is:		5	
(Street)		RP		
(City)	(State)	(Zip)		
()				
Check one of the two bo The child(ren) reside The child(ren) reside	(s) with the Next Fr	iend g person at the following address	:	
(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./I	(II)
(Street)	(4,70)			
(City)	(State)	(Zip)		
(Telephone Number with Area	, ,	ress - Optional)		
onsent to serving as Next I	riiena in this mattei		/	/
(Next Friend sign above)		(Print Next Friend's name above)	(Date - I	mm/dd/yyyy)

Consent of Children over the Age of Fourteen

(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
as my Next Friend in this	s case.			
(Child sign above, if age	: 14 or older)	(Print C	Child's name above)	/ / (Date - mm/dd/yyyy)
(Child sign above, if age	14 or older)	(Print C	Child's name above)	/ / (Date - mm/dd/yyyy)
(Child sign above, if age		(Print C	Child's name above)	(Date - mm/dd/yyyy)
This information may be com assistance of an attorney.		Do not enter any	information here if you ar	e filing this case without the
I have assisted the my appearance on I (Attorney - Sign above)		• •	·	s, but I am not entering
		18-V		01)
(Attorney - Print your name al	pove)	2		
	. ()	•	
(Street)				
(Street) (City)		(State)	(Zip)	
	() a Code) (Fax Number	(State) r with Area Code) ORDER		onal)
(City) () (Telephone Number with Area	() (Fax Number	r with Area Code)		onal) (Jr./Sr./III)
(City)	(Middle Name)	ORDER (Last Name)	(E-mail Address - Optio	

				Ext	nibit
IN TH	IE CIRCUIT COU	RT OF		. MISS	SOURI
			rt is located. City of Saint L		
				Case	
(First Name)	(Middle Name	(Last Name)	(Jr./Sr./III)	Number	6
Petitioner,				(Use number from pend	ding case)
				>	M
-and-					
				Division	
(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	Number	
Respondent.)	(Use number from pend	ding case)
		Pare	enting Plan		
			, J	Q-V	
Part A - Cus	stody of the Child	lren			
1 Dlan Aut	har(a) (Chaak all an	nliaahla hayaa)	1 5°		
	hor(s) <i>(Check all ap</i>	•			
	parents wrote this <i>F</i>	•	, (A)		
		nt wrote this <i>Pa</i>	renting Plan. (Check I	Petitioner or Respond	dent if you
_	se this option)		, 2-		
_	court wrote this <i>Pare</i>				
	Guardian ad Litem w	rote this <i>Paren</i>	nting Plan.		
☐ Othe		\sim	(Middle Mans)	// ant Nama)	/ In (On /III)
	(First Name)		(Middle Name)	(Last Name)	(Jr./Sr./III)
2. Names a	nd Ages of Children	b.			
	•		this <i>Parenting Plan</i> ap	nnlies:	
			nafter referred to simple		re as follows:
		(,	
(First Nam	01	(Middle Name)	(Last Name)		(Child's Age)
(FIISUNAIII	e)	(Middle Name)	(Last Name)	(JI./SI./II	i) (Child's Age)
	(5)				_
(First Nam	e)	(Middle Name)	(Last Name)	(Jr./Sr./II	I) (Child's Age)
(First Nam	e)	(Middle Name)	(Last Name)	(Jr./Sr./II	(Child's Age)
C					
(First Nam	e)	(Middle Name)	(Last Name)	(Jr./Sr./II	(Child's Age)

(Middle Name)

(Middle Name)

(Last Name)

(Last Name)

(First Name)

(First Name)

(Child's Age)

(Child's Age)

(Jr./Sr./III)

(Jr./Sr./III)

Duration of Plan

The terms and conditions set forth in this *Parenting Plan* shall remain in full force and effect until the children are emancipated or until this plan is modified by a court of competent jurisdiction.

If you have questions about emancipation or jurisdiction, please consult an attorney or review the definitions on the Representing Yourself website.

Decisions Concerning the Children

4. Types of Decisions

The three types of decisions that parents must make concerning their children are major decisions, daily or everyday decisions, and emergency decisions.

A. Major Decisions

Major decisions are the important decisions about the children. Major decisions are made by **the parent or parents with legal custody**. The following are examples of major decisions:

- The choice or change of schools, including college or special tutoring,
- The choice or change of doctor, surgeon or dentist,
- Church or religious instruction, training or education,
- Selection of child care (daycare, babysitters, afterschool programs).
- Major medical care, surgery, or any medical procedure requiring hospitalization or out-patient surgery,
- Major dental work and orthodontics,
- Psychological or psychiatric treatment or counseling,
- The choice or change of camps or other special or extracurricular activities, including sports,
- The extent of any travel away from home,
- Part or full-time employment of the children,
- Whether the child gets a driver's license, drives or purchases a motor vehicle,
- Birth control and sex education.
- Actual or potential legal action on behalf of the children.

B. Daily or Everyday Decisions

Daily or everyday decisions are routine decisions like minor medical treatment, bedtimes, homework, chores, selection of clothing and normal daily activities.

Daily decisions shall be made by **the parent having actual physical custody at the time** of the decision. The parents shall work together to create consistent routines for the best interests of the child.

C. Emergency Decisions affecting Health and Safety

Emergency decisions are decisions of an urgent nature. They affect the immediate health and safety of the children and have to be made before it is possible to contact the other parent.

The parent who is with the minor child requiring emergency care may make the emergency decision. The parent making the emergency decision shall advise the other parent of the nature and extent of the emergency as soon as possible.

5. Access to Medical, Dental and Educational Records of the Children

Unless otherwise provided in this *Parenting Plan*, both parents are entitled to access records and information pertaining to the children, including, but not limited to, full and complete medical, dental, and educational records subject to Part A, Paragraph 21.

Legal Custody (Check one of the three boxes)										
☐ Joint Legal Custody										
"Joint legal custody" means that the parents share the decision-making rights, responsibilities, and authority relating to the health, education and welfare of the child, and, unless allocated, apportioned, or decreed, the parents shall confer with one another in the exercise of decision-making rights, responsibilities, and authority. §452.375.1(2), RSMo.										
It is in the best interests of the children that the parents have joint legal custody of the children. Major decisions shall be made by both parents together. If they disagree on a major decision they shall resolve their disagreement through the dispute resolution procedure set forth in Paragraph 9.										
☐ Sole Legal Custody (Check Petitioner or Respondent if you choose this option)										
It is in the best interests of the children that Petitioner Respondent has sole legal custody of the children. The parent with sole legal custody shall make all major decisions affecting the children. The parents cannot share joint legal custody because: Missouri Law requires a statement of the reasons for a request for no shared decision-making. You must enter	ra									
reason on this line.										
☐ Third Party - Sole Legal Custody to Third Party It is in the best interest of the children that										
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)										
(hereinafter referred to as "Third Party") has sole legal and sole physical custody of the child Major decisions affecting the children shall be made by Third Party. Both parents are unfit, unsuitable, or unable to be a custodian of the children or the welfare of the children requires neither parent have legal custody.										
Communication between Parents (Check each box that is appropriate in your case)										
Communication between the parents concerning the children may be by any of the following me	ethods:									
☐ In person										
☐ Home telephone										
☐ Work telephone☐ Mobile telephone										
Letter via U.S. Postal Service										
☐ E-mail										
Using the following third person. This third person will be:										
(First Name) (Middle Name) (Last Name) (Jr./Sr./III)										
The children shall not be used as messengers.										

6.

7.

8.	Iss	ues not to be Discussed in the Presence of the Children											
	fro aff	e parents shall not make negative, derogatory or degrading statements about the other parent in nt of the children. Both parents shall exercise their best efforts to promote the respect, love and ection of the children toward the other parent. The parents shall avoid discussing parenting ues, financial issues, and other topics related to these proceedings when the children are present											
		The parents should prevent other people from making negative, derogatory or degrading statements about the other parent in the presence of the children.											
9.	Dis	pute Resolution Procedure											
	inc sha eve	s is the manner in which the parents will resolve disagreements concerning the children. This ludes disagreements on the meaning or interpretation of any provision of this plan. The parents all present their disagreements to a mediator chosen by them for non-binding mediation. In the ent that the parents cannot resolve the dispute by mediation, they may submit the issue to the urt through appropriate proceedings.											
	Ad	ditional dispute resolution procedures are as follows:											
Wh	en	the Children Will Physically Be with Each Parent											
10.	Ph	ysical Custody (Check one of the four boxes)											
		Joint Physical Custody (Check Petitioner or Respondent if you choose this option)											
		"Joint physical custody" means an order awarding each of the parents significant but not necessarily equal, periods of time during which a child resides with or is under the care and supervision of each of the parents. Joint physical custody shall be shared by the parents in such a way as to assure the child of frequent, continuing and meaningful contact with both parents. §452.375.1(3), RSMo.											
		It is in the best interest of the children that both parents have joint physical custody of the children. Use the address of \square Petitioner \square Respondent as the address of the children for mailing and educational purposes.											
		Sole Physical Custody with Visitation to the Other Parent (Check Petitioner or Respondent if you choose this option)											
		It is in the best interests of the children that \square Petitioner \square Respondent has sole physical custody of the children and that the other parent has visitation as set forth herein.											
		Sole Physical Custody and Supervised Visitation to the Other Parent (Check Petitioner or Respondent if you choose this option)											
		It is in the best interests of the children that \square Petitioner \square Respondent has sole physical custody of the children and that the other parent has supervised visitation as set forth herein.											
		Unsupervised visitation with \square Petitioner \square Respondent would endanger the children's physical health or impair their emotional development because:											
	C	Vicitation will be supervised by											
		Visitation will be supervised by (First Name) (Middle Name) (Last Name) (Jr./Sr./III)											

Physical Custody to a Third Party It is in the best interest of the children that										
(First Name)	(Jr./Sr./III)									
(hereinafter referred to as "Third Party") has sole physical custody of the children. Both parents are unfit, unsuitable, or unable to be a custodian of the children or the welfare of the children requires that neither parent have physical custody.										

11. Residential Schedules

Each exchange should be written on the Weekend and Weekday Exchange Schedule. The parents shall have physical custody of the children as they agree. In the event they do not agree, then the parents shall exchange the children as set forth in the residential schedules.

Each parent shall consider reasonable changes when requested by the other parent or the children. If a significant change is made, either parent may reduce their agreement to writing. All changes are unenforceable unless in writing and signed by both parents.

Sample Page - Do Not File

Sample - Weekday and Weekend Exchange Schedule

This page is a sample to help you understand how to fill out the form. Do not file this sample page with the court.

	Enter the parent who is receiving custody and the specified time for each exchange.										
	DAY OF WEEK	EXCHANGES FOR DAY									
	Sunday	Susan									
	Monday	Susan									
빌	Tuesday	Susan									
WEEK ONE	Wednesday	3:30 p.m. Walter picks up children from school									
M	Thursday	8:00 a.m. Walter drops children off at school 3:30 p.m. Susan picks up children from school									
	Friday	5:30 p.m. Walter picks up children from Susan's house									
	Saturday	Walter									
	Sunday	7:00 p.m. Susan picks up children from Walter's house									
	Monday	Susan									
0/	Tuesday	Susan									
WEEK TWO	Wednesday	3:30 p.m. Walter picks up children from school									
M	Thursday	8:00 a.m. Walter drops children off at school 3:30 p.m. Susan picks up children from school									
	Friday	Susan									
	Saturday	Susan									

Sample Page - Do Not File

Weekday and Weekend Exchange Schedule

	Enter the parent who see previous	ho is receiving custody and the specified time for each exchange. page of this <i>Parenting Plan</i> for a sample schedule.
	DAY OF WEEK	EXCHANGES FOR DAY
	Sunday	
	Monday	C
삧	Tuesday	
WEEK ONE	Wednesday	
≯	Thursday	
	Friday	
	Saturday	
	Sunday	
	Monday	OF K
0	Tuesday	
WEEKTW	Wednesday	
	Thursday	
	Friday	
C	Saturday	

See the following page to determine when each week begins.

Determination of Week One and Week Two

Determination of week one or week two on the Weekday and Weekend Exchange Schedule

For purposes of this *Parenting Plan*, **week one** is defined as a week that has Sunday on one of the following dates:

January	1	2	3	4	5	6	7	15	16	17	18	19	20	21	29	30	31
February	1	2	3	4	12	13	14	15	16	17	18	26	27	28	29		
March	1	2	3	4	12	13	14	15	16	17	18	26	27	28	29	30	31
April	1	9	10	11	12	13	14	15	23	24	25	26	27	28	29		
May	7	8	9	10	11	12	13	21	22	23	24	25	26	27			
June	4	5	6	7	8	9	10	18	19	20	21	22	23	24			
July	2	3	4	5	6	7	8	16	17	18	19	20	21	22	30	31	
August	1	2	3	4	5	13	14	15	16	17	18	19	27	28	29	30	31
September	1	2	10	11	12	13	14	15	16	24	25	26	27	28	29	30	
October	8	9	10	11	12	13	14	22	23	24	25	26	27	28			
November	5	6	7	8	9	10	11	19	20	21	22	23	24	25			
December	3	4	5	6	7	8	9	17	18	19	20	21	22	23	31		

For purposes of this *Parenting Plan*, **week two** is defined as a week that has Sunday on one of the following dates:

January	8	9	10	11	12	13	14	22	23	24	25	26	/27	28			
February	5	6	7	8	9	10	11	19	20	21	22	23	24	25			
March	5	6	7	8	9	10	11	19	20	21	22	23	24	25			
April	2	3	4	5	6	7	8	16	17	18	19	20	21	22	30	31	
May	1	2	3	4	5	6	14	15	16	17	18	19	20	28	29	30	31
June	1	2	3	11	12	13	14	15	16	17	25	26	27	28	29	30	
July	1	9	10	11	12	13	14	15	23	24	25	26	27	28	29		
August	6	7	8	9	10	11	12	20	21	22	23	24	25	26			
September	3	4	5	6	7	8	9	17	18	19	20	21	22	23			
October	1	2	3	4	5	6	7	15	16	17	18	19	20	21	29	30	31
November	1	2	3	4	12	13	14<	15	16	17	18	26	27	28	29	30	
December	1	2	10	11	12	13	14	15	16	24	25	26	27	28	29	30	

12. Holidays

A different schedule can apply on holidays. The times each parent will have with the children during the holidays are set forth on the Holiday Exchange Schedule.

Include the name of the parent who will have the holiday and the times to exchange the children.

Holiday Exchange Schedule

Holiday	Even Numbered Years	Odd Numbered Years	Physic Custo From	cal dy To
	List name of parent	List name of parent	Time - Include a.m. or p.m.	Time - Include a.m. or p.m.
Martin Luther King Day				7 0.
President's Day				V in
Memorial Day				CH.
Independence Day				,5 [×]
Labor Day			.08	
Thanksgiving			, Q_()	
Halloween				
Christmas Eve		/	5	
Christmas Day		, >		
Mother's Day				
Father's Day				
Petitioner's Birthday	. (R		
Respondent's Birthday	//			
Child(ren)'s Birthday(s)				
Other holidays, including school holidays, special occasions (specify)	AllAl			
À	7			
(5)				
ON				
⁷ O,				
,,5				

13.	Va	cation Schedule (Check one of the two boxes)
		No specific weeks will be set aside for our vacations.
		Each parent may designate week(s) each year during which they will have exclusive physical custody of the children and the regular schedules do not apply. However, during this period, the Holiday Schedule still applies. Petitioner shall have first choice of weeks in odd-numbered years. Respondent will have first choice of weeks in even-numbered years. The parent with the first choice of weeks must designate the vacation weeks by March 31 of each year. The parent with the second choice of weeks must designate the weeks by April 15 of each year.
		7.
		G
	ah	olidays and vacations do not alter the "Week One" or "Week Two" designation, but they do apply ead of the regular schedule. If the holiday schedule conflicts with any other schedule, the holiday hedule takes precedence.
Oth	er	Provisions Concerning the Children
14	Lo	cation of Exchanges (Check one of the four boxes)
1-7.	If a	a specific location for an exchange is not stated on the schedule, then the exchange shall occur at e following location:
		All exchanges shall occur at the children's school or child care provider when school or child care is in session. If, or when, school or child care is not in session, all exchanges shall occur at the locations as follows:
		All exchanges shall occur at Petitioner's Respondent's residence. (Check Petitioner or Respondent if you choose this option)
		The parent receiving custody of the children shall pick up the children at the other parent's residence.
		Exchanges shall occur at the locations as follows:
15	Tra	ansportation
10.	Ea	ch parent will pay the expenses associated with his or her own transportation to and from the change location unless otherwise indicated in this <i>Parenting Plan</i> .
16.	No	tification of Change from Residential Schedule
٥.		the event either parent cannot exercise the scheduled time with the children, he or she should tell
	the tim	other parent as soon as possible, but not later than 24 hours before the start of the scheduled ne with the children. If a parent anticipates that he or she may have to cancel at the last minute, or she should advise the other parent of the possible last minute conflict. If a parent fails to notify the other as set forth above, he or she shall be responsible for the reasonable costs incurred by the

other parent.

7	Telephone Contact with Children (Check one of the two boxes)
17.	Each parent may contact the children in a reasonable manner when the children are with the other parent.
	☐ Neither parent may contact the children at the other parent's residence earlier than a.m or later than p.m.
	☐ There are no restrictions on the time to contact the children.
	Each parent shall provide the other parent with the telephone number at which the children may be contacted. Neither parent shall configure their telephone system in such a manner as to "block" or prevent the other parent from calling.
	When a parent travels out of town with the children for at least 24 hours, he or she must notify the other parent of the children's destination. He or she must also provide a telephone number where the children can be reached.

18. Children's Activities

The parent who has the children at the time of the activity is responsible for getting the children to their school or extracurricular activities. Each parent shall not schedule activities that occur primarily when the children are with the other parent without the other parent's consent.

19. Relocation

§452.377, RSMo states, "Absent exigent circumstances as determined by a court with jurisdiction, you as a party to this action are ordered to notify, in writing by certified mail, return receipt requested, and at least sixty days prior to the proposed relocation, each party to this action of any proposed relocation of the principal residence of the child, including the following information:

- (1) The intended new residence, including the specific address and mailing address, if known, and if not known, the city;
- (2) The home telephone number of the new residence, if known;
- (3) The date of the intended move or proposed relocation;
- (4) A brief statement of the specific reasons for the proposed relocation of the child; and
- (5) A proposal for a revised schedule of custody or visitation with the child.
- (6) The other party's right, if that party is a parent, to file a motion, pursuant to §452.377, RSMo, seeking an order to prevent the relocation and an accompanying affidavit setting forth the specific good-faith factual basis for opposing the relocation within thirty days of receipt of the notice.

Your obligation to provide this information to each party continues as long as you or any other party by virtue of this order is entitled to custody of a child covered by this order. Your failure to obey the order of this court regarding the proposed relocation may result in further litigation to enforce such order, including contempt of court. In addition, your failure to notify a party of a relocation of the child may be considered in a proceeding to modify custody or visitation with the child. Reasonable costs and attorney fees may be assessed against you if you fail to give the required notice."

The residence of the children may be relocated sixty (60) days after providing notice unless a parent files a motion seeking an order to prevent the relocation within thirty (30) days after receipt of notice. Such motion shall be accompanied by an affidavit setting forth the specific factual bases supporting a prohibition of the relocation.

20.	The courts must consider any pattern (Check one of the three boxes.)	of domesti	c violence when it a	awards custody of the children.
	Domestic violence is abuse commi Missouri law requires the court cor decisions related to the children.			
	 There has been no pattern of domesting the committing violent acts against the committing violent acts against the committee or Respondent if you choose. There has been a pattern of domesting the committee of the commi	stic violenc other parent ose <i>thi</i> s opt	e between the parer or another family or ion)	nts, with Petitioner Respondent household member. (Check
	committing violent acts against the			
21.	If the court restricts a parent's visitation may also restrict that parent's access (Check one of the three boxes)			
	☐ There has been no domestic viole	nce by eith	er parent.	
	 There has been domestic violence parent or one of the children. The ed of the other parent or the children. There has been domestic violence parent or one of the children. Howev address of the other parent or the option) 	ducational (Check Pere) committed ver, the edu	records of the child litioner or Responder by Petitioner cational records of	ren shall not include the address nt if you choose this option) Respondent against the other the children may include the
> -			6	
(Petitioner - Sign above)		(Petitioner - Print you	r name above)
\(\bar{\lambda}{\lambda}\)	Attorney for Petitioner - Sign above)	P	(Attorney for Petition	er - Print your name above)
	Respondent - Sign above)	OF,	(Respondent - Print)	our name above)
(Attorney for Respondent - Sign above)		(Attorney for Respon	dent - Print your name above)
7	Guardian ad Litem - Sign above)		(Guardian ad Litem -	Print your name above)
(If h	neard by a Family Court Judge)		a Family Court Commissi and Recommendation	
(J	Judge) (Commiss		ioner)	(Date)
(E	Pate)			recommendations of the adopted as the judgment of the
1		(Judge)		(Date)

	Exhibit
IN THE CIRCUIT COURT OF	, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

(First Name) Petitioner, -and-	(Middle Name)	(Last Name)	(Jr./Sr./III)	Case Number (Use number from pending case)
(First Name) Respondent.	(Middle Name)	(Last Name)	(Jr./Sr./III)	Division Number (Use number from pending case)

Parenting Plan

Part B - Support of the Children

ıu	t B - Support of the Office				
1.	Plan Author(s) (Check all ap ☐ Both parents wrote this F ☐ Petitioner ☐ Responder choose this option)	Parenting Plan.		k Petitioner or Responde	ent if you
	☐ The court wrote this <i>Pare</i>	enting Plan.			
	☐ The Guardian ad Litem w	rote this <i>Parer</i>	nting Plan.		
	Other (First Name)		(Middle Name)	(Last Name)	(Jr./Sr./III)
2.	Names and Ages of Children	1			
	Enter the total number of chi The names and ages of the		•	• •	e as follows:
	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	(Child's Age)
	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	(Child's Age)
	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	(Child's Age)
	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	(Child's Age)
	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	(Child's Age)
	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	(Child's Age)

Child Support Calculations

Child Support

Child support is an amount of money paid by one parent to the other parent for the support of the children. In addition to a regular monthly child support payment, other expenses of the children may be divided between the parents as child support.

Form 14

The Form 14 is a form used to calculate a presumed amount of child support. The Form 14 is part of this *Parenting Plan* and is found on Part B, Page 8. The court will usually follow the Form 14, however, if the court finds that the child support calculated pursuant to the Form 14 is unjust or inappropriate, it will set child support at a different amount.

Parents must also determine the division and amount of other expenses of the children such as medical and dental insurance, uncovered medical and dental expenses, childcare, and other extraordinary expenses. These expenses are part of the child support obligations of each parent.

Parents may agree on an amount of child support and the division of expenses. The court does not have to accept this agreement and can set different support amounts. Even if the parents have agreed on an amount of child support, **they must still calculate a Form 14 for the court**.

Missouri law further provides that "An award of joint physical custody does not preclude an award of child support pursuant to Section 452.340 and applicable supreme court rules in determining an amount reasonable or necessary for the support of the child." §452.375.12, RSMo. Child support may be appropriate even if both parties have custody of the children an equal amount of time.

Parent to Pay Child Support (Check one of the two boxes) One parent must be called the "parent paying support" and the other parent must be called the "parent receiving support." This is true even if no child support is going to be paid.
☐ Petitioner ☐ Respondent will pay regular monthly child support to ☐ Petitioner ☐ Respondent (Check Petitioner or Respondent if you choose this option)
□ No regular monthly child support will be paid by either parent. □ Petitioner □ Respondent will be referred to as "parent paying support" for purposes of the Form 14 calculation only. The other parent will be referred to as "parent receiving support." (Check Petitioner or Respondent if you choose this option)
AS FORM IS AWAILABILLE OR LINE

Medical and Dental Insurance for the Children

Cost of Medical or Dental Insurance for the Children

The cost of medical or dental insurance for the children is the monthly amount of any premium paid. If the parent's employer deducts the amount of premium from his or her pay, then the cost of medical or dental insurance includes the amount of the premium paid. It does not include the cost of medical or dental insurance for the parent, the parent's spouse, or other children that are not covered by this *Parenting Plan*. The cost of medical or dental insurance for the children is included on Line 6c of the Form 14.

The Form 14 states: "If the amount of the actual health insurance costs for the children who are the subject of this proceeding is not available or cannot be verified, the amount of the health insurance costs attributable to the children who are the subject of this proceeding shall be calculated by dividing the total monthly costs for the policy of health insurance by the total number of persons for whom the costs are paid or to be paid and then multiplying the resulting figure by the number of children insured under the policy who are the subject of this proceeding."

4.	Parent Responsible for Medical Insurance (Check one of the three boxes) Neither parent is required to maintain medical insurance for the benefit of the children. A health benefit plan is not available at reasonable cost through either parent's employer or union. If the parents receive child support services through the Family Support Division, the parents shall notify the Family Support Division of any changes in employment, whether health insurance is available through their employer, other group plan or the Affordable Care Act, provide the name of the insurance provider when coverage is available, and any other changes in access to health insurance coverage. Petitioner Respondent shall maintain and pay the cost of medical insurance for the benefit of the children.
5.	Derent Deepensible for Dental Insurance (Check one of the three boyes)
ο.	Parent Responsible for Dental Insurance (Check one of the three boxes) Neither parent is required to maintain dental insurance for the benefit of the children. A health benefit plan is not available at reasonable cost through either parent's employer or union. If the parents receive child support services through the Family Support Division, the parents shall notify the Family Support Division of any changes in employment, whether dental insurance is available through their employer, other group plan or the Affordable Care Act, provide the name of the insurance provider when coverage is available, and any other changes in access to health insurance coverage.
	☐ Petitioner ☐ Respondent shall maintain and pay the cost of dental insurance for the benefit of the children.
6.	Medical and Dental Insurance for the Children
	You must enter an amount on both lines, even if you enter "0." These amounts should also be entered on line 6c of the Form 14.
	The total cost of medical and/or dental insurance paid by Petitioner for the minor children is \$ per month.
	The total cost of medical and/or dental insurance paid by Respondent for the minor children is \$ per month.
	In the event either parent is required to maintain medical or dental insurance, the parent providing the health benefit plan shall provide to the other parent an insurance identification card.
	If support rights have been assigned to the state of Missouri or the Family Support Division is providing support enforcement services to either parent, the parent paying support shall notify the Family Support Division regarding the availability of medical insurance coverage through an employer or a group plan, provide the name of the insurance provider when coverage is available, and inform the division of any change in access to such insurance coverage.

Health Expenses Not Covered by Insurance

7.	Medical, Dental, Vision, or Psychological Expenses not Covere	ed by Insurance	
	Any parent who receives a bill for medical, dental, vision or psyshall submit a copy of that bill to the other parent within 30 days		
	(Check one of the three boxes)		
	The parent ☐ receiving support ☐ paying support will pa and dental expenses of the children not covered by insurar parent paying expenses for percent of all such parent paying expenses and are in excess of \$250 per yea uninsured extraordinary costs set forth in Paragraph 8 below "receiving support" or parent "paying support" if you choose Medical and dental expenses are defined by §213(d)(1)(A)	nce. Other pare n expenses that or per child. This ow. §454.603.5(e this option)	nt will reimburse the are actually paid by the does not include the 2), RSMo. (Check parent
	§454.633.3, RSMo provides that if you have checked this first box in P percentage, then each parent will be responsible for one-half of all reas expenses of the children not covered by insurance except as set forth	sonable and neces	sary medical or dental
	☐ The parent ☐ receiving support ☐ paying support will be necessary medical or dental expenses of the children not oparent does not have the financial resources to contribute expenses of the children not covered by insurance. This do listed in Paragraph 8 below. §454.603.5(2), RSMo. (Check "paying support" if you choose this option)	covered by insult to the payment bes not apply to	rance. The other of medical or dental the medical costs
	All reasonable and necessary medical or dental expenses insurance. §454.603.5(1), RSMo.	of the children a	are covered by
0	Downsont of Universal Extraordinary Medical Costs		
8.	Payment of Uninsured Extraordinary Medical Costs Extraordinary medical costs are predictable and recurring, suc	h as avnansas f	for dental treatment
	orthodontic treatment, asthma treatment and physical therapy.		
	in the Form 14 calculation.	·	
	If no extraordinary medical costs are to be included on the Form 14, you may	ay leave this inform	ation blank.
	Uncovered Extraordinary Medical Costs to be Paid by Parent Paying Support included on the Form 14	Amoun	t of Expense
		\$	per month
		\$	per month
		\$	per month
	The total cost of these uncovered extraordinary medical costs of the month.	children is \$	per
	You must include this amount on the Form 14 - Line 6d		
	Uncovered Extraordinary Medical Costs to be Paid by Parent receiving Support included on the Form 14	Amoun	t of Expense
		\$	per month
		\$	per month
	1,0	\$	per month
	The total cost of these uncovered extraordinary medical costs of the month.	children is \$	per
	You must include this amount on the Form 14 - Line 6d		

Child Care Expenses

Child care expenses related to employment are expenses incurred by a parent during periods of time while the parent is working and the children are in his or her physical custody.

9.	Wo	ork-Related Child Care Costs				
	The work-related child care expenses of the parent receiving support are \$ per month.					
	Th	e work-related child care expenses of the parent paying support are \$ per month.				
	(C	heck one of the four boxes)				
		There are no work-related child care costs incurred by the parents. The work-related child care costs will be included in the child support calculation on the Form 14.				
		The amount of work-related child care costs for the parent receiving support must be placed on Line 6a(1) of the Form 14. The amount of work-related child care costs for the parent paying support must be placed on Line 6b of the Form 14.				
		Each parent will pay their own reasonable work-related child care expenses related to his or her employment. The cost of reasonable work-related child care expenses has not been included in the child support calculation on the Form 14. Neither parent will reimburse the other parent for any portion of the child care expenses.				
		The parent paying support shall reimburse the parent receiving support for percent of all reasonable work-related child care expenses actually paid by the parent receiving support. The work related child care expenses have not been included on the Form 14. To be eligible for reimbursement of work-related child care expenses, the parent receiving support must appropriately report expenses to the Internal Revenue Service.				
10.		ild Care Expenses Unrelated to Employment				
	Inc	idental child care costs not related to employment are to be paid by the parent with physical				

custody at the time the child care costs are incurred.

Extraordinary Child-Rearing Costs of the Children Including College Costs

Extraordinary Child-Rearing Costs

Extraordinary child-rearing costs may include, but are not limited to, the following expenses:

- Educational expenses for college or post-secondary education,
- Special, private or parochial elementary and secondary schooling expenses,
- · Tutoring sessions,
- Camps,
- · Lessons.
- Athletic activities,
- · Travel and other activities intended to enhance the athletic, social or cultural development of a child.

11. Educational Expenses for College or Post-Secondary Education

As used herein, educational expenses for college or post-secondary education (also referred to as college expenses) include tuition, fees, books, dormitory cost for room and board. It does not include room and board while residing with either parent. This term shall be the actual cost to the child. In the event the child receives a scholarship or other aid which reduces the tuition, fees, books, or dormitory costs for room and board, then the educational expenses for college or post-secondary education does not include the amount of such scholarship or aid. For this purpose, loans to the student shall not be considered 'scholarship or other aid'.

The maximum educational expenses for college or post-secondary education, as defined herein, shall not exceed the cost for tuition, fees, books, and dormitory costs for room and board at the University of Missouri at Columbia, regardless of what institution the child attends.

Responsibility for educational expenses for college or post-secondary education shall not exceed more than eight semesters at a college or university.

Continued Eligibility for Child Support when Child is in College

§452.340.5, RSMo provides that "[t]o remain eligible for such continued parental support, at the beginning of each semester **the child** shall submit to each parent a transcript or similar official document provided by the institution of vocational or higher education which includes the courses the child is enrolled in and has completed for each term, the grades and credits received for each such course, and an official document from the institution listing the courses which the child is enrolled in for the upcoming term and the number of credits for each such course."

The child must carry a minimum number of credit hours each semester.

12. Extraordinary Child-Rearing Costs

Extraordinary child-rearing costs incurred by the parents may be included on the Form 14, or the parents may agree to divide these costs on some percentage basis. The extraordinary child-rearing costs are to be paid as set forth in the next paragraph.

Part B, Page 7, Paragraph 13, of this Parenting Plan

13. Payment of Extraordinary Child-Rearing Costs of the Children

a. Extraordinary Child-Rearing Costs included on the Form 14

Extraordinary Child-Rearing Costs Paid by Parent Paying Support included on the Form 14	Amo	ount of Expense
raying Support included on the Form 14	\$	per month
	\$	per month
	\$ \$	per month
The total cost of these extraordinary child-rearing costs of the children is \$	Φ	
The total cost of these extraordinary child-realing costs of the children is \$		per month.
You must include this amount on the Form 14 - Line 6e		
Future and in a man Obilid Department Coate Dailed by Demant	Λmc	ount of Expense
Extraordinary Child-Rearing Costs Paid by Parent	AIIIC	dill of Expense
Receiving Support included on the Form 14	Φ	
	\$	per month
	\$	per month
	\$	per month
The total cost of these extraordinary child-rearing costs of the children is \$		per month.
You must include this amount on the Form 14 - Line 6e		
 Extraordinary Child-Rearing Costs not included on the F 	Form 14	
 Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent 	Perce	ntage to be Paid by t Receiving Support
o. Extraordinary Child-Rearing Costs not included on the F	Perce	ntage to be Paid by t Receiving Support %
Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent	Perce	t Receiving Support
Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent	Perce	t Receiving Support
Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent Paying Support not included on the Form 14 Parent receiving support will reimburse the other parent the above perothese extraordinary child-rearing costs of the children so long as those	Perce Paren – – centage am	t Receiving Support
Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent Paying Support not included on the Form 14 Parent receiving support will reimburse the other parent the above perothese extraordinary child-rearing costs of the children so long as those	Perce Paren – – centage am	t Receiving Support
Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent Paying Support not included on the Form 14 Parent receiving support will reimburse the other parent the above perothese extraordinary child-rearing costs of the children so long as those the other parent.	Perce Paren - - - centage am expenses	t Receiving Support
Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent Paying Support not included on the Form 14 Parent receiving support will reimburse the other parent the above perothese extraordinary child-rearing costs of the children so long as those the other parent. Extraordinary Child-Rearing Costs Paid by Parent	Perce Paren - - centage am expenses	t Receiving Support """ """ """ """ """ """ """ """ """
Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent Paying Support not included on the Form 14 Parent receiving support will reimburse the other parent the above perothese extraordinary child-rearing costs of the children so long as those the other parent.	Perce Paren - - centage am expenses	t Receiving Support """ """ """ """ """ """ """ """ """
Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent Paying Support not included on the Form 14 Parent receiving support will reimburse the other parent the above perothese extraordinary child-rearing costs of the children so long as those the other parent. Extraordinary Child-Rearing Costs Paid by Parent	Perce Paren - - centage am expenses	t Receiving Support % % % % nount of each of are actually paid by entage to be Paid boot Paying Support %
Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent Paying Support not included on the Form 14 Parent receiving support will reimburse the other parent the above perothese extraordinary child-rearing costs of the children so long as those the other parent. Extraordinary Child-Rearing Costs Paid by Parent	Perce Paren - - centage am expenses	t Receiving Support """ """ """ """ """ """ """ """ """
Extraordinary Child-Rearing Costs not included on the F Extraordinary Child-Rearing Costs Paid by Parent Paying Support not included on the Form 14 Parent receiving support will reimburse the other parent the above perothese extraordinary child-rearing costs of the children so long as those the other parent. Extraordinary Child-Rearing Costs Paid by Parent	Perce Paren - - centage am expenses	t Receiving Support """ """ """ """ """ """ """ """ """

FORM NO. 14 CHILD SUPPORT AMOUNT CALCULATION WORKSHEET

☐ Respondent / ☐ Petitioner is the "Parent Paying Support"	PARENT RECEIVING	PARENT PAYING	COMBINED
Total Number of Children:	SUPPORT	SUPPORT	COMBINED
1. MONTHLY GROSS INCOME			
1a. Monthly court-ordered maintenance being received			
2. ADJUSTMENTS			
2a. Other monthly child support pursuant to court or administrative order			
2b. Monthly court-ordered maintenance being paid			
2c. Monthly support obligation for other children.			
(1) Number of other children primarily residing in each parent's custody			
(2) Each parent's support obligation from support schedule using the parent's Line 1 monthly gross income		, elle	
(3) Monthly child support received under court or administrative order for children included in line 2c(1)		.47	
2c. TOTAL adjustment [Line 2c(2) minus Line 2c(3)]			
3. ADJUSTED MONTHLY GROSS INCOME (sum of lines 1 and 1a, minus lines 2a, 2b and 2c).			
4. PROPORTIONATE SHARE OF COMBINED ADJUSTED MONTHLY GROSS INCOME (Each parent's line 3 income divided by combined line 3 income).			
5. BASIC CHILD SUPPORT AMOUNT	O.X/		
(From support chart using combined line 3 income).	()		
6. ADDITIONAL CHILD-REARING COSTS OF PARENTS			
6a. Child Care Costs of Parent Receiving Support			
(1) Reasonable work-related child care costs of the parent receiving support.			
(2) Child Care Tax Credit (See Form 14 Directions)			
6a. TOTAL adjusted Child Care Costs [Line 6a(1) minus Line 6a(2)]			
6b. Reasonable work-related child care costs of the parent paying support			
6c. Health insurance costs for the children who are subjects of this proceeding			
6d. Uninsured agreed-upon or court-ordered extraordinary medical costs			
6e. Other agreed-upon or court-ordered extraordinary child-rearing costs			
7. TOTAL ADDITIONAL CHILD-REARING COSTS (Enter sum of lines 6a, 6b, 6c, 6d and 6e).			
8. TOTAL COMBINED CHILD SUPPORT COSTS (Sum of line 5 and line 7).			
 EACH PARENT'S SUPPORT OBLIGATION (Multiply line 8 by each parent's line 4) 			
 CREDIT FOR ADDITIONAL CHILD-REARING COSTS (Line 7 of parent paying support). 			
11. ADJUSTMENT FOR A PORTION OF AMOUNTS EXPENDED BY THE PARENT OBLIGATED TO PAY SUPPORT DURING PERIODS OF OVERNIGHT VISITATION OR CUSTODY. (See Form 14 Directions) (Multiply line 5 by%).			
12. PRESUMED CHILD SUPPORT AMOUNT (Line 9 minus lines 10 and 11).			

Amount of Child Support

14.	Presumed Monthly Amount of Child Support (Complete all applicable amounts) The court-ordered support amount is set forth in Part B, Paragraph 16.
	The presumed child support amount calculated pursuant to Form 14 for six children is:\$ The presumed child support amount calculated pursuant to Form 14 for five children is:\$ The presumed child support amount calculated pursuant to Form 14 for four children is:\$ The presumed child support amount calculated pursuant to Form 14 for three children is:\$ The presumed child support amount calculated pursuant to Form 14 for two children is:\$ The presumed child support amount calculated pursuant to Form 14 for one child is:\$
15.	Should the court order the presumed monthly amount of child support? (Check one of the two boxes)
	Court-ordered child support will be set at the time of the court proceeding. The court is not bound by the suggestions of the parents and may set an amount greater or less than the suggested amounts of court-ordered child support set forth in this <i>Parenting Plan</i> . If the court approves and adopts this plan, then the support provisions herein will become the order of the court.
	 Yes. The court-ordered child support is the same as the presumed child support amount. The presumed child support amount as calculated herein is not rebutted as being unjust and inappropriate. No. The court-ordered child support is different from the presumed child support amount in the Form 14. After consideration of all statutory and other relevant factors pursuant to §452.340.8, RSMo, the presumed child support amount is rebutted as unjust and inappropriate due to
	, 5
16.	Court-Ordered Child Support (Check all applicable boxes)
	This is the amount of child support that actually will be paid by the parent paying support.
	You should check each box that applies. For example, if this <i>Parenting Plan</i> pertains to three children, then you should check the boxes for three children, two children and one child. You should also enter an amount of support for three children, two children, and one child, respectively. You must attach a Form 14 for each level. For example, if you have three children, then you must attach one Form 14 for three children, one Form 14 for two children, and one Form 14 for one child. If you check one of the boxes below, you must check all the boxes below it. Once again, if you only check the box for two children and do not check the box for one child, then no support is owed when only one child remains.
	Six or More Children - The parent paying support is to pay to the parent receiving support
	\$ per month when the parent receiving support is entitled to support for six or more children covered by this <i>Parenting Plan</i> .
	Five Children - The parent paying support is to pay to the parent receiving support \$ per month when the parent receiving support is entitled to support for five children covered by this <i>Parenting Plan</i> .
	Four Children - The parent paying support is to pay to the parent receiving support \$ per month when the parent receiving support is entitled to support for four children covered by this <i>Parenting Plan</i> .
	Three Children - The parent paying support is to pay to the parent receiving support \$ per month when the parent receiving support is entitled to support for three children covered by this <i>Parenting Plan</i> .
\\\ \\\	Two Children - The parent paying support is to pay to the parent receiving support \$ per month when the parent receiving support is entitled to support for two children covered by this <i>Parenting Plan</i> .
	One Child - The parent paying support is to pay to the parent receiving support \$ per month when the parent receiving support is entitled to support for one child covered by this <i>Parenting Plan</i> .

17.	Starting Date for Child Support (Check one of Part B, Paragraph 16)	of the two boxes if either par	ent is paying child support in
	Notification by the Parent Receiving Support whe Missouri law provides that "[u]nless otherwise agreed the support of the child are terminated by emancipation have the duty to notify the parent obligated to pay supentitled to receive child support shall be liable to the pemancipation of a minor child, plus interest." §452.37	I in writing or expressly provided in on of the child. The parent entitled pport of the child's emancipation a parent obligated to pay support for	to receive child support shall nd failing to do so, the parent
Inc	☐ The first child support payment is due on ☐ The first child support payment is due on	•	judgment.
inc	ome Tax Considerations		10·
18.	Income Tax Dependents		Y G.
	The Form 14 calculation assumes that the parent recepaying support is entitled to claim one or more of the and the second box in Paragraph 15 should be check	children, then the Form 14 guideli	en as dependents. If the parent nes are unjust and inappropriate
	The parents shall be entitled to claim the mir follows:	nor children as dependents f	or income tax purposes as
	Name of Child	In odd numbered tax years, this parent will claim this child as a dependent	In even numbered tax years, this parent will claim this child as a dependent
		/.	
	<	, C	
	R	*	

Parent paying support must be current with all support obligations as of December 31 of the tax year in which the child is to be claimed. Each parent will sign any appropriate documents to allow the other parent to make such claims.

Payment of Child Support and Income Withholding

Income Withholding

Income Withholding means that the child support is taken directly out of the paycheck of the parent paying support. These payments could be taken out of money from an employer, or other types of payments like Social Security disability benefits, unemployment compensation benefits or military retirement benefits. The amount withheld is sent to the Family Support Payment Center. The Family Support Payment Center will then forward the support to the parent receiving support. Child support withheld under an income withholding order cannot be sent directly to the parent receiving support. A record will be kept of all payments. If the parent paying support is currently unemployed or self-employed, income withholding may still be ordered, but it will not take effect until the parent paying support begins receiving regular income.

If income withholding is not ordered, then the child support may be paid directly to the parent receiving support. The parent paying support may also voluntarily send payments to the Family Support Payment Center. If the child support is not paid to the Family Support Payment Center, it is extremely important that each parent keep accurate records of the amount of child support paid. This means that the parent paying support may not receive credit for his or her payments if he or she does not have receipts or cancelled checks. Because of this, it is proper to request a receipt from the parent receiving support.

If parents receive Temporary Assistance For Needy Families (TANF) benefits through the Missouri Family Support Division or receive child support enforcement services through the Missouri Family Support Division, child support **must** be paid through the Family Support Payment Center.

Even if the court does not order income withholding right now, the Family Support Division may issue an income withholding order at a later time if the parent paying support fails to make timely child support payments as ordered.

19.	pport in Part B, Paragraph 16)
	Child support shall be paid through income withholding. An application for income withholding for support shall be prepared by the parent receiving support and issued by the circuit clerk upon the effective date of this judgment. Child support is ordered to be paid to the Family Support Payment Center, PO Box 109001, Jefferson City, Missouri, 65110-9001.
	Income withholding will not issue because a written agreement has been reached between the parents that provides for an alternative arrangement. Child support shall be paid directly to the Family Support Payment Center, PO Box 109001, Jefferson City, Missouri, 65110-9001.
	Income withholding will not issue because there is good cause not to require immediate income withholding for the reason that implementation of an immediate withholding would not be in the best interest of the child and the parent paying support has made timely payments of all previously ordered support. Child support shall be paid directly to the Family Support Payment Center, PO Box 109001, Jefferson City, Missouri, 65110-9001.
	Income Withholding will not issue because a written agreement has been reached between the parents that provides for an alternative arrangement. Child support shall be paid directly to the parent receiving support.
	Income Withholding will not issue because there is good cause not to require immediate income withholding for the reason that implementation of an immediate withholding would not be in the best interest of the child and the parent paying support has made timely payments of all previously ordered support. Child support shall be paid directly to the parent receiving support.

. Additional Provisions Pertaining to Su	ipport of the	Children:			
			.0		
(Petitioner - Sign above)		(Petitioner - Print your name above)			
Attorney for Petitioner - Sign above)		(Attorney for Petitioner - Print your name above)			
Respondent - Sign above)		(Respondent - Print your name above)			
Attorney for Respondent - Sign above)		(Attorney for Respondent - Print your name above)			
Guardian ad Litem - Sign above)		(Guardian ad Litem - Print your name above)			
neard by a Family Court Judge)		a Family Court Commissioner)			
		nd Recommendations of Commissioner:			
Date)	(Commission All orders as Commission court.	nd these findings and recommendations of the ner are confirmed and adopted as the judgment of the			
	(Judge)	(Date)			

2020 Schedule of Basic Child Support Obligation

Combined	One	Two	Three	Four	Five	Six
Adjusted	Child	Children	Children	Children	Children	Children
Gross						
Income						
0 – 1100	60	60	60	60	60	60
1150	91	94	94	95	95	95
1200 1250	122 153	127 161	128 162	129 164	130 164	130 165
1300	184	194	196	198	199	200
1350	215	228	230	233	234	235
1400	246	261	264	267	269	270
1450	277	295	298	302	303	305
1500	306	328	332	336	338	340
1550	315	362	366	371	373	375
1600	324	395	400	405	408	410
1650	333	429	434	440	442	445
1700	342	462	468	474	477	480
1750	350	496	502	509	512	515
1800	359	529	536	543	547	550
1850	368	561	570	578	581	585
1900	377	574	604	612	616	620
1950	386	587	638	647	651	655
2000	394	600	672	681	686	690
2050	403	613	706	716	720	725
2100	411 420	626	740	750	755	760
2150 2200	429	640 653	773 789	785 819	790 825	795 830
2250	437	666	805	854	859	865
2300	446	679	821	888	894	900
2350	455	692	837	923	929	935
2400	463	705	853	952	964	970
2450	472	719	869	970	998	1005
2500	480	732	884	988	1033	1040
2550	489	745	900	1006	1068	1075
2600	498	758	916	1023	1103	1110
2650	506	771	932	1041	1137	1145
2700	515	784	948	1059	1165	1180
2750	524	797	964	1077	1184	1215
2800	532	811	980	1094	1204	1250
2850	541	824	996	1112	1223	1285
2900 2950	550 558	837 850	1012 1028	1130 1148	1243 1263	1320 1355
3000	567	863	1043	1166	1282	1390
3050	575	876	1059	1183	1302	1415
3100	584	889	1075	1201	1321	1436
3150	593	903	1091	1219	1341	1457
3200	601	916	1107	1237	1360	1479
3250	610	929	1123	1254	1380	1500
3300	619	942	1139	1272	1399	1521
3350	627	955	1155	1290	1419	1542
3400	636	967	1169	1306	1436	1561
3450	645	979	1182	1320	1452	1579
3500	653	990	1195	1335	1468	1596
3550	662	1001	1208	1349	1484	1613
3600	670	1013	1221	1364	1500	1631
3650	679	1024	1234	1378	1516	1648
3700	688	1036	1247	1393	1532	1666
3750	696	1047	1260	1408	1548	1683
3800	705	1058	1273	1422	1564	1700
3850 3900	714 722	1070 1081	1286 1299	1437 1451	1580 1596	1718 1735
3900	122	1001	1233	1401	1090	1733

Combined	One	Two	Three	Four	Five	Six
Adjusted Gross	Child	Children	Children	Children	Children	Children
Income						
3950	731	1093	1313	1467	1613	1754
4000	738	11093	1328	1484	1632	1774
4050	746	1119	1343	1500		
					1650	1794 1814
4100	754	1131	1358	1517	1669	
4150	762	1144	1373	1534	1687	1834
4200	770	1157	1388	1551	1706	1854
4250	777	1170	1404	1568	1725	1875
4300	785	1182	1419	1585	1743	1895
4350	793	1195	1434	1601	1762	1915
4400	800	1207	1448	1617	1779	1934
4450	807	1218	1461	1632	1795	1951
4500	814	1229	1474	1646	1811	1969
4550	820	1238	1484	1658	1824	1983
4600	825	1246	1494	1669	1836	1996
4650	831	1254	1504	1680	1848	2009
4700	836	1263	1514	1691	1860	2022
4750	842	1271	1523	1702	1872	2035
4800	847	1279	1533	1712	1884	2048
4850	853	1287	1543	1723	1896	2061
4900	858	1296	1553	1734	1908	2074
4950	864	1304	1562	1745	1920	2074
5000	869	1312	1572	1756	1932	2100
5050	875	1320	1582	1767	1932	2113
5100	880	1328	1592	1778	1956	2126
5150		1337		1778	1968	2139
	886		1601 1608	1796		
5200	890	1342			1975	2147
5250	893	1347	1613	1802	1982	2154
5300	896	1352	1619	1808	1989	2162
5350	900	1357	1624	1814	1996	2169
5400	903	1362	1630	1820	2002	2177
5450	907	1366	1635	1827	2009	2184
5500	910	1371	1641	1833	2016	2191
5550	913	1376	1646	1839	2023	2199
5600	917	1381	1652	1845	2030	2206
5650	920	1386	1657	1851	2036	2213
5700	923	1391	1663	1857	2043	2221
5750	927	1396	1668	1864	2050	2228
5800	930	1401	1674	1870	2057	2236
5850	933	1404	1677	1873	2061	2240
5900	936	1408	1680	1877	2064	2244
5950	939	1411	1683	1880	2068	2248
6000	943	1415	1686	1883	2071	2251
	943	1418	1689	1886	2075	2255
6050	949	1410				
6100			1691	1889	2078	2259
6150	952	1425	1694	1893	2082	2263
6200	955	1429	1697	1896	2085	2267
6250	958	1432	1700	1899	2089	2271
6300	961	1436	1703	1902	2092	2274
6350	964	1439	1706	1905	2096	2278
6400	967	1443	1709	1909	2099	2282
6450	970	1446	1711	1912	2103	2286
6500	974	1453	1720	1922	2114	2298
6550	978	1460	1730	1932	2125	2310
6600	983	1468	1739	1943	2137	2323
6650	987	1475	1749	1953	2149	2336
6700	991	1482	1758	1964	2160	2348
6750	996	1489	1768	1975	2172	2361
6800	1000	1496	1777	1985	2184	2374
6850						
	1004	1503	1787	1996	2195	2387
6900	1008	1511	1796	2007	2207	2399
6950	1013	1518	1806	2017	2219	2412
	4017					
7000 7050	1017 1021	1525 1532	1815 1825	2028	2231	2425 2437

		r <u>-</u>	·	r _		
Combined	One	Two	Three	Four	Five	Six
Adjusted	Child	Children	Children	Children	Children	Children
Gross Income						
7150	1028	1543	1837	2052	2258	2454
7200	1031	1546	1840	2055	2261	2457
7250	1033	1549	1842	2058	2264	2460
7300	1036	1552	1845	2060	2267	2464
7350	1038	1555	1847	2063	2269	2467
7400	1041	1558	1849	2066	2272	2470
7450	1044	1561	1852	2069	2275	2473
7500	1046	1563	1854	2071	2278	2477
7550	1049	1566	1857	2074	2281	2480
7600	1051	1569	1859	2077	2284	2483
7650	1054	1572	1862	2079	2287	2486
7700	1057	1575	1864	2082	2290	2490
7750	1059	1578	1866	2085	2293	2493
7800	1063	1583	1871	2090	2299	2499
7850	1066	1588	1876	2095	2305	2505
7900	1070	1593	1881	2101	2311	2512
7950	1074	1597	1885	2106	2317	2518
8000	1074	1602	1890	2111	2323	2525
8050	1081	1607	1895	2117	2329	2531
8100	1084	1611	1900	2122	2334	2537
			1		2340	2544
8150	1088	1616	1905	2128		
8200	1092	1621	1909	2133	2346	2550
8250	1095	1625	1914	2138	2352	2556
8300	1099	1630	1919	2143	2357	2563
8350	1102	1635	1923	2148	2363	2569
8400	1106	1639	1928	2154	2369	2575
8450	1111	1646	1936	2162	2378	2585
8500	1116	1653	1944	2171	2388	2596
8550	1121	1661	1952	2180	2398	2607
8600	1126	1668	1960	2189	2408	2617
8650	1131	1675	1968	2198	2418	2628
8700	1137	1683	1976	2207	2428	2639
8750	1142	1690	1984	2216	2438	2650
8800	1147	1697	1992	2225	2448	2661
8850	1152	1704	2000	2234	2458	2672
8900	1157	1712	2008	2243	2468	2682
8950	1163	1719	2016	2252	2478	2693
9000	1168	1726	2025	2261	2488	2704
9050	1173	1734	2033	2270	2497	2715
	1178	1734	2033	2279	2507	2726
9100	1183	1741	2041	2288	2517	2736
9150						
9200	1189	1756	2057	2298	2527	2747
9250	1194	1763	2065	2307	2537	2758
9300	1199	1770	2073	2316	2547	2769
9350	1204	1778	2081	2325	2557	2780
9400	1209	1785	2089	2334	2567	2790
9450	1213	1791	2097	2343	2577	2801
9500	1217	1798	2105	2352	2587	2812
9550	1221	1804	2114	2361	2597	2823
9600	1225	1810	2122	2370	2607	2834
9650	1229	1816	2130	2379	2617	2845
9700	1232	1823	2138	2388	2627	2856
9750	1236	1829	2146	2397	2637	2866
9800	1240	1835	2154	2406	2647	2877
9850	1244	1841	2163	2416	2657	2888
9900	1248	1848	2171	2425	2667	2899
9950	1252	1854	2179	2434	2677	2910
10000	1255	1860	2187	2443	2687	2921
10050	1259	1866	2195	2452	2697	2932
10100	1263	1873	2203	2461	2707	2943
10150	1267	1879	2211	2470	2717	2954
10200	1271	1885	2220	2479	2727	2964
10250	1274	1891	2228	2488	2737	2975
10300	1278	1898	2236	2497	2747	2986

ſ	Combined	One	Two	Three	Four	Five	Six
ı							
ı	Adjusted	Child	Children	Children	Children	Children	Children
ı	Gross						
ı	Income		1				
ı	10350	1282	1904	2244	2507	2757	2997
ſ	10400	1286	1910	2252	2516	2767	3008
Ì	10450	1289	1915	2258	2522	2774	3015
ł	10500	1292	1919	2262	2527	2780	3021
ŀ		_					
ļ	10550	1295	1923	2267	2532	2785	3027
ı	10600	1298	1927	2271	2537	2791	3034
I	10650	1301	1932	2276	2542	2796	3040
d	10700	1304	1936	2280	2547	2802	3046
١	10750	1307	1940	2285	2552	2807	3052
₫							
ŀ	10800	1310	1944	2289	2557	2813	3058
ı	10850	1313	1948	2294	2562	2819	3064
ı	10900	1316	1952	2298	2567	2824	3070
I	10950	1319	1956	2303	2572	2830	3076
İ	11000	1322	1960	2307	2577	2835	3082
ŀ					2583		3088
ŀ	11050	1325	1965	2312		2841	
Į	11100	1327	1969	2317	2588	2846	3094
ı	11150	1330	1973	2321	2593	2852	3100
j	11200	1333	1977	2326	2598	2857	3106
ŀ	11250	1336	1981	2330	2603	2863	3112
ŀ							
ļ	11300	1339	1985	2335	2608	2869	3118
Į	11350	1342	1989	2339	2613	2874	3124
ı	11400	1345	1993	2344	2618	2880	3130
ľ	11450	1349	1998	2349	2623	2886	3137
İ	11500	1353	2004	2354	2630	2892	3144
ŀ	11550	1357	2009	2360	2636	2900	3152
ŀ							
ı	11600	1361	2015	2366	2642	2907	3159
ı	11650	1365	2020	2371	2649	2914	3167
I	11700	1370	2026	2377	2655	2921	3175
I	11750	1374	2031	2383	2662	2928	3182
ł	11800	1378	2037	2389	2668	2935	3190
ŀ							
ļ	11850	1382	2042	2394	2674	2942	3198
ı	11900	1386	2048	2400	2681	2949	3205
I	11950	1391	2054	2406	2687	2956	3213
Ì	12000	1395	2059	2411	2694	2963	3221
ł	12050	1399	2065	2417	2700	2970	3228
ŀ							
ļ	12100	1403	2070	2423	2706	2977	3236
ı	12150	1407	2076	2429	2713	2984	3244
I	12200	1412	2081	2434	2719	2991	3251
İ	12250	1416	2087	2440	2726	2998	3259
ł	12300	1420	2093	2446	2732	3005	3267
ŀ							
ļ	12350	1424	2098	2452	2738	3012	3274
ı	12400	1428	2104	2457	2745	3019	3282
ſ	12450	1433	2109	2463	2751	3026	3290
ľ	12500	1437	2115	2469	2758	3033	3297
ŀ	12550	1441	2120	2475	2764	3041	3305
ŀ							
ļ	12600	1445	2126	2480	2771	3048	3313
Į	12650	1449	2131	2486	2776	3054	3320
ı	12700	1452	2135	2489	2780	3058	3324
ľ	12750	1454	2138	2492	2784	3062	3328
ŀ	12800	1457	2141	2495	2787	3066	3333
ŀ							
ŀ	12850	1460	2145	2498	2791	3070	3337
ı	12900	1462	2148	2502	2794	3074	3341
١	12950	1465	2151	2505	2798	3078	3345
ľ	13000	1468	2155	2508	2802	3082	3350
Ì	13050	1470	2158	2511	2805	3086	3354
ŀ		1473		2514	2809	3090	3358
ŀ	13100		2161				
ı	13150	1476	2165	2518	2812	3093	3363
ı	13200	1478	2168	2521	2816	3097	3367
ľ	13250	1481	2171	2524	2819	3101	3371
ŀ	13300	1484	2175	2527	2823	3105	3375
ŀ		1486	2178	2531	2827	3109	3380
ļ	13350				2830	2112	3384
	13400	1489	2182	2534		3113	
	13400	1489 1492	2182 2185	2534	2834	3117	3388

Combined	One	Two	Three	Four	Five	Six
Adjusted	Child	Children	Children	Children	Children	Children
Gross						
Income						
13550	1497	2192	2543	2841	3125	3397
13600	1500	2195	2547	2844	3129	3401
13650	1502	2198	2550	2848	3133	3405
13700	1505	2202	2553	2852	3137	3410
13750	1508	2205	2556	2855	3141	3414
13800	1510	2208	2559	2859	3145	3418
13850	1513	2212	2563	2862	3149	3423
13900	1518	2218	2570	2871	3158	3433
13950	1523	2226	2579	2881	3169	3444
14000	1527	2233	2587	2890	3179	3456
14050	1532	2240	2596	2900	3190	3467
14100	1537	2248	2605	2909	3200	3479
14150	1542	2255	2613	2919	3211	3490
14200	1547	2262	2622	2929	3221	3502
14250	1552	2270	2630	2938	3232	3513
14300	1557	2277	2639	2948	3243	3525
14350	1562	2284	2648	2957	3253	3536
14400	1567	2291	2656	2967	3264	3548
14450	1572	2299	2665	2977	3274	3559
14500	1577	2306	2674	2986	3285	3571
14550	1582	2313	2682	2996	3296	3582
14600	1587	2321	2691	3006	3306	3594
14650	1591	2328	2699	3015	3316	3605
14700	1596	2334	2707	3023	3326	3615
14750	1600	2341	2714	3032	3335	3625
14800	1605	2347	2722	3040	3345	3635
14850	1609	2354	2730	3049	3354	3646
14900	1613	2360	2737	3057	3363	3656
14950	1618	2367	2745	3066	3373	3666
15000	1622	2373	2752	3074	3382	3676
15050	1626	2380	2760	3083	3391	3686
15100	1631	2386	2768	3091	3401	3696
15150	1635	2393	2775	3100	3410	3707
15200	1639	2399	2783	3108	3419	3717
15250	1644	2406	2791	3117	3429	3727
			2798		3438	
15300	1648	2412		3125	3447	3737
15350	1653	2418	2806	3134		3747
15400	1657	2425	2813	3143	3457	3757
15450	1661	2431	2821	3151	3466	3768
15500	1666	2438	2829	3160	3475	3778
15550	1670	2444	2836	3168	3485	3788
15600	1674	2451	2844	3177	3494	3798
15650	1679	2457	2851	3185	3504	3808
15700	1683	2464	2859	3194	3513	3818
15750	1687	2470	2867	3202	3522	3829
15800	1692	2477	2874	3211	3532	3839
15850	1696	2482	2880	3217	3539	3847
15900	1699	2487	2885	3222	3545	3853
15950	1703	2491	2890	3228	3551	3859
16000	1706	2496	2894	3233	3556	3866
16050	1710	2500	2899	3238	3562	3872
16100	1713	2505	2904	3244	3568	3878
16150	1717	2510	2909	3249	3574	3885
16200	1720	2514	2913	3254	3579	3891
16250	1723	2519	2918	3259	3585	3897
16300	1727	2523	2923	3265	3591	3904
			2923			
16350	1730	2528		3270	3597	3910
16400	1734	2533	2932	3275	3603	3916
16450	1737	2537	2937	3280	3608	3922
16500	1741	2542	2942	3286	3614	3929
16550	1744	2546	2946	3291	3620	3935
16600	1748	2551	2951	3296	3626	3941
10050	1751	2556	2956	3301	3632	3948
16650 16700	1755	2560		3307		3954

Combined Gross Child Children Children Children Children Children C							
Gross Income	Combined	One	Two	Three	Four	Five	Six
	,	Child	Children	Children	Children	Children	Children
16750							
16800		4750	0505	0005	0040	0040	2000
16850							
16900							
16950							
17000 1775 2587 2988 3338 3672 3991 17050 1779 2592 2993 3348 3667 3997 17100 1786 2601 3002 3353 3689 4010 17200 1789 2605 3007 3359 3694 4016 17250 1792 2610 3011 3364 3700 4022 17350 1799 2619 3021 3374 3712 4034 17350 1799 2619 3021 3374 3712 4034 17400 1803 2624 3025 3379 3717 4041 17450 1806 2628 3030 3385 3723 4047 17500 1810 2633 3035 3390 3724 4059 17500 1813 2637 3034 3400 3740 4065 17500 1816 2646 3049 3405 <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>							
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 	19900	1959	2859	3307	3694	4063	4417

Combined	One	Two	Three	Four	Five	Six
Adjusted	Child	Children	Children	Children	Children	Children
Gross						
Income						
19950	1961	2864	3314	3701	4071	4426
20000	1964	2868	3320	3709	4080	4434
20050	1967	2873	3327	3716	4088	4443
20100	1970	2878	3333	3724	4096	4452
20150	1973	2883	3340	3731	4104	4461
20200	1976	2888	3347	3738	4112	4470
20250	1979	2893	3353	3746	4120	4479
20300	1981	2898	3360	3753	4128	4488
20350	1984	2903	3367	3761	4137	4496
20400	1987	2908	3373	3768	4145	4505
						4514
20450	1990	2913	3380	3775	4153	
20500	1993	2918	3387	3783	4161	4523
20550	1996	2923	3393	3790	4169	4532
20600	1999	2927	3400	3798	4177	4541
20650	2001	2932	3406	3805	4185	4550
20700	2004	2937	3413	3812	4194	4558
20750	2007	2942	3420	3820	4202	4567
20800	2010	2947	3426	3827	4210	4576
20850	2013	2952	3433	3835	4218	4585
				1		
20900	2016	2957	3440	3842	4226	4594
20950	2019	2962	3446	3849	4234	4603
21000	2021	2967	3453	3857	4242	4612
21050	2024	2972	3459	3864	4251	4620
21100	2027	2977	3466	3872	4259	4629
21150	2030	2982	3473	3879	4267	4638
21200	2033	2986	3479	3886	4275	4647
21250	2036	2991	3486	3894	4283	4656
21300	2039	2996	3493	3901	4291	4665
21350	2042	3001	3499	3909	4300	4674
21400	2044	3006	3506	3916	4308	4682
21450	2047	3011	3512	3923	4316	4691
	2050	3016	3519	3931	4324	4700
21500						
21550	2053	3021	3526	3938	4332	4709
21600	2056	3026	3532	3946	4340	4718
21650	2059	3031	3539	3953	4348	4727
21700	2062	3036	3546	3960	4357	4736
21750	2064	3041	3552	3968	4365	4744
21800	2067	3045	3559	3975	4373	4753
21850	2070	3050	3566	3983	4381	4762
21900	2073	3055	3572	3990	4389	4771
21950	2076	3060	3579	3998	4397	4780
22000	2079	3065	3585	4005	4405	4789
22050	2082	3070	3592	4012	4414	4798
22100	2084	3075	3599	4020	4422	4806
22150	2087	3080	3605	4027	4430	4815
22200	2090	3085	3612	4035	4438	4824
22250	2093	3090	3619	4042	4446	4833
22300	2096	3095	3625	4049	4454	4842
22350	2099	3100	3632	4057	4462	4851
22400	2102	3104		4064	4471	4860
			3638			
22450	2104	3109	3645	4072	4479	4868
22500	2107	3114	3652	4079	4487	4877
22550	2110	3119	3658	4086	4495	4886
		3124		4094		
22600	2113		3665		4503	4895
22650	2116	3129	3672	4101	4511	4904
22700	2119	3134	3678	4109	4519	4913
22750	2122	3139	3685	4116	4528	4922
22800	2124	3144	3692	4123	4536	4930
22850	2127	3149	3698	4131	4544	4939
22900	2130	3154	3705	4138	4552	4948
22950	2133	3159	3711	4146	4560	4957
23000	2136	3163	3718	4153	4568	4966
23050	2139	3168	3725	4160	4576	4975
23100	2142	3173	3731	4168	4585	4983

Combined Adjusted Gross Income Children Children Three Children Four Children Five Children 23150 2145 3178 3738 4175 4593 23200 2147 3183 3745 4183 4601 23300 2153 3198 3751 4190 4609 23300 2153 3193 3758 4197 4617 233400 2159 3203 3771 4212 4634 23450 2162 3208 3778 4220 4642 23500 2165 3213 3784 4227 4650 23550 2167 3218 3791 4224 4662 23500 2165 3213 3784 4227 4650 23550 2167 3218 3791 4242 4666 23550 2167 3222 3798 4242 4666 23650 2173 3227 3804 4249 4674 23	Six Children 4992 5001 5010 5019 5028 5037 5045 5054 5063 5072 5081 5099 5099
Gross Income 3178 3738 4175 4593 23150 2145 3178 3738 4175 4593 23200 2147 3183 3745 4183 4601 23250 2150 3188 3751 4190 4609 23300 2153 3193 3758 4197 4617 23350 2156 3198 3764 4205 4625 23400 2159 3203 3771 4212 4634 23500 2165 3218 3791 4224 4650 23550 2167 3218 3791 4234 4658 23500 2165 3213 3784 4227 4650 23550 2167 3222 3798 4242 4668 23650 2173 3227 3804 4249 4674 23700 2176 3232 3811 4257 4682 23750 2179 3237	4992 5001 5010 5019 5028 5037 5045 5054 5063 5072 5081 5090 5099
Income	5001 5010 5019 5028 5037 5045 5054 5063 5072 5081 5090 5099
23150 2145 3178 3738 4175 4593 23200 2147 3183 3745 4183 4601 23250 2150 3188 3751 4190 4609 23300 2153 3193 3758 4197 4617 23350 2156 3198 3764 4205 4625 23400 2159 3203 3771 4212 4634 23540 2162 3208 3778 4220 4642 23550 2167 3213 3784 4227 4650 23550 2167 3218 3791 4234 4658 23600 2170 3222 3798 4242 4666 23650 2173 3227 3804 4249 4674 23750 2179 3237 3811 4264 4691 23800 2182 3242 3824 4272 4699 23850 2185 32	5001 5010 5019 5028 5037 5045 5054 5063 5072 5081 5090 5099
23200 2147 3183 3745 4183 4601 23250 2150 3188 3751 4190 4609 23300 2153 3193 3758 4197 4617 23350 2156 3198 3764 4205 4625 23400 2159 3203 3771 4212 4634 23500 2165 3213 3784 4220 4642 23500 2165 3213 3784 4227 4650 23550 2167 3218 3791 4234 4658 23600 2170 3222 3798 4242 4666 23650 2173 3227 3804 4249 4674 23700 2176 3232 3811 4257 4682 23700 2176 3232 3811 4257 4682 23700 2173 3227 3804 4249 4674 23800 2182 32	5001 5010 5019 5028 5037 5045 5054 5063 5072 5081 5090 5099
23250 2150 3188 3751 4190 4609 23300 2153 3193 3758 4197 4617 23350 2156 3198 3764 4205 4625 23450 2162 3208 3771 4212 4634 23450 2165 3213 3784 4220 4642 23500 2165 3213 3784 4227 4650 23550 2167 3218 3791 4234 4658 23600 2170 3222 3798 4424 4666 23650 2173 3227 3804 4249 4674 23700 2176 3232 3811 4257 4682 23750 2179 3237 3804 4249 4674 23800 2182 3242 3824 4264 4691 23850 2185 3247 3831 4279 4707 23900 2187 32	5010 5019 5028 5037 5045 5054 5063 5072 5081 5090 5099
23300 2153 3193 3758 4197 4617 23350 2156 3198 3764 4205 4625 23400 2159 3203 3771 4212 4634 23450 2162 3208 3778 4220 4642 23500 2165 3213 3784 4227 4650 23550 2167 3218 3791 4234 4658 23600 2170 3222 3798 4242 4666 23650 2173 3227 3804 4249 4674 23700 2176 3232 3811 4257 4682 23750 2179 3237 3817 4264 4691 23800 2182 3242 3824 4279 4692 23850 2185 3247 3831 4279 4707 23950 2190 3257 3844 4294 4723 24000 2193 32	5019 5028 5037 5045 5054 5063 5072 5081 5090 5099
23400 2159 3203 3771 4212 4634 23450 2162 3208 3778 4220 4642 23500 2165 3218 3791 4234 4650 23550 2167 3218 3791 4234 4658 23600 2170 3222 3798 4242 4666 23650 2173 3227 3804 4249 4674 23700 2176 3232 3811 4257 4682 23750 2179 3237 3811 4264 4691 23800 2182 3242 3824 4272 4699 23850 2185 3247 3831 4279 4707 23900 2187 3252 3837 4286 4715 23950 2190 3257 3844 4294 4723 24000 2193 3262 3851 4301 4731 24000 2193 32	5037 5045 5054 5063 5072 5081 5090 5099
23450 2162 3208 3778 4220 4642 23500 2165 3213 3784 4227 4650 23550 2167 3218 3791 4234 4658 23600 2170 3222 3798 4242 4666 23650 2173 3227 3804 4249 4674 23700 2176 3232 3811 4257 4682 23750 2179 3237 3817 4264 4691 23800 2182 3242 3824 4272 4699 23850 2185 3247 3831 4279 4707 23900 2187 3252 3837 4286 4715 23950 2190 3257 3844 4294 4723 24000 2193 3262 3851 4309 4731 24100 2199 3272 3864 4316 4748 24150 2202 32	5045 5054 5063 5072 5081 5090 5099
23500 2165 3213 3784 4227 4650 23550 2167 3218 3791 4234 4658 23600 2170 3222 3798 4242 4666 23650 2173 3227 3804 4249 4674 23700 2176 3232 3811 4257 4662 23750 2179 3237 3817 4264 4691 23800 2182 3242 3824 4279 4699 23850 2185 3247 3831 4279 4707 23900 2187 3252 3837 4286 4715 23950 2190 3257 3844 4294 4723 24000 2193 3262 3851 4301 4731 24050 2196 3267 3857 4304 4749 24100 2193 3272 3864 4316 4748 24250 2202 32	5054 5063 5072 5081 5090 5099
23550 2167 3218 3791 4234 4658 23600 2170 3222 3798 4242 4666 23650 2173 3227 3804 4249 4674 23700 2176 3232 3811 4257 4682 23750 2179 3237 3817 4264 4691 23800 2182 3242 3824 4272 4699 23850 2185 3247 3831 4279 4707 23900 2187 3252 3837 4286 4715 23950 2190 3257 3844 4294 4723 24000 2193 3262 3851 4301 4731 24050 2196 3267 3864 4316 4748 24150 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 24250 2207 32	5063 5072 5081 5090 5099
23600 2170 3222 3798 4242 4666 23650 2173 3227 3804 4249 4674 23700 2176 3232 3811 4257 4682 23750 2179 3237 3817 4264 4691 23800 2182 3242 3824 4272 4699 23850 2185 3247 3831 4279 4707 23900 2187 3252 3837 4286 4715 23950 2190 3257 3844 4294 4723 24000 2193 3262 3851 4301 4731 24000 2196 3267 3857 4309 4739 24100 2199 3272 3864 4316 4748 24150 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 2450 2210 329	5072 5081 5090 5099
23650 2173 3227 3804 4249 4674 23700 2176 3232 3811 4257 4682 23750 2179 3237 3817 4264 4691 23800 2182 3242 3824 4272 4699 23850 2185 3247 3831 4279 4707 23900 2187 3252 3837 4286 4715 23950 2190 3257 3844 4294 4723 24000 2193 3262 3851 4301 4731 24050 2196 3267 3857 4304 4748 24100 2199 3272 3864 4316 4748 24150 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 2450 2207 3286 3884 4338 4772 24300 2210 329	5081 5090 5099
23700 2176 3232 3811 4257 4682 23750 2179 3237 3817 4264 4691 23800 2182 3242 3824 4272 4699 23850 2185 3247 3831 4279 4707 23900 2187 3252 3837 4286 4715 23950 2190 3257 3844 4294 4723 24000 2193 3262 3857 4309 4731 24150 2196 3267 3864 4316 4748 24150 2199 3272 3864 4316 4748 24150 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 24300 2210 3291 3890 4346 4780 24300 2210 3291 3890 4346 4788 24450 2213 32	5090 5099
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23800 2182 3242 3824 4272 4699 23850 2185 3247 3831 4279 4707 23900 2187 3252 3837 4286 4715 23950 2190 3257 3844 4294 4723 24000 2193 3262 3851 4301 4731 24050 2196 3267 3864 4316 4748 24100 2199 3272 3864 4316 4748 24100 2199 3272 3864 4316 4748 24200 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 24250 2207 3286 3884 4338 4772 24350 2210 3291 3890 4364 4780 24350 2213 3296 3897 4353 4788 24400 2216 33	
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23900 2187 3252 3837 4286 4715 23950 2190 3257 3844 4294 4723 24000 2193 3262 3851 4301 4731 24050 2196 3267 3857 4309 4739 24100 2199 3272 3864 4316 4748 24150 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 24350 2210 3291 3890 4346 4780 24350 2213 3296 3897 4353 4788 24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24500 2222 33	5
23950 2190 3257 3844 4294 4723 24000 2193 3262 3851 4301 4731 24050 2196 3267 3857 4309 4739 24100 2199 3272 3864 4316 4748 24150 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 24250 2207 3286 3884 4338 4772 24300 2210 3291 3890 4346 4780 24350 2213 3296 3897 4353 4788 24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24500 2222 3316 3924 4383 4821 24600 2227 33	5116
24000 2193 3262 3851 4301 4731 24050 2196 3267 3857 4309 4739 24100 2199 3272 3864 4316 4748 24150 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 24250 2207 3286 3884 4338 4772 24300 2210 3291 3890 4346 4780 24350 2213 3296 3897 4353 4788 24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24500 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5125
24050 2196 3267 3857 4309 4739 24100 2199 3272 3864 4316 4748 24150 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 24250 2207 3286 3884 4338 4772 24300 2210 3291 3890 4346 4780 24350 2213 3296 3897 4353 4788 24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24550 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5134
24100 2199 3272 3864 4316 4748 24150 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 24250 2207 3286 3884 4338 4772 24300 2210 3291 3890 4346 4780 24350 2213 3296 3897 4353 4788 24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24500 22225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5143
24150 2202 3277 3871 4323 4756 24200 2205 3281 3877 4331 4764 24250 2207 3286 3884 4338 4772 24300 2210 3291 3890 4346 4780 24350 2213 3296 3897 4353 4788 24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24500 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5152
24200 2205 3281 3877 4331 4764 24250 2207 3286 3884 4338 4772 24300 2210 3291 3890 4346 4780 24350 2213 3296 3897 4353 4788 24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24550 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5161
24250 2207 3286 3884 4338 4772 24300 2210 3291 3890 4346 4780 24350 2213 3296 3897 4353 4788 24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24550 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5169
24300 2210 3291 3890 4346 4780 24350 2213 3296 3897 4353 4788 24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24550 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5178
24350 2213 3296 3897 4353 4788 24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24550 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5187
24400 2216 3301 3904 4360 4796 24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24550 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5196
24450 2219 3306 3910 4368 4805 24500 2222 3311 3917 4375 4813 24550 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5205
24500 2222 3311 3917 4375 4813 24550 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5214
24550 2225 3316 3924 4383 4821 24600 2227 3321 3930 4390 4829	5223
24600 2227 3321 3930 4390 4829	5231
	5240
24650 2230 3326 3937 4397 4837	5249
	5258
24700 2233 3331 3943 4405 4845	5267
24750 2236 3336 3950 4412 4853	5276
24800 2239 3340 3957 4420 4862	5285
24850 2242 3345 3963 4427 4870	5293
24900 2245 3350 3970 4434 4878	5302
24950 2248 3355 3977 4442 4886	5311
25000 2250 3360 3983 4449 4894	5320
25050 2253 3365 3990 4457 4902 25100 2256 3370 3996 4464 4910	5329 5338
	5347
	5355
25200 2262 3380 4010 4479 4927 25250 2265 3385 4016 4486 4935	5364
25300 2268 3390 4023 4494 4943	5373
25350 2270 3395 4030 4501 4951	5382
25400 2273 3399 4036 4508 4959	5391
25450 2276 3404 4043 4516 4967	5400
25500 2279 3409 4050 4523 4976	5409
25550 2282 3414 4056 4531 4984	5417
25600 2285 3419 4063 4538 4992	5426
25650 2288 3424 4069 4546 5000	5435
25700 2290 3429 4076 4553 5008	5444
25750 2293 3434 4083 4560 5016	5453
25800 2296 3439 4089 4568 5025	5462
25850 2299 3444 4096 4575 5033	5471
25900 2302 3449 4103 4583 5041	5479
25950 2305 3454 4109 4590 5049	5488
26000 2308 3458 4116 4597 5057	5497
26050 2310 3463 4122 4605 5065	5506
26100 2313 3468 4129 4612 5073	
26150 2316 3473 4136 4620 5082	2015
26200 2319 3478 4142 4627 5090	5515 5524
26250 2322 3483 4149 4634 5098	5524
26300 2325 3488 4156 4642 5106	

Carabiand	0	T	Th	F	F!	Ci
Combined Adjusted	One Child	Two Children	Three Children	Four Children	Five Children	Six Children
Gross	Cilia	Cilliarcii	Cimarcii	Cimarcii	Cimarcii	Cimarcii
Income						
26350	2328	3493	4162	4649	5114	5559
26400	2331	3498	4169	4657	5122	5568
26450	2333	3503	4175	4664	5130	5577
26500	2336	3508	4182	4671	5139	5586
26550	2339	3513	4189	4679	5147	5594
26600	2342	3517	4195	4686	5155	5603
26650	2345	3522	4202	4694	5163	5612
26700	2348	3527	4209	4701 4708	5171	5621
26750 26800	2351 2353	3532 3537	4215 4222	4708	5179 5187	5630 5639
26850	2356	3542	4222	4723	5196	5648
26900	2359	3547	4235	4731	5204	5656
26950	2362	3552	4242	4738	5212	5665
27000	2365	3557	4248	4745	5220	5674
27050	2368	3562	4255	4753	5228	5683
27100	2371	3567	4262	4760	5236	5692
27150	2373	3572	4268	4768	5244	5701
27200	2376	3576	4275	4775	5253	5710
27250	2379	3581	4282	4783	5261	5718
27300	2382	3586	4288	4790	5269	5727
27350	2385	3591	4295	4797	5277	5736
27400	2388	3596	4301	4805	5285	5745
27450	2391	3601	4308	4812	5293	5754
27500	2393	3606	4315	4820	5301	5763
27550	2396	3611	4321	4827	5310	5772
27600	2399 2402	3616 3621	4328	4834 4842	5318 5326	5780 5789
27650 27700	2402	3626	4335 4341	4849	5334	5798
27750	2408	3631	4348	4857	5342	5807
27800	2411	3635	4354	4864	5350	5816
27850	2413	3640	4361	4871	5359	5825
27900	2416	3645	4368	4879	5367	5834
27950	2419	3650	4374	4886	5375	5842
28000	2422	3655	4381	4894	5383	5851
28050	2425	3660	4388	4901	5391	5860
28100	2428	3665	4394	4908	5399	5869
28150	2431	3670	4401	4916	5407	5878
28200	2434	3675	4408	4923	5416	5887
28250	2436	3680	4414	4931	5424	5896
28300	2439	3685	4421	4938	5432	5904
28350	2442	3690	4427	4945	5440	5913
28400	2445	3694	4434	4953	5448	5922
28450	2448	3699	4441	4960	5456	5931
28500	2451	3704	4447	4968	5464	5940
28550	2454	3709	4454	4975	5473	5949
28600	2456	3714	4461	4982	5481	5958
28650	2459	3719	4467	4990	5489	5966
28700	2462	3724	4474	4997	5497	5975
28750	2465	3729	4480	5005	5505	5984
28800	2468	3734	4487	5012	5513	5993
28850 28900	2471	3739	4494	5019	5521	6002
28950	2474	3744	4500	5027	5530	6011
29000	2476	3749	4507	5034	5538	6020
29050	2479	3753	4514	5042	5546	6028
29100	2482	3758	4520	5049	5554	6037
29100	2485	3763	4527	5057	5562	6046
29200	2488	3768 3773	4533 4540	5064	5570	6055
29250	2491 2494		4547	5071 5079	5578 5587	6064
29300	2494	3778 3783	4547	5086	5595	6073 6081
29350	2496	3788	4560	5094	5603	6090
29400	2502	3793	4567	5101	5611	6099
29450	2505	3798	4573	5101	5619	6108
29500	2508	3803	4580	5116	5627	6117
_0000	2000	3003	+500	3110	3021	0117

Combined	One	Two	Three	Four	Five	Six
Adjusted	Child	Children	Children	Children	Children	Children
Gross						
Income						
29550	2511	3808	4587	5123	5635	6126
29600	2514	3812	4593	5131	5644	6135
29650	2516	3817	4600	5138	5652	6143
29700	2519	3822	4606	5145	5660	6152
29750	2522	3827	4613	5153	5668	6161
29800	2525	3832	4620	5160	5676	6170
29850	2528	3837	4626	5168	5684	6179
29900	2531	3842	4633	5175	5692	6188
29950	2534	3847	4640	5182	5701	6197
30000	2537	3852	4646	5190	5709	6205

Child Care Tax Credit Table ¹				
		Tax Cr	edit For	
		One Child	More than One Child	
Gross Monthly Income of Parent Entitled to Receive Support	Tax Credit %	<u>\$250.00</u>	\$500.00	
\$0 to 1,250	.35	\$88	\$175	
1,251 to 1,416	.34	85	170	
1,417 to 1,583	.33	83	165	
1,584 to 1,750	.32	80	160	
1,751 to 1,916	.31	78	155	
1,917 to 2,083	.30	75	150	
2,084 to 2,250	.29	74	145	
2,251 to 2,416	.28	70	140	
2,417 to 2,583	.27	68	135	
2,584 to 2,750	.26	65	130	
2,751 to 2,916	.25	63	125	
2,917 to 3,083	.24	60	120	
3,084 to 3,250	.23	58	115	
3,251 to 3,416	.22	55	110	
3,417 to 3,583	.21	53	105	
3,583 or above	.20	50	100	

1 Form 2441, Internal Revenue Service	(2015)	Sarvica	1 Form 2441 Internal I

Line 11 Adjustment				
Number of Overnights	Adjustment			
Less than 36	0%			
36-72	6%			
73-91	9%			
92-109	10%			
110-115	13%			
116-119	15%			
120-125	17%			
126-130	20%			
131-136	23%			
137-141	25%			
142-147	27%			
148-152	28%			
153-158	29%			
159-164	30%			
165-170	31%			
171-175	32%			
176-180	33%			
181-183	34%			

Area above double line in the first column on the first page is drawn below the income level that represents the self-support reserve.

	One	Two	Three	Four	Five	Six
	Child	Children	Children	Children	Children	Children
Self Support	1400	1700	1900	2100	2350	2550
Reserve						

Effective 04/05/2022

Area above double line in the first column on the first page is drawn below the income level that represents the self-support reserve.

	One	Two	Three	Four	Five	Six
	Child	Children	Children	Children	Children	Children
Self Support Reserve		1800	2100	2350	2650	3000

City of Saint Lou	is is considered a county.)
(Jr./Sr./III)	
	Case
	Number(Use number on Petition)
	C
he <i>Petition</i> .	
(Jr./Sr./III)	Division
18KV	Number (Use number on Petition)
(Jr./Sr./III)	
- (Jr./Sr./III)	
	he <i>Petition</i> . (Jr./Sr./III)

Statement of Income and Expenses (For use in Paternity Action)

Мо	nthly Income Information	Petitioner	Respondent	
1.	Monthly gross income from salaries, wages and commissions including bonuses			
2.	Monthly self-employment income			
3.	Monthly social security benefits not including Supplemental Security Income (SSI)			
4.	Monthly retirement benefits			

IN THE CIRCUIT COURT OF

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Мо	nthly Income Information (Continued)	Petitioner	Respondent
5.	Monthly pension income		
6.	Monthly interest income		
7.	Monthly trust and annuity income		
8.	Monthly income from dividends and partnership distributions		
9.	Monthly unemployment compensation benefits		
10.	Monthly severance pay		1/1/1/1
11.	Monthly workers compensation benefits		
12.	Monthly disability insurance benefits		
13.	Monthly veterans disability benefits		
14.	Monthly military allowances for subsistence and quarters		
15.	Total monthly gross income. Add paragraphs 1 through 14. (Form 14 - Line 1)		
16.	Monthly Supplemental Security Income benefits (SSI)		
17.	Monthly payments of Temporary Assistance for Needy Families (TANF)		
18.	Monthly Medicaid benefits		
19.	Monthly food stamps		
20.	Number of unemancipated children who are not the subject of this proceeding that primarily reside with each party (Form 14 - Line 2c(1))		
	Monthly amount of child support received pursuant to a court or administrative order for unemancipated children who are not the subject of this proceeding that primarily reside with each party (Form 14 - Line 2c(3))		
21.	Monthly maintenance received in this case		
22.	Monthly maintenance received in other cases		
23.	Total monthly court-ordered maintenance received. Add paragraphs 21 and 22. (Form 14 - Line 1a)		

Monthly Expense Information	Petitioner	Respondent
 Monthly court- or administratively-ordered child support being paid for children who are not the subject of this proceeding (Form 14 - Line 2a) 		
25. Monthly Maintenance		
a. Monthly maintenance paid in this case		
b. Monthly maintenance paid in other cases		
Total monthly court-ordered maintenance paid. Add paragraphs 25a and 25b. (Form 14 - Line 2b)		1/1/O.
 Reasonable monthly work-related child care costs of each party for the children who are the subject of this proceeding (Form 14 - Line 6a and Line 6b) 		
 Monthly health insurance costs for the children who are the subject of this proceeding (Form 14 - Line 6c) 	000	
 Monthly uninsured extraordinary medical costs for the children who are the subject of this proceeding (Form 14 - Line 6d) 	5	
 Other monthly extraordinary child rearing costs for the children who are the subject of this proceeding (Form 14 - Line 6e) 		
 All other monthly expenses of each person (Include housing costs, utilities, transportation costs, food, clothing loan payments, charitable contributions, entertainment, insurance other than listed on line 27, etc.) 	,	
31. Total monthly expenses. Add paragraphs 24 through 30. (Do not include 25a and 25b. Use the total amounts from 25.)		
31. Total monthly expenses. Add paragraphs 24 through 30. (Do not include 25a and 25b. Use the total amounts from 25.)		

Proof of Service on Other Parties

	ent by hand; send it by First Class U.S. mail, e-mail or be party's attorney to be served with a clerk, receptionist or an e served.
	(date) I have sent/given a copy of this <i>Statement of</i> ty <i>Action</i>) to each of the following parties at the address shown:
Name	Address: U.S. mail/e-mail/fax number
Sign Below in the Presence of a Not	ary Public
he or she is the person named below and (For use in Paternity Action) are true acco	of lawful age, being duly sworn on his or her oath, states that that the facts stated in this <i>Statement of Income and Expenses</i> rding to his or her best knowledge, information and belief.
(Sign above in the presence of a Notary Public)	P.
The following information must be com	pleted by a notary public.
STATE OF)	
COUNTY OF)	
	, 20, before me personally appeared, , to me known to be the person described in and d acknowledged that he/she executed the same as his/her free
act and deed.	5
IN WITNESS WHEREOF, I have hereunto State aforesaid, the day and year first about	set my hand and affixed my official seal in the County and ve written.
THIS	
	, Notary Public
	County, State of Missouri
My commission expires:	

You must send (serve) a copy of this document to each of the other parties, or their attorney(s). To

INI TUE	CIDCIIII	COLID	$\Gamma \cap \Gamma$
IIV I ME	CIRCUIT	LOUR	UF

, MISSOURI

(County where court is located. City of Saint Louis is considered a county.)

	_		
(First Name) (Middle Name) (Last Name) Petitioner, (Enter full legal name of Petitioner above)	(Jr./Sr./III)		60%
-and-		Case	
The MINOR CHILD(REN) as listed in question 1 of the Petition for Declaration of Paternity, Custody and Support, By Next Friend,		Number(Use number on F	Petition)
v.		05-17	
Respondents shall be listed in the order used in question	on 6 of the <i>Petition</i> .	>	
(First Name) (Middle Name) (Last Name) Respondent 1, (Enter full legal name of Respondent 1 ale	bove)	Division	
-and-		Number(Use number on F	Petition)
(First Name) (Middle Name) (Last Name) Respondent 2, (Enter full legal name of Respondent 2 at	(Jr./Sr./III)		
-and-			
(First Name) (Middle Name) (Last Name) Respondent 3. (Enter full legal name of Respondent 3 al	bove) (Jr./Sr./III)		
	Property and Del		
(For use in F	Paternity Action)		
	ddle Name) (Last Name Ill legal name above)	e)	(Jr./Sr./III)
² O,			
Your Property (either alone or with anyone following questions)	else) (Check "Yes"	or "No" for eac	h of the
			Estimated Value
Do you own a house, condominium or other real e Do you own a car, truck or motorcycle?	state?	☐ Yes ☐ No	
Do you own a mobile home, trailer, boat or airplan Do you have any bank accounts?	e?	☐ Yes ☐ No ☐ Yes ☐ No	

Your Property (either alone or with anyone else) (Continued	l)	Estimated Value
Do you have any right to receive any pension or retirement benefits other than Social Security? Do you have an IRA or 401(k) or other retirement account? Do you have any furniture, appliances or other household goods	☐Yes ☐ No ☐Yes ☐ No	
worth more than \$100?	☐ Yes ☐ No	
Do you have any jewelry, clothing or other personal items worth more than \$100?	☐Yes ☐ No	
Do you own a business?	☐ Yes ☐ No	
Do you own any stocks or bond?	☐ Yes ☐ No	
Do you have any life insurance that could be cashed in?	☐ Yes ☐ No	
Does anyone owe you money?	☐ Yes ☐ No	<u> </u>
Do you have any lawsuits against anyone?	☐ Yes ☐ No	
Do you have any farm equipment, animals or crops?	☐ Yes ☐ No	
Do you have any interest in any trusts?	☐ Yes ☐ No	
Do you have any other asset or property?	☐Yes ☐ No	
Your Debts (either alone or with anyone else) (Check "Yes" (questions)	or "No" for each c	of the following
		Amount Due
Are you currently in a bankruptcy proceeding? (Chapter 7 or Chapter 13)	☐ Yes ☐ No	
Do you owe a mortgage on a house or condominium or land?	☐ Yes ☐ No	
Do you owe money on a car?	☐ Yes ☐ No	
Do you owe money on any credit cards?	☐ Yes ☐ No	
Do you owe any money to any family or friends?	☐Yes ☐ No	
Do you owe any medical or dental bills?	☐Yes ☐ No	
Do you owe any student loans?	☐Yes ☐ No	
Do you owe any other debts?	☐Yes ☐ No	

What debts should I list on this form?

All debts owed by you should be listed. You should list all loans from any individual, bank, credit card company, credit union, savings and loan association or other lending institution. Make sure to list all credit cards and any amounts owed pursuant to any bankruptcy or other repayment plans.

Proof of Service on Other Parties

obtain service, you may deliver the document by I	's attorney to be served with a clerk, receptionist or an
I certify, under oath that on	(date) I have sent/given a copy of this Statement of each of the following parties at the address shown:
Name	Address: U.S. mail/e-mail/fax number
he or she is the person named above and that the	Action) is required to be verified in the presence of a notary public. If age, being duly sworn on his or her oath, states that a facts stated in this Statement of Property and Debt o his or her best knowledge, information and belief. (Print your name above) by a notary public.
COUNTY OF)	
	, 20, before me personally appeared,, to me known to be the person described in and owledged that he/she executed the same as his/her free
	hand and affixed my official seal in the County and en. , Notary Public County, State of Missouri
My commission expires:	

(County where court is located. City of Saint Louis is considered a county.)

(First Name) Petitioner, (Ente	(Middle Name) (L r full legal name of Petition	,	(Jr./Sr./III)	
-and-				O
in question 1 of	ILD(REN) as listed the Petition for Decla stody and Support,	aration		Case Number(Use number on Petition)
v.				
Respondents shall	I be listed in the order	used in question 6 of	the <i>Petition</i> .	
(First Name) Respondent 1,	(Middle Name) (L (Enter full legal name of		(Jr./Sr./III)	
-and-		,	SELLY	Division Number (Use number on Petition)
(First Name) Respondent 2,	(Middle Name) (L (Enter full legal name of	•	(Jr./Sr./III)	
-and-		(PE)		
(First Name) Respondent 3.	(Middle Name) (L (Enter full legal name of	ast Name) Respondent 3 above)		
	,			

Answer to Petition for Declaration of Paternity, Custody and Support

This form may be used by a Respondent answering the *Petition for Declaration of Paternity, Custody and Support.*

1.	My name is				
	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	

2. I understand that by voluntarily entering my appearance and filing this pleading, I am subjecting myself to the jurisdiction of this court, and the court may enter such orders and judgments as are authorized by law, including orders for child support, child custody, parenting time/visitation, and attorney's fees.

Any statement not spe	cifically denied will	be deemed adr	mitted and you may	not have the oppo	rtunity to disagree wit
this statement when the	ne case is presented	I to the court.			
Check one of the to	vo boxes.				
☐ I agree with the	Parenting Plan	filed by the I	Petitioner.	C	
I do not agree v	with the Parentir	ng Plan filed	by the Petitione	er and will file a s	separate <i>Parentir</i>
				/2	
My mailing address	s is:			0	
is pending, you must s same as the address a the court a mailing add the public.	at which you live. Ev	en if you do no	ot wish to give the a	ddress at which yo	u live, you must still
(Street)		/2			
(City)		(State)	(Zip)		
(<u> </u>	(l. A O. ala) (F	a di Andrea a a C	N-111		
(Telephone Number wi	tn Area Code) (E-m	iali Address - C)ρτιοnaι)		
The last four numb	ers of my social	security nun	nber are XXX-XX	′-	
Check one of the th	rree boxes.				
	ve duty in the ar	med service	s of the United	States of Ameri	ca.
					but waive my righ
	Servicemember				
	duty in the armed to the Servicem				and I do not waive
List the name of the	e narent or quar	dian with wh	om the children	have lived and	the address when
said children have					
have lived at more					
Answer listing the i	nformation reque	ested in que	stion 8 for each	additional addre	ess.
(1)					
(First Name)	(Mi	ddle Name)	(Last Name)		(Jr./Sr./III)
(Street)					
(011001)					
(City)		(State)	(Zip)	(Dates)	

	(2)	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
		(Street)				
		(City)	(State)	(Zip)	(Dates)	
	(3)	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)
		(Street)				
		(City)	(State)	(Zip)	(Dates)	
9.	chil <u>on</u> e	you know of anyone other ldren or claims to have cuse of the two boxes) Yes \(\subseteq \text{No} \)				
10.		you have information abounding in a court of this or an Yes \Box No				of the children
11.		ve you participated in other er state? (Check one of the Yes \square No		ing the custody o	of any of the ch	nildren in this or any
12.	Ha	ve any of the children beer Yes \square No	a victim of abuse	or neglect? (Ch	eck one of the	two boxes)
13.	If y	ou answered "Yes" to ques	stions 9, 10, 11 or	12, please expla	in.	
			9			
		, All				
14.	Pei	s the Family Support Divisi tition? (Check one of the tv		support case for	r any child(ren)	listed in the
	If y	es, list the eight digit IV-D	number(s)			
	-	es, has the Family Support	t Division issued a	child support or	der? (Check o	ne of the two boxes)
	List	t the judicial case number(s)			
15.	Far	any of the children listed in milies (TANF) benefits thro nefits in the past? (Check of Yes \square No	ugh the Family Su	ipport Division, o		

Request for Relief

I wa	ant the court to do the following: (C	heck all that a	pply)		
	Find that(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	is the father of
	the minor child(ren).	((,	(/	
	Grant custody of the minor child(r	en) as reques	ted in question 4.		1.
	Child support should be as set for	•	•	enting Plan mark	ced Exhibit
	Enter appropriate orders with resp	pect to the sur	port of the minor o	child(ren).	
	Other (Please state the other requ	uest(s))			
					7 , ,
Dro	of of Sarvina on Other Partic	•			
Pro	of of Service on Other Parties	S			
obta facs	must send (serve) a copy of this cain service, you may deliver the dosimile (fax); or leave it at the office rney associated with the attorney the service of the service o	cument by had of the party's	nd; send it by First	Class U.S. mail	l, e-mail or
	rtify, under oath that on		data) I baya cant/a	uivan a aanv of th	oio Anower to
	ition for Declaration of Paternity, C				
sho			•	31	
			_		
	Name	40	Address:	U.S. mail/e-mail/	/fax number
	JK.				
	SEA,				
	⁶ 0,	Nc	otice		
So	ome local rules may also require th	nat vou file a S	Statement of Incom	ne and Expenses	s (For use in
Pa	aternity Action) at the time you file	this document	t. Failure to do so	could cause you	r Answer to
	etition for Declaration of Paternity,				
	nemancipated children, you are rec ate you were served or the date you	•		•	
	ustody and Support. You may file a				·

Sign Below in the Presence of a Notary Public

Respondent, of lawful age, being duly sworn on his or her oath, states that he or she is the Respondent named above and that the facts stated in the *Answer to Petition for Declaration of Paternity, Custody and Support* are true according to his or her best knowledge, information and belief.

(Sign above in the presence of a Notary Public)	(Print your name above)
The following information must be completed b	y a notary public.
STATE OF)	
) SS	
COUNTY OF)	
	, 20, before me personally appeared, to me known to be the person described in and who
executed the foregoing instrument and acknow and deed.	rledged that he/she executed the same as his/her free act
IN WITNESS WHEREOF, I have hereunto set State aforesaid, the day and year first above w	my hand and affixed my official seal in the County and ritten.
	, Notary Public
	County, State of Missour
My commission expires:	
<u> </u>	
Attorney Information	
This information may be completed by your attorney. Do assistance of an attorney.	o not enter any information here if you are filing this case without the
I have assisted Respondent in the preparatio on behalf of Respondent.	n of these pleadings, but I am not entering my appearance
(Attorney - Sign above)	(Missouri Bar Number)
	()
(Attorney - Print your name above)	
(Street)	
(City) (St	tate) (Zip)
()	
(Telephone Number with Area Code) (Fax Number with	h Area Code) (E-mail Address - Optional)

In re:			1	
(First Name) (Middle N Petitioner, (Enter your full legal I -and-	lame) (Last Name) name above)	(Jr./Sr./III)	Case Number (Use number fro	om pending case)
			Division Number	'L' W
(First Name) (Middle Na Respondent. (Enter the other page 1)	ame) (Last Name) arty's full legal name above)	(Jr./Sr./III)		om pending case)
	Notice of I	Hearing	RPY	
Information about the He	aring		, P	
1. The hearing will be hel	d promptly at the courth	ouse in the a	bove county ar	nd division.
2. Type of matter to be hea		f the petition or m	otion you want the	court to hear.)
3. The date of the hearing i			·	,
4. The time of the hearing i	s:	a.m. □ p.m.		
Person Giving Notice	RBLY			
(Sign Above)				
(Print First Name Above)	(Print Middle Name Above)	(Print Last Nan	ne Above)	(Jr./Sr./III)
(Street)				
(City)	(State)	(Zip)		
(Telephone Number with Area Code	(<u>)</u> e) <i>(Fax Number with Area Co</i>	<u>de)</u>		
(E-mail Address - Ontional)				

(County where court is located. City of Saint Louis is considered a county.)

IN THE CIRCUIT COURT OF _

_, MISSOURI

Proof of Service on Other Parties

OR FREE PROPERTY OF THE PROPER	Name -	Address 11 O 27 27
OR FREE PROPERTY OF THE PROPER	Name	Address: U.S. mail/e-mail/fax number
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S FORM IS AVAILABLE FOR FREE .	Sign above)	
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Not Approved for use in Contested Cases

IN THE CIRCUIT	COURT OF			URI
	(County where court	is located. City of Saint Louis	s is considered a county.)	
(First Name) (Middle I	Name) (Last Name) name above)	(Jr./Sr./III)		
-and-				
The MINOR CHILD(REN) as in question 1 of the <i>Petition</i> of <i>Paternity, Custody and Su</i> By Next Friend,	for Declaration		Case Number (Will be assigned when ca	ase is filed)
V.				
Respondents shall be listed in t	he order used in que	estion 6 of the <i>Petition</i> .		
(First Name) (Middle I	Name) (Last Name) I name of Respondent	(Jr./Sr./III) 1 above)	<i>(</i> Division	
-and-			Number (Will be assigned when ca	ase is filed)
(First Name) (Middle I	, ,	(Jr./Sr./III) 2 above)	(VIII so designed vinen e	add id illiddy
-and-				
(First Name) (Middle I	Name) (Last Name) I name of Respondent	3 above)		
	Judgm	ent of Paternity		
1. As used herein, "Mothe	r" refers to	me) (Middle Na	me) (Last Name)	(Jr./Sr./III)
and "Father" refers to				 .
(F	First Name)	(Middle Name) (Last Na	me) (Jr./Sr./l.	'I)
2. Appearances (Check alThe following Response	,	r and remain in default a	s to the pleadings:	
(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	
(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	
(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)	
Judgment of Paternity Form CAFC370 07/01/2018		This for	Frm is available for free at www.selfrep	Page 1 of 6 resent.mo.gov

	Mother appears in person	n.	F	ather appears in p	erson.			
	Mother appears by attorney.							
	Guardian ad Litem appe	ars in person.	_		-			
		•				nn 0 0	ra in naraan	
	☐ Third Party	(Middle	e Name)	(Last Name)	a (<i>Jr./Sr./III</i>)	ppea	rs in person.	
	(First Name)	(Wildare	e Ivallie)	(Last Name)	(31./31./111)			
	☐ Third Party				a	ppea	rs by attorney.	
	(First Name)	(Mida	lle Name)	(Last Name)	(Jr./Sr./III)			
	Additional appearances:							
	(First Name)	(Middle Name)	(Last Nam	e)				
	((- /	()			
	(First Name)	(Middle Name)	(Last Nam	۵)	(Jr./Sr./III)			
	(First Name)	(Middle Marrie)	(Last Ivaiii	c)	(01./01./111)			
3.	The last four numbers of M	other's social se	curity nu	mber are	and the	last f	our	
•			•					
	numbers of Father's social	security number	are	·				
4.	Check one of the two boxe							
	Respondent(s) is/are no	•		med services of t	he United State	es no	w or	
	any time since the filing	of the petition h	erein.					
	Respondent							
	(First Name)	(N	1iddle Nam	e) (Last Name)		(Jr./	(Jr./Sr./III)	
	is on active duty in the	armed services o	of the Un	ited States, but h	as waived his o	or her rights		
	pursuant to the Service							
	p ====================================							
Ch	ildren							
5.	This judgment pertains to t	he following child	d(ren) he	reinafter referred	to as "minor ch	ild(re	n):"	
	, , ,	·	` '			,	•	
	a							
	(First Name)	(Middle Name)	(Last Na	ame)	(Jr./Sr.	/111)	(Child's Age)	
	b.							
	(First Name)	(Middle Name)	(Last Na	ame)	(Jr./Sr.	////	(Child's Age)	
	(rindervanio)	(madio riamo)	(2001740		(01.701.	,,,,,	(Crima d rigo)	
	C	_						
	(First Name)	(Middle Name)	(Last Na	ame)	(Jr./Sr.	/111)	(Child's Age)	
	٦							
	d (First Name)	(Middle Name)	(Last Na	ama)	(Jr./Sr.	////	(Child's Age)	
	(First Name)	(Middle Name)	(Last IVa	iiiie)	(31./31.	/111)	(Crilla's Age)	
	e							
	(First Name)	(Middle Name)	(Last Na	ame)	(Jr./Sr.	/111)	(Child's Age)	
	_						-	
	f		//			<u> </u>	(0) " "	
	(First Name)	(Middle Name)	(Last Na	ame)	(Jr./Sr.	/111)	(Child's Age)	

Paternity

6.	Ch □	neck all that apply. The court finds that there is/are no previo	ous legal finding	(s) of paternity for the	e minor child(ren).			
	C	A legal finding of paternity may be a court judy which is an affidavit signed by the parents to certificate. Genetic (DNA) testing or an admir Support Division are not legal findings of pate	get the father's r nistrative child su	name on a child's birtl	h			
	П	The court finds that						
		(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)			
		is the father of the minor child(ren).						
		The court finds that						
		(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)			
		is not the father of the minor child(ren).						
		Other						
Ch	ild (Custody						
		cuotody						
7.	Ch	heck one of the two boxes.						
	Ш	The court does not have "jurisdiction" (as defined in the Uniform Child Custody Jurisdiction and Enforcement Act, §452.700, RSMo, et seq.) over the custody arrangements of the minor						
		child(ren) and therefore enters no further	• •	, ,				
		the minor child(ren).			-			
		The court has "jurisdiction" (as defined in						
		Act, §452.700, RSMo, et seq.) over the custody arrangements of the minor child(ren). The court approves the provisions of Part A of the <i>Parenting Plan</i> marked Exhibit						
		pertaining to the custodial arrangements		•				
		arrangements contained in said <i>Parentin</i>		` '				
		Therefore, the court orders the provisions		•	•			
		custodial arrangements of the minor child	· ,	-				
		and conditions pertaining to the custodial A of said <i>Parenting Plan</i> as if fully set for	•		i) sectorul ili Part			
		The sheriff or other law enforcement offi		ce the rights of any	person to custody			
		or visitation pursuant to §452.425. RSMo		,				

In the event of noncompliance with this order, the aggrieved party may file a verified motion for contempt. If custody, visitation, or third-party custody is denied or interfered with by a parent or third party without good cause, the aggrieved person may file a family access motion with the court stating the specific facts that constitute a violation of the custody provisions of the judgment of dissolution, legal separation, or judgment of paternity. The circuit clerk will provide the aggrieved party with an explanation of the procedures for filing a family access motion and a simple form for use in filing the family access motion. A family access motion does not require the assistance of legal counsel to prepare and file.

Child Support

8.	Ch	Check one of the two boxes.The court does not have jurisdiction to enter any orders with respect to the support of the minor child(ren).							
		pertaining to	the suppo	rt of the minor	B of the <i>Parenti</i> child(ren) and is of said <i>Parentin</i>	incorporates	by reference	e all of the	
9.	Ch		Missouri ha ein. The to	tal amount due	olic assistance u e as authorized b				
							a	nd in favor	of
		(First Name)		(Middle Name)	(Last Name)		(<i>Jr./Sr./III</i>)		
		the State of M	Aissouri for	said amount.					
Gu	ardi	ian Ad Litem	n Fees						
10.	Ch	eck all that ap							
	☐ Mother shall pay to				the sum	of	as ar	and	
		for Guardian ad Litem fees in addition to the sum of					previously o	rdered.	
		Father shall pay to				the sum	of	as a	nd
		for Guardian ad Litem fees in addition to the sum of					previously o	rdered.	
		Guardian ad have been sa	Litem fees atisfied.	previously ord	ered to be paid b	ру			
Otł	ner (Orders							
11.	Ch	ange(s) of Na	mes of the	Minor Child(re	n)				
	a.	The name of							· · · · · · · · · · · · · · · · · · ·
			(First Name,		(Middle Name)	(Last Name)			(Jr./Sr./III)
		is changed to							· · · · · · · · · · · · · · · · · · ·
			(First Name,)	(Middle Name)	(Last Name)			(Jr./Sr./III)
	b.	The name of			_				
			(First Name,)	(Middle Name)	(Last Name)			(Jr./Sr./III)
		is changed to							
			(First Name)		(Middle Name)	(Last Name)			(Jr./Sr./III)

	C	The name of				
	0.	THO HAITIO OF	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
		is changed to)			
		·	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
	d.	The name of				
			(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
		is changed to) (First Name)	(Middle Name)	// gat Nama)	(Jr./Sr./III)
			(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
	e.	The name of		(Middle Nome)	(Loot Nama)	-
			(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
		is changed to) (First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
			,	()	((0.00.000)
	f.	The name of	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
		is shanged to	,	(maare rame)	(===:::::::::::::::::::::::::::::::::::	(0.11 0.11.11)
		is changed to	(First Name)	(Middle Name)	(Last Name)	(Jr./Sr./III)
		Bureau of Vit §210.841 and child(ren) as	of the children named about al Records shall amend the d §210.849, RSMo, to refle stated above and to remo birth record(s). A certified	ne birth record o ect that Father i ve any biograph	the State of Missouri. The Missou of the minor child(ren) pursuant to s the biological father of the mino nical information of any father curr gment shall be sent to the Missou	r rently
			oly to the applicable state's		of Missouri. It is the responsibility vital records for amendment of the	
	C'		J-			_
პ.	Ch	eck if applicat Other orders		vhihit	which is incorporated by refere	noo oo if
		fully set forth		XIIIDIL	_, which is incorporated by refere	ence as II

Court Costs

14. Check one of the two boxes		e court cost deposit(s) pre	eviously nost	ed
Court costs are waived.		o odari odai dopodii(o) pri	oviously post	ou.
Waiver of Right to Rehearin				
We, the undersigned parties, do the commissioner and waive the	-	-	-	recommendations of
Signature of Petitioner's Attornal Signature of Respondent's A Signature of Guardian ad Li Signature of Petitioner Signature of Respondent Signature of Third Party/Res	Attorney _ tem			
(If heard by a Family Court Judge)		(If heard by a Family Court Con Findings and Recommend	,	nissioner:
(Judge)		(Commissioner)		(Date)
(Date)		All orders and these findings and recommendations of the Commissioner are confirmed and adopted as the judgment of the court.		
		(Judge)		(Date)
A certified copy of this judgmen (Print Name of Petitioner's Attorney)		mailed to the following p	Π	neck all applicable boxes)
(Street)	(Street)		(Street)	
(City, State, Zip) (City, S		te, Zip)	(City, State, Zip)	
(Telephone Number with Area Code)	(Telephoi	ne Number with Area Code)	(Telephone N	umber with Area Code)
Print Name of Petitioner)	[]_ (Print Nai	me of Respondent)	(Print Name o	f Third Party/Respondent)
(Street)	(Street)		(Street)	
(City, State, Zip) () (Telephone Number with Area Code)	(City, Sta	te, Zip) ne Number with Area Code)	(City, State, Zi	ip) umber with Area Code)
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