

## **Instructions for Paternity Case**

Only Pro-Se forms from our website or the Kansas Judicial Council will be accepted- [www.dc18.org](http://www.dc18.org) or [www.kansasjudicialcouncil.org](http://www.kansasjudicialcouncil.org)

**Read Directions Completely – Please Type or Print Neatly COURT STAFF CANNOT PROVIDE ASSISTANCE OR ADVICE IN COMPLETING FORMS**

**Only single-sided documents are accepted.**

<b>CONTENTS:</b>	Instructions (3 pages);
	Civil Cover Sheet (2 pages);
	Petition for Paternity (3 pages);
	Kansas Payment Center Sheet (1 page);
	Motion for Temporary Order (2 pages);
	Proposed Parenting Plan (7 pages);
	Domestic Relations Affidavit (3 Pages);
	Child Support Worksheet (3 pages);
	Summons (1 page);
	Journal Entry & Decree of Paternity (4 pages);
	Imputed Income Order (1 page);

**Caution:** Use of forms without the assistance of a lawyer could harm your legal rights. You may want to have a lawyer review your completed forms before you file them with the court. These are basic forms and may not cover every situation. Your forms must be complete before they can be approved.

### **FIRST PHASE—**

1. Petitioner: Complete the Civil Information Sheet (the person filing the petition will always be designated the Petitioner; Respondent is person who has been filed against). **All self-represented parties must include an email address.**
2. Complete the Petition, except for the case number. **Sign the Petition in front of a Notary or a Deputy Clerk.** After filing, the clerks will assign the case number.
3. Complete the Motion for Temporary Orders and the Proposed Parenting Plan. Both of these forms are not mandatory at the time of filing, however, a motion for Temporary Orders form will need to be filed before a hearing can be scheduled with the Judge assigned to the paternity case.
4. Complete the Domestic Relations Affidavit. The DRA can be filled out by the Petitioner or both parties. **Sign in front of a Notary or Deputy Clerk.**
5. Complete Child Support Worksheet. The Self Help Center has an app with software that can help you compute child support (Bradley software), or you can request help from the volunteer attorney (limited hours), or during walk in self help times at the Sedgwick County Law Library (limited hours).
6. File the originals with the Clerk of the District Court (4th floor of the Sedgwick County Courthouse). Copies can be made in the clerks' office for a fee.

The filing fee is \$197.00. It can be paid by money order, cashier's check, cash, credit card, or personal check. Please have exact change. A financial affidavit can be filled out and reviewed at the time of filing to reduce the filing fee. **NOTE: If you obtain DCF benefits, it will be your responsibility to provide a file stamped copy to your social worker.**

7. You will obtain a case number from the Clerk of the District Court when you file.

8. **You are required to serve the other party with copies of the pleadings and give them notice of this action.** You cannot serve the other party yourself. Service can be accomplished by: waiver, sheriff's service, special process server, certified mail-return receipt or by publication. You cannot hand or email the papers to the other party.

a) **By Waiver:** Respondent completes the Entry of Appearance and Waiver of Service and **signs it in front of a Notary or Deputy Clerk.** This document can be given to the Petitioner or the Respondent may file it. **or**

b) **By Sheriff's Service:** Complete a Summons provided with this packet. File it along with a \$15.00 money order, cashier's check or cash (Sedgwick County only, cash cannot be mailed to other counties) payable to (*Name of County where service will take place*)\_ County Sheriff's Office. The Clerk will issue the paperwork to the Sheriff's Office. **or**

c) **By Special Process Server:** Petitioner should conduct an internet search for ProcessServers in the geographic area where the party is intended to be served. After contacting the special process server, a Summons will need to be issued by the Clerk of the District Court and included in the documents served to the Respondent. The Petitioner is responsible for paying all fees. **or**

d) **By Mail:** Mail the copies of the court documents by certified mail–return receipt requested to the Respondent's last known address. The Affidavit of Service By Certified Mail and the Postal Form: Return of Service for Certified Mail, **must** be filed with the Clerk of the District Court after service by certified mail (green card) is returned to you to achieve good service. **Respondent must sign for documents.** **or**

e) **By Publication:** If you were not able to provide notice to the other party by one of the above methods, you may be able to provide notice of the divorce by publishing the notice in a local newspaper. In order to obtain "publication service," you **must** request permission to do so by filing the "Affidavit for Service by Publication," and obtaining an order from the assigned judge allowing you to publish notice. After you obtain the signed "Order Allowing Service by Publication", you must then publish notice following the process set out in K.S.A. 60-307. You must obtain "proof of publication" from the newspaper and file the proof with the court. Court personnel cannot help you with this process. The petitioner is responsible for paying for all publication service fees.

#### **SECOND PHASE—**

9. **NO SOONER** than twenty (20) days **after service is complete** (thirty (30) days if

the Respondent is out of state), the Decree of Paternity may be signed by the Petitioner and filed. NOTE: The parties do not have to sign the Decree in front of a Notary.

10. Proof of service, by one of the methods listed above, must be filed at the time the final paperwork is presented to the Clerk.

11. A Permanent Parenting Plan must be filled out. NOTE: The parties do not have to sign the Permanent Parenting Plan in front of a Notary, and the Petitioner may sign the Plan individually or together with the Respondent.

12. The documents can be brought to the 4th Floor for approval Monday through Friday from 8:00 a.m. to 4:00 p.m. The Judge will be available during the hours of 9:00 am to 12:00 pm and from 1:30 pm to 4:00 pm.

13. File the proof of service (if not already filed), original Decree, Permanent Parenting Plan, Child Support Worksheet, Vital Statistics form, and the Kansas Payment Center sheet with the Clerk of the District Court.

After the Judge has signed your Decree, make two copies of the Decree and the Permanent Parenting Plan--one copy for yourself and you must mail one copy to the Respondent.

**NOTE: If you are obtaining DCF assistance, you must provide a copy to your DCF worker. If you choose to have the Court Trustee collect your support payments, you must provide a copy to the Court Trustee when you make your appointment with them.**

**Additional District Court Clerk Fees That May Apply:**

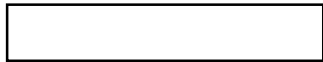
**.25 Copies per page**

**1.00 Certified Copy of Paperwork**

**12.50 Garnishments**

**62.00 Motion Filing Fee**

**ATTENTION: If Paternity Decree is not approved by the judge and filed with the clerk within 120 days of original filing, your case may be dismissed after proper notice from the Courts at the address provided by Petitioner at the time of filing.**



For Office Use Only

### CIVIL COVER SHEET

The civil cover sheet neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Clerk of the District Court for the purposes of initiating the civil docket sheet. This information will not be available to the public and this document will be stored in a separate location from the case file and then destroyed within a reasonable time. A new case **will not be accepted** without a cover sheet attached. (THIS FORM MUST BE TYPED OR PRINTED LEGIBLY). This form can be found at [www.kscourts.org](http://www.kscourts.org).

**NATURE OF SUIT** (Mark only one - If the case involves more than one of the following categories, indicate the category having the highest dollar value.)

**CIVIL** If a CH. 61: \$ \_\_\_\_\_ (Judgment Demand Amount)

- |  |  |  |   |
|--|--|--|---|
| <b><u>TORT</u></b><br><input type="checkbox"/> Asbestos Product Liability<br><input type="checkbox"/> Automobile Tort<br><input type="checkbox"/> Intentional Tort<br><input type="checkbox"/> Legal Malpractice<br><input type="checkbox"/> Medical Malpractice<br><input type="checkbox"/> Other Professional Malpractice<br><input type="checkbox"/> Premises Liability<br><input type="checkbox"/> Slander/Libel/Defamation<br><input type="checkbox"/> Tobacco Product Liability<br><input type="checkbox"/> Toxic/Other Product Liability<br><input type="checkbox"/> Other Tort | <b><u>CONTRACT</u></b><br><input type="checkbox"/> Buyer Petitioner<br><input type="checkbox"/> Employment Dispute - Discrimination<br><input type="checkbox"/> Employment Dispute - Other<br><input type="checkbox"/> Fraud<br><input type="checkbox"/> Landlord/Tenant - Forcible Detainer<br><input type="checkbox"/> Landlord/Tenant Dispute - Other<br><input type="checkbox"/> Seller Petitioner (debt collection)<br><input type="checkbox"/> Other Contract<br><br><b><u>CIVIL APPEALS</u></b><br><input type="checkbox"/> Administrative Agency<br><input type="checkbox"/> Other Civil Appeal<br><input type="checkbox"/> Tax Appeal | <b><u>REAL PROPERTY</u></b><br><input type="checkbox"/> Eminent Domain<br><input type="checkbox"/> Mortgage Foreclosure<br><input type="checkbox"/> Other Real Property<br><input type="checkbox"/> Tax Foreclosure<br><br><b><u>MISCELLANEOUS</u></b><br><input type="checkbox"/> 60-1507<br><input type="checkbox"/> Habeas Corpus<br><input type="checkbox"/> Other Writs<br><input type="checkbox"/> Name Change<br><input type="checkbox"/> Post Judgment Elevation LM to CV<br><input type="checkbox"/> Transfer Pre-Judgment LM to CV | <input type="checkbox"/> <b><u>STATE TAX WARRANT</u></b><br><br><input type="checkbox"/> <b><u>OTHER CIVIL</u></b><br><br><input type="checkbox"/> <b><u>SMALL CLAIMS</u></b> |
|--|--|--|---|

**DOMESTIC**

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> <b><u>MARRIAGE DISSOLUTION/DIVORCE</u></b>              | <input type="checkbox"/> <b><u>PROTECTION FROM ABUSE</u></b>                      | <input type="checkbox"/> <b><u>PROTECTION FROM STALKING</u></b> | <input type="checkbox"/> <b><u>UIFSA</u></b> |
| <input type="checkbox"/> <b><u>OTHER DOMESTIC RELATIONS</u></b>                  | <input type="checkbox"/> <b><u>NON-DIVORCE SUPPORT, CUSTODY OR VISITATION</u></b> | <input type="checkbox"/> <b><u>PATERNITY</u></b>                |  |
| <input type="checkbox"/> <b><u>DOMESTIC FOREIGN JUDGMENT (OUT OF COUNTY)</u></b> |   |   |  |

**PROBATE/ESTATE**

- |  |   |   |
|--|---|---|
| <b><u>GUARDIAN/CONSERVATOR</u></b><br><input type="checkbox"/> Conservatorship/Trusteeship<br><input type="checkbox"/> Guardianship - Adult<br><input type="checkbox"/> Guardianship - Minor<br><input type="checkbox"/> Guardian/Conservator - Adult<br><input type="checkbox"/> Guardian/Conservator - Minor | <input type="checkbox"/> <b><u>DETERMINATION OF DESCENT</u></b><br><br><input type="checkbox"/> <b><u>SEXUALLY VIOLENT PREDATOR</u></b><br><br><input type="checkbox"/> <b><u>DECEDENT ESTATE</u></b><br><br><input type="checkbox"/> <b><u>REFUSAL TO GRANT LETTERS</u></b><br><br><input type="checkbox"/> <b><u>FILING WILL AND AFFIDAVIT</u></b><br><br><input type="checkbox"/> <b><u>OTHER PROBATE/ESTATE</u></b> | <input type="checkbox"/> <b><u>ADOPTION</u></b><br><br><input type="checkbox"/> <b><u>FOREIGN ADOPTION</u></b><br><br><input type="checkbox"/> <b><u>CARE AND TREATMENT</u></b><br><br><input type="checkbox"/> <b><u>TERMINATION OF JOINT TENANCY</u></b><br><br><input type="checkbox"/> <b><u>TERMINATION OF LIFE ESTATE</u></b> |
|--|---|---|

**JURY DEMAND**  YES (Check yes only if jury demand is included in petition or as a separate pleading)  
 NO

**SUMMONS ATTACHED:**  YES  NO      **SHERIFF'S PROCESS FEE ATTACHED**  YES  NO

**SERVICE BY:**  PROCESS SERVER/ATTORNEY  
 SHERIFF IN STATE \_\_\_\_\_ (County)  
 SHERIFF OUT OF STATE \_\_\_\_\_ (State)

**PETITIONER/SUBJECT INFORMATION**

(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_ SEX: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

ALIAS NAMES USED: \_\_\_\_\_  
\_\_\_\_\_

**ATTORNEYS**

(Firm Name, Address, Telephone Number and Supreme Court ID Number)

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

**RESPONDENT/OTHER PARTY INFORMATION**

(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_ SEX: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

ALIAS NAMES USED: \_\_\_\_\_  
\_\_\_\_\_

**ATTORNEYS**

(Firm Name, Address, Telephone Number and Supreme Court ID Number)

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

**FOR DOMESTIC CASES - NAME, DATE OF BIRTH AND SOCIAL SECURITY NUMBER OF EACH DEPENDENT CHILD:**

(Name)

(Date of Birth)

(Social Security Number)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The requirement that Social Security numbers be included on domestic cases is mandatory, and authorized by the Supreme Court and federal law. On non-domestic cases, the Social Security number is not mandatory. The number is used for purposes of identification and may be disclosed as permitted by law. This form is not considered to be a public record.

**IN THE 18<sup>TH</sup> JUDICIAL DISTRICT,  
DISTRICT COURT SEDGWICK COUNTY, KANSAS  
FAMILY LAW DEPARTMENT**

**IN THE MATTER OF THE PATERNITY OF**

\_\_\_\_\_  
minor child(ren), by and through parent

\_\_\_\_\_  
(Petitioner)  
and

\_\_\_\_\_  
(Respondent)

Case No. \_\_\_\_\_

**Pursuant to K.S.A. Chapter 23**

**PETITION FOR PATERNITY**

1. Petitioner is a resident of Sedgwick County, Kansas, and the minor child(ren) appears by and through Petitioner, who is the child(ren)'s parent and next friend.

2. That Respondent is a resident of \_\_\_\_\_.

3. The Petitioner and Respondent were not married at the time of the birth of the child(ren).

4. That venue in Sedgwick County, Kansas, is proper, and this Court has jurisdiction over both parties hereto and the subject matter herein.

5. The Petitioner and Respondent are the parents of the following child(ren). The names and dates of birth of the living child(ren) now under eighteen years of age are:

Childs Initials

Sex

Birth Year and Age

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

**SEE ATTACHED LIST FOR ADDITIONAL CHILDREN IF NEEDED:  Yes  No**

6. The minor child(ren) resides at \_\_\_\_\_  
\_\_\_\_\_ (full address) in Sedgwick County, Kansas; the minor child, at all times since birth, has resided within the state of Kansas; and the Petitioner has:

a.  not participated as a party to other custody litigation involving the minor child,

**OR**

b.  has participated in the following custody litigation involving the minor child(ren), specifically, Case Number \_\_\_\_\_, in \_\_\_\_\_ Court, (location); other than the foregoing proceedings, the Petitioner is without knowledge of any other custody proceedings now pending as to said minor child; the Petitioner knows of no other person not now a party to this action, who has physical residency of the minor child, or who claims to have residency or parenting time rights to said minor child; that the Petitioner is a fit and proper person to have care, custody and control of said minor child.

7. In the last 5 years, the child has lived with the following people and addresses:

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8. The parent and child relationship between the father and the minor child is presumed pursuant to K.S.A. chapter 23, article 22, for the following reasons:

father completed a Voluntary Acknowledgement of Paternity (the document allowing the father to appear on the birth certificate), with his consent, and father did not attempt to revoke it within one year;

\_\_\_\_\_ (Name of Party) has openly recognized their paternity of the minor child to third parties;

\_\_\_\_\_ (Name of Party) either has assisted the natural mother financially during the pregnancy, or has provided support to the child following the birth, or both.

9. There are no other people that have legal custody, physical custody, or visitation with the child(ren)

10. That the interstate compact on placement of children, K.S.A. 38-1201 et seq., and amendments thereto, and the Indian Child Welfare Act, 25 U.S.C. 1901 et seq., and amendments thereto, are not applicable to this Paternity proceeding.

**WHEREFORE, the Petitioner prays:**

1. That the Court establish paternity of the minor child.
2. That the Court make custody and residency orders of the minor child consistent with Petitioner's Proposed Parenting Plan.
3. For the Court to order child support pursuant to the Kansas Child Support Guidelines.
4. For the Court to order an Income Withholding Order.
5. That the Court make any child support retroactive to an appropriate date authorized by law.
6. That the Court order the parties to pay all uninsured medical, dental, and orthodontic expenses of the child based on the percentage of income established in line D2 of the child support worksheet.
7. For such other and further relief as to the Court seems fair, just and equitable.

\_\_\_\_\_  
 Petitioner, pro se  
 Street Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**VERIFICATION**

STATE OF KANSAS  
(COUNTY OF SEDGWICK) ss.

I swear or affirm, under penalty of perjury, that I am the Petitioner in this case, and that the statements made in this Petition are true.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_.

\_\_\_\_\_ Petitioner, Pro Se

**SUBSCRIBED AND SWORN** to before me, a Notary Public, this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_.

\_\_\_\_\_  
 Notary Public  
 My appointment expires: \_\_\_\_\_



## KANSAS PAYMENT CENTER CHILD SUPPORT ORDER INFORMATION SHEET

**Purpose:** Federal law requires Kansas to process child support through a single location in the state. To insure that processing of child support payments is not delayed, the KPC must have all information listed on the form below.

**Who submits the completed form:** The payee's attorney shall file the completed form along with the Journal Entry with the Clerk of the District Court per Kansas Supreme Court Administrative Order No. 154.

**Case Number:** You must give the full, accurate court order number, or payments may be delayed. The case number may be copied from the child support order. The case number format is as follows:

	County	Year	Case Type	Case Number
Example: SG 00D 000123	(SG)	(00)	(D)	(000123)

Please call your local Clerk of the District Court if you need additional information to complete this form.

**THIS FORM MUST BE ATTACHED TO THE ORDER AND FILED WITH THE CLERK OF THE DISTRICT COURT.**

<b>PLEASE print or type all information.</b>			
Case No.: SG _____  Interstate <span style="margin-left: 40px;">Circle One</span> <input type="checkbox"/> Y <input type="checkbox"/> N	Check if applicable:  <input type="checkbox"/> Court Trustee Case	Check one: <input type="checkbox"/> New case / order <input type="checkbox"/> Modified order Filestamp Date of Order (above):	
<b>Obligation Information</b>  Support Amount    Frequency Code    Start Date  Current Child support due:     \$ _____  Current Maintenance (Alimony) due: \$ _____  Other support due:                     \$ _____  \$ _____		<b>Payment Frequency Codes</b>  (W)    Weekly (B)    Biweekly (M)    Monthly (SM)   Semi-monthly (Q)    Quarterly (A)    Annually (SA)   Semi-Annually (L)    Lump Sum	
<b>Information about the PAYING person</b>			
NAME: (First, Middle Initial, Last):			
Social Security Number:	Date of Birth:	Phone:	
Address:	City:	State:	Zip:
Name of Employer:		Employer's Phone:	
Employer Address:	City:	State:	Zip
<b>Information about the person RECEIVING support</b>			
NAME: (First, Middle Initial, Last):			
Social Security Number:	Date of Birth:	Phone:	
Address:	City:	State:	Zip:
Name of Employer:		Employer's Phone:	
Employer Address:	City:	State:	Zip
<b>Information about the Third Party Payee</b>			
NAME: (First, Middle Initial, Last):			
Social Security Number:	Date of Birth:	Phone:	
Address:	City:	State:	Zip:
<b>Information about the CHILD(REN) covered by this support order:</b>			
NAME (First and Last)	Social Security Number:	Date of Birth:	
1.			
2.			
3.			
4.			

Form Completed By: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE: NOTIFY THE COURT TRUSTEE'S OFFICE IF THE ABOVE INFORMATION CHANGES.**

IN THE 18<sup>TH</sup> JUDICIAL DISTRICT,  
DISTRICT COURT SEDGWICK COUNTY, KANSAS  
FAMILY LAW DEPARTMENT

IN THE MATTER OF THE PATERNITY OF

\_\_\_\_\_  
minor child(ren), by and through parent

\_\_\_\_\_  
(Petitioner)  
and

\_\_\_\_\_  
(Respondent)

Case No. \_\_\_\_\_

Pursuant to K.S.A. Chapter 23

**MOTION FOR TEMPORARY ORDERS**

Petitioner moves the Court as follows:

To determine that the  Petitioner  Respondent is the natural father of the minor child(ren) based upon one of the presumptions set forth in the Petition.

Initials of Child

Sex

Birth Year and Age

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

For the Court to set child support pursuant to the Kansas Child Support Guidelines, effective on the first day of the month following the date of birth of the minor child, or the date of the presumption establishing paternity, whichever is earlier.

For the Court to adopt the Petitioner's Proposed Parenting Plan.

For the Court to issue an Income Withholding Order for support.

Other: \_\_\_\_\_

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

\_\_\_\_\_  
Petitioner, Pro Se

**NOTICE OF HEARING**

Please take notice and be advised that the above Motion will be docketed in the Eighteenth Judicial District on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at (time) \_\_\_\_\_ m, in courtroom \_\_\_\_\_, with information provided on the 4<sup>th</sup> floor of the Sedgwick County Courthouse, 525 N. Main Street, Wichita, KS 67203.

**CERTIFICATE OF SERVICE**

I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I caused to be mailed a true and correct copy of the above and foregoing **MOTION**, by REGULAR MAIL, POSTAGE PRE-PAID in the United States Mail, addressed to the following:

Name: \_\_\_\_\_  
(Respondent)

Name: \_\_\_\_\_  
(Attorney for Respondent)

Address: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_\_  
Petitioner, pro se

IN THE 18<sup>TH</sup> JUDICIAL DISTRICT,  
DISTRICT COURT SEDGWICK COUNTY, KANSAS  
FAMILY LAW DEPARTMENT

IN THE MATTER OF THE PATERNITY OF

\_\_\_\_\_  
minor child(ren), by and through parent

\_\_\_\_\_  
(Petitioner)  
and

\_\_\_\_\_  
(Respondent)

Pursuant to K.S.A. Chapter 23

Case No. \_\_\_\_\_

TEMPORARY PARENTING PLAN  
 PERMANENT PARENTING PLAN

COMES NOW, the (Petitioner) (Respondent), and submit the following (proposed plan) (agreed plan of the parties) pursuant to K.S.A. 23-3211, et seq:

1. This parenting plan applies to the following child(ren):

Initials of Child

Sex

Birth Year and Age

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SEE ATTACHED LIST FOR ADDITIONAL CHILD(REN) IF NEEDED:  Yes  No

2. A.  **Joint Legal Custody**—Both parents are fit and proper persons to have joint legal custody of the minor child(ren). It is in the best interest of the child(ren) that the parties jointly share in the care of the child(ren). The term “joint legal custody” means that both parents have equal rights and responsibilities regarding their child(ren) and that neither parent’s rights are superior to the other parent’s.

B.  **Sole Legal Custody**—Joint legal custody is not in the best interests of the child(ren). The parent granted sole legal custody has the primary right to decide matters regarding matters of health, education and welfare in the child(ren)’s best interests. The parent not granted sole legal custody may make emergency decisions affecting the health or safety of the child(ren) when the child(ren) is in that parent’s physical care and control. The grant of sole legal custody to one parent does not

deprive the other parent access to information regarding the child(ren) unless the Court shall so order, stating the reasons for that determination.

Sole legal custody is granted to  Petitioner  Respondent for the following reasons:

The other parent is unable or should not be allowed to exercise any decision making

There is such a high level of disagreement between the parents that one parent needs to be designated as the primary decision maker for the best interests of the child(ren) served

There is a danger to the child(ren)

The other party cannot be located

### **C. Restriction of Information Regarding the Child(ren) to Non Legal Custodian**

The  Petitioner  Respondent is restrained from access to information regarding the child(ren) for the following specific reasons (such as agreement of the parties or serious danger to the child(ren)): \_\_\_\_\_

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### **3. RESIDENCY**

The parties adopt the following residency plan:

**PRIMARY RESIDENCY**, where the  Petitioner  Respondent, shall have all weekdays and weekends not specifically set forth below.

**OR**

**SHARED RESIDENCY**, with each parent having equal or nearly equal time and blocks of parenting time.

**The parenting plan is as follows (COMPLETE ONLY 1 BOX)**

**If a PRIMARY RESIDENTIAL parent is designated,** the Parenting Time for non-primary parent shall be:

A.  on a reasonable basis.

B.  the specific parenting time as follows:

Weekday: From \_\_\_\_\_  a.m./ p.m. on \_\_\_\_\_ (day of week) to \_\_\_\_\_  
 a.m./ p.m. on \_\_\_\_\_ (day of week) starting on the date set by the Court.

Weekends:  Each  Every other weekend: From \_\_\_\_\_  a.m./ p.m. on \_\_\_\_\_ (day of week) to \_\_\_\_\_  a.m./ p.m. on \_\_\_\_\_ (day of week) starting on the date set by the Court.

**If SHARED RESIDENCY is used,** the parenting schedule will be:

Week to week, with exchanges taking place on \_\_\_\_\_ (day of week) at \_\_\_\_\_ (am/pm)(time), at \_\_\_\_\_ (location).

**OR**

The parents will have the children on the following days:

**Petitioner:** From \_\_\_\_\_  a.m./ p.m. on \_\_\_\_\_ (day of week) to \_\_\_\_\_  
 a.m./ p.m. on \_\_\_\_\_ (day of week) to \_\_\_\_\_ a.m./ p.m.  
on \_\_\_\_\_ starting on the \_\_\_\_\_ day of \_\_\_\_\_ 2 \_\_\_\_\_.

**Respondent:** From \_\_\_\_\_  a.m./ p.m. on \_\_\_\_\_ (day of week) to \_\_\_\_\_  
 a.m./ p.m. on \_\_\_\_\_ (day of week) to \_\_\_\_\_  a.m./ p.m.  
on \_\_\_\_\_ starting on the \_\_\_\_\_ day of \_\_\_\_\_ 2 \_\_\_\_\_.

**OR**

The parties adopt the following shared residency plan:

**4. HOLIDAYS**

- A.  The parties shall share holidays on a reasonable basis
- B.  The schedule below will govern holidays. Insert "Mom" or "Dad" in all holidays the parties want to schedule.

HOLIDAY	EVEN YEARS	ODD YEARS
Mother's Day	Mom	Mom
Father's Day	Dad	Dad
Fall Break		
Thanksgiving (Monday or on last day of school at 6:00 p.m. until Sunday at 6:00 p.m.)		
Christmas eve, from Dec. 24 <sup>th</sup> at 6:00 p.m. to Dec. 25 <sup>th</sup> at 10:30 a.m.		
Christmas Day, from Dec. 25 <sup>th</sup> at 10:30 a.m. to Dec. 25 <sup>th</sup> at 8:00 p.m.		
Spring Break (Fri after school 6:00 p.m. until Sun before school 6:00 a.m.)		
Easter		
Memorial Day		
July 4 <sup>th</sup>		
Labor Day		
Halloween		
Children's birthdays		
Summer Visitation:		

Holidays and special days specified above will have precedence over weekday and weekend visitation.

Holidays have priority over other special occasions.

There shall be no adjustment for "missed" weekends or weekdays due to interruption by specified holidays or special days. The parties are encouraged to compensate for missed weekends so that a parent will not go more than two weekends without having weekend parenting time.

**5. Disputes between the parties, other than child support dispute, shall be submitted to:**

mediation by: \_\_\_\_\_  
 \_\_\_\_\_

or domestic limited case management by: \_\_\_\_\_

The costs of this process shall be allocated between the parties as follows:

Equally

or

Based on each party's proportional share of income from line 6 of the Child Support Worksheets

or

As determined in the dispute resolution process.

#### 6. Changing of the Child(ren)'s Residence:

**Removal from State or Change of Residence:** Each party shall give the other written notice by restricted mail, return receipt requested, at his or her last known address not less than 30 (thirty) days prior to changing residence, or if the child(ren) is to be removed from the state of Kansas for in excess of ninety (90) days.

**Notice of Removal or Change not Required:** A parent is not required to give notice of removal from the state or change of residence to the other parent if the other parent has been convicted of a crime specified in Article 54 (crimes against persons), Article 55 (sex offenses), or Article 56 (crimes affecting family relationships and children) of Chapter 21 of the Kansas Statutes Annotated in which the child(ren) is the victim of such crime.

#### 7. Transportation and transportation costs:

Responsibility for transportation and transportation costs, as it relates to parenting time, shall be as follows:

**Transportation arrangements** and costs shall be the responsibility of

Parent Exercising Visitation

Shared Equally

**Exchange Point:** The exchange point for the child(ren) shall be:

The home of the  Petitioner  Respondent

Other: (Please specify) \_\_\_\_\_

#### 8. Notice of Intent to Exercise or Not to Exercise Parenting Time:

The **Petitioner/Respondent** shall notify the other parent \_\_\_\_\_ hours in advance of the intent to **not** exercise scheduled parenting time. If notification is not given, the subject parenting time will be considered waived.



Except for extreme and exceptional circumstances, a parent is not required to wait for the other parent more than 30 minutes before the parenting time is considered waived.

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

**9. Telephone and Mail Contact Between Parent and Child(ren).**

**Telephone Contact:** Each parent is allowed reasonable telephone access to their child(ren) at reasonable hours without interference from the other parent.

Telephone contact with a child(ren) should not be used as an opportunity by either parent to discuss issues not related to the child(ren) with the other parent. When telephone contact is attempted to be made with the child(ren), the child(ren) should either have direct access to the telephone or the telephone should be given directly to the child(ren) with a minimum of conversation between the parents unless necessary for discussion of matters related to that contact. Any parent shall not refuse to answer the phone, turn off the phone or put call block on the line in order to deny the other parent telephone contact with the child(ren). Each parent shall supply the other parent with current telephone numbers, where the child(ren) may be found or is/are staying.

**Mail and E-mail Contact:** Each parent with whom the child(ren) is not then living should have unlimited ability to contact each other by use of either regular United States mail or electronic mail, if such an account is available. The parent seeking mail contact must provide self-addressed stamped envelopes for the child(ren) to use. If available, current e-mail addresses where the child(ren) may be contacted shall be supplied to both parents by each parent. Where possible, reasonable computer access shall be allowed.

**10. All Law Enforcement Officers are directed to assist in enforcing this parenting plan.**

**11. Other Considerations and Agreements:**

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12. That this parenting plan is in the best interest of the minor child(ren)

13. That, when mutual decision making is designated but cannot be achieved, the parties shall make a good faith effort to resolve the issue through the dispute resolution process. If a parent fails to comply with a provision of this plan, the other parent's obligations under the plan are not affected unless specifically ordered by the Court.

14. This arrangement shall remain in effect until further Order of the Court.

**IT IS SO ORDERED.**

---

**JUDGE OF THE DISTRICT COURT  
FAMILY LAW DEPARTMENT**

Approved by:

\_\_\_\_\_  
Petitioner, Pro Se

\_\_\_\_\_  
Respondent, Pro Se

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email

\_\_\_\_\_  
Email

**IN THE MATTER OF**

\_\_\_\_\_ **Petitioner**

and

\_\_\_\_\_ **Respondent**

**Pursuant to K.S.A. Chapter 23**

**Case No.** \_\_\_\_\_

**To be used in a PATERNITY CASE:**

**DOMESTIC RELATIONS AFFIDAVIT OF \_\_\_\_\_(name)**

1. Petitioner's Residence \_\_\_\_\_

\_\_\_\_\_ XXX-XX-\_\_\_\_\_  
Birth Month/Year Social Security Number Telephone

2. Respondent's Residence \_\_\_\_\_

\_\_\_\_\_ XXX-XX-\_\_\_\_\_  
Birth Month/Year Social Security Number Telephone

3. Number of children of the relationship: \_\_\_\_\_

4. Initials, Social Security Numbers, the year of each child's birth and ages of minor children of the relationship:

Child's Initials	Last 4 SSN	Birth Year	Age	Custodian

5. Initials, Social Security Numbers, and ages of minor children of previous relationships and facts as to custody and support payments paid or received, if any.

Child's Initials	Last 4 SSN	Age	Custodian	Support Pmt	Paid or Rec'd

6. Petitioner is employed by \_\_\_\_\_  
\_\_\_\_\_

Respondent is employed by \_\_\_\_\_  
\_\_\_\_\_

(Include name and address of employers)

**Monthly** income as follows:

A.	Wage Earner	Petitioner	Respondent
1.	Gross Income	\$ _____	\$ _____
2.	Other Income	\$ _____	\$ _____
3.	Subtotal Gross Income	\$ _____	\$ _____
4.	Federal Withholding (Claiming Exemptions)	\$ _____	\$ _____
5.	Federal Income Tax	\$ _____	\$ _____
6.	OASDHI	\$ _____	\$ _____
7.	Kansas Withholding	\$ _____	\$ _____
8.	Subtotal Deductions	\$ _____	\$ _____
9.	Net Income	\$ _____	\$ _____

B.	Self-Employed	Petitioner	Respondent
1.	Gross Income from self-employment	\$ _____	\$ _____
2.	Other Income	\$ _____	\$ _____
3.	Subtotal Gross Income	\$ _____	\$ _____
4.	Reasonable Business Expenses (Itemized on attached exhibit)	\$ _____	\$ _____
5.	Self-Employment Tax	\$ _____	\$ _____
6.	Estimated Tax Payments (Claim Exemptions)	\$ _____	\$ _____
7.	Federal Income Tax	\$ _____	\$ _____
8.	Kansas Withholding	\$ _____	\$ _____
9.	Subtotal Deductions	\$ _____	\$ _____
10.	Net Income	\$ _____	\$ _____
11.	(Line B.3. minus Line B.9.)		

Pay period: \_\_\_\_\_  
Petitioner Respondent

7. Expenses Relevant to Paternity Cases:

Item	Petitioner	Respondent
1. Monthly Child Care (work-related)	\$ _____	\$ _____
2. Health Insurance:		
Who provides Health Insurance Coverage for the Child(ren)? _____		
How much does the party who provides health care pay for family coverage?		
\$ _____ per _____ (week, every two weeks, month)		
How much does it cost the parent to furnish health insurance only on the parent?		
\$ _____ per _____ (week, every two weeks, month)		

8. Child support adjustments requested.

	Petitioner	Respondent
Long Distance Parenting Time Costs	\$ _____	\$ _____
Parenting Time Adjustments	\$ _____	\$ _____
Income Tax Considerations	\$ _____	\$ _____
Special Needs/Extraordinary Exp.	\$ _____	\$ _____
Support Beyond Age of Majority	\$ _____	\$ _____
Overall Financial Condition	\$ _____	\$ _____

AFFIANT

/s/ \_\_\_\_\_

VERIFICATION

State of \_\_\_\_\_, County of \_\_\_\_\_,

I swear or affirm under penalty of perjury that this affidavit and attached schedules are true and complete.

/s/ \_\_\_\_\_

Subscribed and sworn this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

/s/ \_\_\_\_\_

Notary Public

My Appointment Expires:

## Child Support Worksheet

IN THE 18<sup>th</sup> JUDICIAL DISTRICT SEDGWICK COUNTY, KANSAS

IN THE MATTER OF:

\_\_\_\_\_

and

\_\_\_\_\_

CASE NO. \_\_\_\_\_

CHILD SUPPORT WORKSHEET OF (name) \_\_\_\_\_

		Party Name	Party Name
<b>A. <u>INCOME COMPUTATION – WAGE EARNER</u></b>			
1. Domestic Gross Income (Insert on Line C.1. below)*		\$ _____	\$ _____
<b>B. <u>INCOME COMPUTATION – SELF-EMPLOYED</u></b>			
1. Self-Employment Gross Income		_____	_____
2. Reasonable Business Expenses	(-)	_____	_____
3. Domestic Gross Income (Insert on Line C.1. below)*		_____	_____
<b>C. <u>ADJUSTMENTS TO DOMESTIC GROSS INCOME</u></b>			
1. Domestic Gross Income		_____	_____
2. Court-Ordered Child Support Paid	(-)	_____	_____
3. Court-Ordered Maintenance Paid _____%	(-)	_____	_____
4. Court-Ordered Maintenance Received _____%	(+)	_____	_____
5. Child Support Income (Insert on Line D.1. below)		_____	_____
<b>D. <u>COMPUTATION OF CHILD SUPPORT</u></b>			
1. Child Support Income		_____ + _____	_____
		= _____	_____ %
2. Proportionate Shares of Combined Income (Each parent's income divided by combined income)		_____ %	_____ %
3. Gross Child Support Obligation** (Using the combined income from Line D.1., find the amount for each child and enter total for all children)			
Age of Children	0-5	6-11	12-18
Number Per Age Category	_____	_____	_____
Total Amount	_____ +	_____ +	_____ = _____
* Cost of Living Differential Adjustment?	_____ Yes	_____ No	
**Multiple Family Application?	_____ Yes	_____ No	
Parenting Time Adjustment	_____ Yes	_____ No	_____ %
Income Beyond the Child Support Schedule calculation used	_____ Yes	_____ No	

Case No. \_\_\_\_\_

		_____ Party Name	_____ Party Name
4.	Proportionate Share (Line D.3 x Line D.2)	_____	_____
5.	Parenting Time Adjustment _____ % x Line D.4 (-)	_____	_____
6.	Proportionate Shares after Parenting Time Adjustment	_____	_____
7.	Health and Dental Insurance Premium	\$ _____	+ \$ _____
8.	Proportionate Shares Health Insurance Premium	_____	_____
9.	Work-Related Child Care Costs Formula: Amt. - (Amt. x %) for each child care credit Example: 200 - (200 x 30%)	_____	_____
10.	Proportionate Shares Work-Related Child Care Costs	_____	_____
11.	Proportionate Child Support Obligation for Each Parent (Line D.6 + D.8 + D.10)	_____	_____
12.	Credit for Insurance or Work-Related Child Care Paid (-)	_____	_____
13.	Basic Parental Child Support Obligation ((Line 11-Line D.12); Insert on Line F.1. below)	_____	_____

E. CHILD SUPPORT ADJUSTMENTS

			_____ PARTY NAME	_____ PARTY NAME
APPLICABLE	N/A	CATEGORY		
1.	<input type="checkbox"/>	<input type="checkbox"/> Long Distance Parenting Time Costs	(+/-) _____	(+/-) _____
2.	<input type="checkbox"/>	<input type="checkbox"/> Income Tax Considerations	(+/-) _____	(+/-) _____
3.	<input type="checkbox"/>	<input type="checkbox"/> Special Needs	(+/-) _____	(+/-) _____
4.	<input type="checkbox"/>	<input type="checkbox"/> Agreement Past Majority	(+/-) _____	(+/-) _____
5.	<input type="checkbox"/>	<input type="checkbox"/> Overall Financial Condition	(+/-) _____	(+/-) _____
6.	TOTAL (Insert on Line F.2. below)		_____	_____

F. DEVIATION(S) FROM REBUTTABLE PRESUMPTION AMOUNT

AMOUNT ALLOWED

		Party Name	Party Name
1.	Basic Parental Child Support Obligation (Line D.13. from above)	_____	_____
2.	Total Child Support Adjustments (Line E.6. from above)	(+/-) _____	_____
3.	Adjusted Subtotal (Line F.1. +/- Line F.2.)	_____	_____
4.	Equal Parenting Time Obligation ( <input type="checkbox"/> EPT Worksheet or <input type="checkbox"/> Shared Expense Formula)	_____	_____
5. a	Ability to Pay Calculation Child Support Income (D.1) _____ - Poverty Guidelines for Household of One _____ = _____		
5. b.	Subtotal (lesser amount of F.3 and F.5.a)	_____	_____
6.	Social Security Dependent Benefits	(-) _____ (-) _____	
6. b.	Final Subtotal	_____	_____
7.	Enforcement Fee Allowance** (Applied only to Nonresidential Parent) ((Line F.3. x Collection Fee %) x .5) or (Monthly Flat Fee x .5)	Percentage _____ % Flat Fee \$ _____	
		(+ ) _____	(+ ) _____
8.	Net Parental Child Support Obligation (Line 5.b. + Line F.4.)	_____	_____

\*\*Parent paying support.

\_\_\_\_\_  
Prepared By (Signature)

\_\_\_\_\_  
Judge/Hearing Officer Signature

\_\_\_\_\_  
Prepared By (Print Name)

\_\_\_\_\_  
Date Submitted

\_\_\_\_\_  
Date Approved



**IN THE EIGHTEENTH JUDICIAL DISTRICT  
DISTRICT COURT, SEDGWICK COUNTY, KANSAS  
FAMILY LAW DEPARTMENT**

\_\_\_\_\_  
\_\_\_\_\_  
Petitioner (s)

VS.

\_\_\_\_\_  
\_\_\_\_\_  
Respondent (s)

\_\_\_\_\_ **CASENO.**

**SUMMONS**

To the above-named Respondent:

You are hereby summoned and required to serve upon \_\_\_\_\_, Petitioner's attorney,

whose address is \_\_\_\_\_, a pleading to the petition, which is herewith served upon you, within 20 days [30 days if out of state] after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the petition. Your pleading must also be filed with the court. As provided in subsection (a) of K.S.A. 60-213, and amendments thereto, your answer must state as a counterclaim any related claim which you may have against the Petitioner, or you will thereafter be barred from making such claim in any other action.

**REASONABLE ACCOMMODATIONS WILL BE PROVIDED IN ACCORDANCE WITH THE AMERICANS WITH DISABILITIES ACT**



Dated \_\_\_\_\_

By \_\_\_\_\_, Deputy Clerk of the District Court of Sedgwick County, Kansas

**RETURN ON SERVICE OF SUMMONS**

I hereby certify that I have served the within summons:

- [1] Personal Service.** By delivering on the day of \_\_\_\_\_, a copy of the summons and a copy of the petition to each of the within-named Respondents \_\_\_\_\_
- [2] Residence Service.** By leaving on the \_\_\_ day of \_\_\_\_\_, for each of the within-named Respondents \_\_\_\_\_

a copy of the summons and a copy of the petition at the respective dwelling place or usual place of abode of such Respondents with some person of suitable age and discretion residing therein.

- [3] Agent Service.** By delivering on the day of \_\_\_\_\_, a copy of the summons and a copy of the petition to each of the following agents authorized by appointment or by law to receive service of process \_\_\_\_\_

- [4] Residence Service and Mailing.** By leaving a copy of the summons and a copy of the petition at the dwelling house or usual place of abode and mailing by first-class mail to each of the following Respondents a notice that such copy has been so left \_\_\_\_\_

- [5] Certified Mail Service.** I hereby certify that I have served the within summons: (1) By mailing on the \_\_\_\_\_ day of \_\_\_\_\_, a copy of the summons and a copy of the petition in the above action as certified mail return receipt requested to each of the within-named Respondents; (2) the name and address on the envelope containing the process mailed as certified mail return receipt requested were as follows:

By \_\_\_\_\_

- [6] Certified Mail Service Refused.** I hereby certify that on the \_\_\_\_\_ day of \_\_\_\_\_, I mailed a copy of the summons and petition in the above action by first-class mail, postage prepaid, addressed to \_\_\_\_\_ at \_\_\_\_\_

By \_\_\_\_\_

- [7] No Service.** The following Respondents were not found in this county:

\_\_\_\_\_

Dated: \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Sheriff

By: \_\_\_\_\_ Deputy

IN THE 18<sup>TH</sup> JUDICIAL DISTRICT,  
DISTRICT COURT SEDGWICK COUNTY, KANSAS  
FAMILY LAW DEPARTMENT

IN THE MATTER OF THE PATERNITY OF

\_\_\_\_\_  
minor child(ren), by and through parent

\_\_\_\_\_  
(Petitioner)  
and

\_\_\_\_\_  
(Respondent)

Case No. \_\_\_\_\_

Pursuant to K.S.A. Chapter 23

**JOURNAL ENTRY & DECREE OF PATERNITY**

**NOW**, on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_, the above matter comes before the Court for final hearing. Petitioner appears in person, pro se. Respondent (  **does not appear OR**  **appears in person or through counsel**), and does not contest these proceedings. Both parties consent to the waiving of a record. There are no other appearances.

**WHEREUPON**, after reviewing matters of record, and considering all of the pleadings, and otherwise being duly advised, the Court finds, orders and decrees:

1. The Court has jurisdiction over this matter and the parties.
2. Kansas is the home state of the minor child(ren) and this court has jurisdiction to make a child custody determination herein.
3. A guardian ad litem is not required for the minor child(ren) since the interests of parties and the interests of the minor child(ren) are the same.
4. That the Respondent has received a copy of the Petition in this case by:

**(CHECK ONLY ONE)**

\_\_\_\_\_ written entry of appearance and waiver of summons;

\_\_\_\_\_ was served with summons by the \_\_\_\_\_ County Sheriff;

\_\_\_\_\_ was served by special process server;

\_\_\_\_\_ was served with summons by certified-mail return receipt requested; or

\_\_\_\_\_ was served by publication.

5. Service of process upon Respondent has been duly accomplished, and is valid, binding and legal in all respects, and is hereby approved by the Court.

6. \_\_\_\_\_ is the natural and legal father of the child(ren) listed below. The initials and years of birth of the living child(ren) now under eighteen years of age are:

**Initials**

**YOB**

_____	_____
_____	_____
_____	_____
_____	_____

**SEE ATTACHED LIST FOR ADDITIONAL CHILD(REN) IF NEEDED: \_\_\_Yes\_\_\_No**

**7. LEGAL CUSTODY OF THE CHILD(REN):**

Pursuant to the attached, parenting plan,

A.  The parties are granted joint legal custody of the minor child(ren) and shall consult with each other concerning decisions about the minor child(ren).

B.  Sole legal custody is granted to the  Petitioner  Respondent for the following reasons:

The other parent is unable or should not exercise any decision-making.

There is a danger to the child(ren).

The other party cannot be located.

There is such a high level of disagreement between the parents that one parent needs to be designated as the primary decision marker for the best interests of the child(ren) to be served.

**8. RESIDENCY OF THE CHILD(REN)**

This Court hereby adopts the Permanent Parenting Plan of the parties which is filed separately herein, which designates **(choose one)**

A.  Petitioner is awarded primary residency of the child(ren) with the Respondent to have parenting as set out in the permanent parenting plan of the parties.

B.  Respondent is awarded primary residency of the child(ren) with the Petitioner to have parenting as set out in the permanent parenting plan of the parties.

C.  The parties have shared residency, with each parent having equal or nearly equal time and blocks of parenting time as set out in the permanent parenting plan of the parties.

**9. CHILD SUPPORT (CHECK ALL THAT APPLY)**

A.  Petitioner  Respondent is ordered to pay \$\_\_\_\_\_ per month commencing \_\_\_\_\_ (month/day/year) as and for support for the minor child(ren) of the parties. Said support shall be paid through the Kansas Payment Center at the address which is set out below.

Child Support Rights have been assigned to DCF

B.  Petitioner  Respondent is ordered shall obtain and maintain suitable health insurance coverage for the minor children consistent with K.S.A. § 23-3114 and provide the other parent with suitable documentation (such as the insurance ID card) that allows the children to obtain medical services. In the event of IVD orders, the parent obtaining insurance will provide DCF suitable documentation, including the policy and identification numbers, to verify compliance with this order.

The parties shall share all unreimbursed medical and dental expenses of the minor child(ren) based on the relative income percentage of the parties as stated on line D 2 of the attached Child Support Worksheet. This percentage payment is in addition to the child support obligation of both parties and these payments need not be made through the Kansas Payment Center. A Medical Withholding Order or National Medical Support Notice shall be issued pursuant to K.S.A. 23-3115 and/or 42 U.S.C. 666(a)(19) if necessary.

**10. CLAIMING CHILDREN FOR INCOME TAX PURPOSES**

The parties agree to the following arrangement regarding claiming the children for income tax purposes (CHECK ONLY ONE):

A.  The primary residential custodial parent is hereby allowed to claim the children for income tax purposes commencing in the current tax year and every year thereafter.

B.  The parties shall alternate claiming the child(ren) provided payor of child support obligation is current as of December 31<sup>st</sup> of the year that payor is to claim the children with the primary residential custodian taking the even years and the non-primary custodian taking odd numbered years. Parties shall complete IRS form 8332, available online.

C.  If parties have two minor children) Parties shall split claiming the children until first child reaches age 18; thereafter, they will alternate years with the primary residential custodial parent taking the first year. In order to utilize split claiming, payor of child support obligation must be current in that obligation as of December 31<sup>st</sup> of any year. Parties shall complete IRS form 8332, available online.

D.  The Court makes no order for claiming children for income tax purposes.

**11. ADDRESS FOR PAYMENTS AND ROLE OF COURT TRUSTEE**

The address for support obligation payments is as follows:  
Kansas Payment Center  
Box 758599  
Topeka, KS 66675-8599

IT IS FURTHER ORDERED that all child support payments shall be paid to the Kansas Payment Center, and a fee shall be deducted therefrom by the Kansas Payment Center to defray the expense of the operation of the Office of the District Court Trustee. The case number shown on the first page of this order shall be placed on all checks or money orders and said checks or money orders shall be made payable to the Kansas Payment Center and include the county designation (SG). The Kansas Payment Center shall forward said payments to (Name) \_\_\_\_\_ at \_\_\_\_\_ (city, state, zip) and it shall be the responsibility of the receiving party to inform the Clerk of any change in address.

IT IS FURTHER ORDERED that an income withholding order shall be issued immediately as required by K.S.A. 23-4,105 *et seq.* for the child support herein. The Office of the District Court Trustee shall immediately prepare the income withholding order, notice and answer forms for filing and service to the obligor’s payer of income. Each party shall inform the Clerk of the District Court, in writing, of any change of name, residence and employer (with business address) within seven (7) days of a change.

IT IS FURTHER ORDERED that, until the commencement of withholding by a payer/employer, the obligor shall pay all child support payments required by the support order. Payments shall be remitted by the obligor to the Kansas Payment Center on or before the due date specified in the order.

**IT IS SO ORDERED.**

\_\_\_\_\_  
**JUDGE OF THE DISTRICT COURT**

\_\_\_\_\_  
Petitioner Pro Se

\_\_\_\_\_  
Respondent Pro Se

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email

\_\_\_\_\_  
Email

**IN THE EIGHTEENTH JUDICIAL DISTRICT  
SEDGWICK COUNTY, KANSAS  
FAMILY LAW DEPARTMENT**

\_\_\_\_\_, **Petitioner**

**and**

CASE: \_\_\_\_\_

\_\_\_\_\_, **Respondent**

**ORDER IMPUTING INCOME**

Now on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, The court finds that to the extent known, after considering all of the factors contained in KS Sup.Ct. Jadmin. Order 307 II. F. including the circumstances surrounding the party's incarceration (if applicable), the party indicated below is an adult, is not disabled and is capable of obtaining full-time employment in the community, at least at a minimum wage.

The court orders that a gross monthly income shall be imputed to the:

**Petitioner**                       **Respondent** as follows:                      **(Select I or II)**

**I. MINIMUM WAGE:** A gross income based on the minimum wage of \$1257 per month;

**-OR-**

**II. OTHER THAN MINIMUM WAGE:** A gross income of \_\_\_\_\_ per month. The court further finds that to the extent known, they have the ability to pay child support based upon consideration of the following factors:

- the respective assets of the parties;
- the residence of the party;
- the employment and earning history of the party;
- the job skills of the party.
- the education attained by the party;
- the job skills of the party;
- the literacy of the party;
- the party's age;
- the parties health;
- the parties criminal history;
- the availability in the community of jobs paying a full-time minimum-wage; the following other factors \_\_\_\_\_

\_\_\_\_\_  
Judge, Family Law Department  
18<sup>th</sup> Judicial District, Sedgwick County, Kansas