Form CAFC102 - Motion to Modify Child Support

In what Missouri county was the judgment you want to modify entered?		In the Circuit Court of		MISSOURI	
What is the case number judgment you want to		Case Number		Division Number	
Answer all o	questions on th	is form completely.			
Your Information	I did not fi 3. I am the N I am the F	original case. (Petitional case. (Fetitional case.) Ile the original case. (Fetitional case.) In the original case. (Fe	Respondent/Defer		(Jr./Sr./III)
Other Party's Information	(First Name) 7. The last four XXX-XX	ty's mailing address is	(Last Name) party's Social Secu	urity Number are:	(Jr./Sr./III)

Service	
Information	•

9. The other party has signe being filed with this motion. The other party should be (Street)	on. Therefore, do not iss	
(City)	(State)	(Zip)
☐ The other party should be	served at his or her pla	ce of employment.
(Employer's Name - if applicable)		(Hours of Employment)
(Street)		
(City)	(State)	(Zip)
Other method of service:		
10. No one is receiving received for the child(ren). A person is receiving TAN must be served. Summon	F for the child(ren) and t	therefore the State of Missouri
615 Howerton	y Support Division Court Missouri 65102	

Case Information

11. The judgment I want to change was entered on (MM/DD/YYYY)
 I was ordered to pay child support to the other party. The other party was ordered to pay child support to me. We both were ordered to pay child support. No child support was ordered by the court.
13. All child support ordered by the court has been paid. All child support ordered by the court has not been paid.
 14. The child support judgment that I want to modify is: A dissolution of marriage or legal separation judgment. A paternity judgment entered by a court. A custody and support judgment entered by a court. A judgment modifying a previous dissolution of marriage or legal separation judgment.
A judgment modifying a previous paternity judgment. A judgment modifying a previous custody and judgment. Other
(Explain) Note: You cannot use this form to modify an administrative order that was originally entered by Missouri Family Support Division.

Military Information	15. The other party is NOT on active duty in the United States military. The other party is on active duty in the United States military.			
Employment Information	16. I am self-employed I am unemployed I am employed at:			
	(Name of Employer)			
	(Street)			
	(City)	(State)	(Zip)	
	17. The other party is self-employed The other party is unemployed I don't know the other party's em The other party is employed at:	nployment status		
	(Name of Employer)			
	(Street)			
	(City)	(State)	(Zip)	
Children's Information	18. There is/are child(re listed below.	en) who is/are the su	ubject of this proceeding a	IS
	Child's Full Name		Child's Age	

Changes affecting Support	19. The following changes have occurred since the last child support judgment. These changes justify a different amount of child support.
Proposed Parenting Plan	20. The appropriate child support arrangement for the minor children is set forth in Part B of the attached parenting plan marked Exhibit 1. (You must attach a completed copy of Parenting Plan Form CAFC501 Part B to this motion.)
Request for Relief	THEREFORE, I want to change the previous judgment concerning child support as per Part B of the attached parenting plan marked Exhibit 1. I also request the following relief: I am without sufficient funds to pay for my attorney and I request that the other party pay my attorney's fees for this case. Other (Please state the other requests)

	'Defendant, of lawful age, being duly synd that the facts stated in this Motion to e and belief.	
SIGN HERE	PRINT YOUR NAME HERE	
Subscribed and sworn to this	day of, 20_	
Notary Public My Commission Expires:	Sign this in front of a Notary Public	This should only be completed if a lawyer helped you with this
		form
ATTORNEY INFORMATION (To be completed)	ed by your attorney)	Do not enter any information here if you are
Attorney - SIGN HERE	Missouri Bar Number	filing this case without the assistance of a lawyer. This information should
Attorney for Movant – PRINT YOUR NAME H	HERE	be completed by your attorney.
(Street)		☐ I have assisted the
(City)	(State) (Zip)	 above named party in the preparation of these pleadings, but I am not
(Telephone Number) (Fax Number)	(Email Address)	entering my appearance on his or her behalf.