### **MINNESOTA RULES 1985**

#### 9566.0010 SUPPORT PAYMENTS

## CHAPTER 9566 DEPARTMENT OF HUMAN SERVICES SUPPORT PAYMENTS

9566.0010 SUPPORT PAYMENTS.

### 9566.0010 SUPPORT PAYMENTS.

Subpart 1. Notice. The forms in subparts 2 and 3 can be used by individuals who are obligated to pay child support or maintenance and by individuals to whom child support or maintenance is owed. The forms can be used to request modification of existing court orders such as a cost-of-living adjustment (COLA). The forms were not designed to bring other matters before the court.

The terms of a court order regarding maintenance or child support may be modified upon a showing of one or more of the following:

A. substantially increased or decreased earnings of a party;

B. substantially increased or decreased need of a party;

C. receipt of public assistance; or

D. a change in the cost-of-living for either party as measured by the Federal Bureau of Labor Statistics.

The forms can be used by an individual representing themselves or by their attorney. The forms are not a substitute for use of an attorney.

Completion of these forms will not guarantee that you will be successful in the court hearing.

The papers must be typed in triplicate, be properly completed, notarized, and filed with the clerk of the court having jurisdiction over the matter. The required fees must be paid, and the other party must be properly served with a copy of these papers. Proper legal procedures must be adhered to or your motion may never be scheduled or may be dismissed by the court.

These papers have been intended for use by a wide variety of individuals who may have unique reasons for making a motion. The forms may not be applicable for everyone and may not, therefore, meet everyone's needs.

Subp. 2. Notice of motion and motion.

STATE OF MINNESOTA

\_\_\_\_\_Petitioner

-VS-

### DISTRICT/COUNTY COURT \_\_\_\_JUDICIAL DISTRICT FAMILY COURT DIVISION

NOTICE OF MOTION AND MOTION

File number\_\_\_\_\_

\_\_\_\_Respondent

TO THE ABOVE NAMED

TAKE NOTICE, that on the \_\_\_\_\_ day of \_\_\_\_\_\_, 19\_\_ at \_\_\_\_\_M of said day in Room \_\_\_\_\_ of the Courthouse of \_\_\_\_\_\_County, \_\_\_\_\_\_, Minnesota, the undersigned, on all the files, records, and proceedings herein and upon the attached affidavit, will move the Court for an order pursuant to Minnesota Statutes, section 256.87, 518.64, or 518.641 for a modification of the support and/or maintenance obligation as the Court deems appropriate. The grounds for this motion are stated in the attached affidavit.

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### MINNESOTA RULES 1985 SUPPORT PAYMENTS 9566.0010

. (signature, name, address, and telephone number of moving party.) Subp. 3. Custodial parent's affidavit. STATE OF MINNESOTA DISTRICT/COUNTY COURT COUNTY OF \_\_\_\_\_ \_\_\_\_JUDICIAL DISTRICT FAMILY COURT DIVISION \_\_\_\_\_Petitioner **CUSTODIAL PARENT'S** -VS-AFFIDAVIT File Number\_\_\_\_\_ \_\_\_\_Respondent \_\_\_\_\_, being first duly sworn, deposes and says: (check appropriate items) \_\_\_\_ That I am the petitioner/respondent (circle one) in the above-entitled action. \_\_\_\_ That I am the custodial parent of: 

 Name:\_\_\_\_\_\_\_
 Birthdate:\_\_\_\_\_\_

 Name:\_\_\_\_\_\_\_
 Birthdate:\_\_\_\_\_\_\_

 Name:\_\_\_\_\_\_\_
 Birthdate:\_\_\_\_\_\_\_

\_\_\_\_ That the respondent/petitioner, hereinafter referred to as the obligor, by order of the \_\_\_\_\_District/County Court dated \_\_\_\_\_, was ordered to make child support payments of \$\_\_\_\_\_ per \_\_\_\_\_ (week/month), effective \_\_\_\_\_ for the support of said child(ren). \_\_\_\_ That at the time of the above order, I was (check appropriate box): \_\_\_ Separated \_\_\_ Divorced \_\_\_\_ Unmarried and \_\_\_\_ Living alone with my child(ren) Living with relatives \_\_\_\_ Sharing a household with nonrelatives \_\_\_\_ Remarried, and my spouse was employed at

\_\_\_\_\_ (company or occupation) and earned \$\_\_\_\_ per week/month (circle one) paycheck.

\_\_\_\_ That my net monthly income at the time of the order was \$\_\_\_\_\_ per month from \_\_\_\_\_ (employer and/or AFDC).

 That	I a	lso	received	Food	Stamps	and	Medical	Assistance.	
T1 .				•		1		· •	

 Inat	my	net	monthly	income	at	the	present	time	15 3	۶ <u> </u>
from										

Charge Account: (list)	Date of Order	Present Date
		a
		·

### TOTAL MONTHLY EXPENSES \_\_\_\_\_

8315

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 That, to the best of my knowledge, the obligor is currently
employed at and earns \$ per
, with a monthly net income of \$
 That, to the best of my knowledge, at the present time of the
above child support order, the obligor was employed at
(specify if unemployed) and earned
\$ per
 That at the present time, the obligor is:
Remarried and his/her spouse is employed at
Unmarried
 That I request an increase in my child support due
to: (optional)
Substantially increased or decreased earnings
of a party.
Substantially increased or decreased need of
a party.
Receipt of public assistance.
A change in the cost of living for either party
as measured by the Federal Bureau of Statistics.
Other (please explain):
Other (prease expran)
<u></u>

### FURTHER YOUR AFFIANT SAYETH NOT

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

,

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Signature of Affiant (signed before notary public)

Notary

Statutory Authority: MS s 518.64