

UNCONTESTED CHANGE OF CUSTODY

A change of custody is allowed when the parent(s) can prove that there are substantial changes affecting the welfare and best interests of the child(ren). Parents can enter into an agreement regarding custody, subject to the court's approval. The parental agreement will be effective unless the judge decides that the proposed change is not in the best interests of the childr(en). The parents' agreement can be made a Final Order of modification by the trial court at any time after the agreement has been submitted to the Court.

When a parent sues the other parent to change custody, the court has the power to award sole custody, joint custody, joint legal custody, and joint physical custody. Additionally, the court may award custody to a third person when both parents are proved to be unfit. The Judge has the power to Order a psychological evaluation of the family, an independent medical evaluation, or an investigation by the local family and children services agency.

A complaint for change of custody brought by the non-custodial parent must be brought in the county in which the legal custodian of the child or children. A complaint for change of custody brought by the legal custodian must be brought in the county in which the Defendant resides.

A Judge may consider the desire of a child who is at least eleven years of age, but not yet fourteen. However, the child's desire by itself is not a material change of conditions or circumstances. The wishes of a child aged fourteen or older is controlling unless the parent whom the child chooses is unfit. During a custody hearing, the trial court may Order the parents to leave the courtroom when a child testifies.

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

COMPLAINT FOR CHANGE OF CUSTODY

Now comes the Plaintiff, _____, and states his/her claim against the Defendant, _____, for a change of custody as follows:

1.

Jurisdiction and Venue (choose a or b)

- a) The Defendant is subject to the jurisdiction of this Court and has signed an Acknowledgment of Service and Summons.
- b) The Defendant is not subject to the jurisdiction of this Court, but has signed an Affidavit of Waiver of Venue and Personal Jurisdiction.

2.

Current Custody Arrangement (choose a or b)

- a) The Defendant presently has legal custody of the minor child(ren), _____, age(s) _____, by virtue of a Final Order and decree of divorce in Civil Action No. _____, entered on the _____ day of _____, 20 _____ in the Superior Court of _____ County, Georgia.
- b) The Defendant presently has legal custody of the minor child(ren), _____, age(s) _____, by virtue of an Order of legitimation in Civil Action No. _____, entered on the _____ day of _____, 20 _____.

3.

Change in Circumstances

There has been a change in circumstances materially affecting the welfare of the minor child(ren) as follows: _____

4.

Proposed New Custody Arrangement

As a result of such change of circumstances, the Plaintiff and Defendant have agreed that custody should be as follows: _____

5.

Plaintiff's Ability to be Custodial Parent

The Plaintiff is a fit and capable parent and is otherwise qualified to assume full custody of the minor child(ren).

THEREFORE, Plaintiff prays:

(a) That custody of the minor child(ren) be changed as follows:

(b) That the Plaintiff have such additional relief as the Court may consider equitable and appropriate.

Plaintiff *pro se*

Address: _____

Telephone number(s): _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
v.	§	Civil Action
	§	File No. _____
_____	§	
Defendant.		

VERIFICATION

Personally, appeared before me the undersigned who on oath states that the facts set forth in this Complaint are true and correct to the best of his/her knowledge and belief.

Plaintiff pro se

Sworn to and subscribed before me
this _____ day of _____, 20_____.

Notary Public, State of Georgia

My Commission Expires: _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

PLAINTIFF’S AFFIDAVIT REQUIRED BY O.C.G.A. § 19-9-69

State of Georgia
County of _____

Personally, before the undersigned officer authorized to administer oaths appeared,
_____ who, being duly sworn, does state
on oath the following:

1.

That Affiant, _____, is the plaintiff
named in the above- styled action.

2.

The above-styled action concerns the custody of:

Name: _____	DOB: _____	Sex: _____
Name: _____	DOB: _____	Sex: _____
Name: _____	DOB: _____	Sex: _____
Name: _____	DOB: _____	Sex: _____

3.

The present address of the child(ren) is:

4.

For the past five years, the children lived at the following addresses with the following persons:

Address	Dates	Lived With

5.

The child(ren) presently live/lives with _____
_____.

6.

Other Cases Concerning the Child(ren) (Choose a or b)

a) Plaintiff asserts that he/she has not participated as a party or a witness or in any other capacity in any other litigation concerning the children named above and knows of no other proceeding concerning the minor children in this or any other state. No person other than the parties to this action has physical custody of the minor children or any claim to custody or visitation with the minor children.

b) The minor children have been involved in the following custody actions:
(The court wants to know about the following types of actions: custody, visitation, family violence, protective Orders, termination of parental rights, and adoption.)

County/State/Court	Type of Custody Action	Date Filed	Status
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

7.

Others with a Custody/Visitation Claim (Choose a or b)

a) I know of no other person, not a party to this proceeding, who has physical custody of the children or claims to have custody or visitation rights with respect to the minor children.

b) The following persons who are not a party to this proceeding have custody or visitation rights with the minor children:

Name	Claim
_____	_____
_____	_____
_____	_____

Affiant/Plaintiff

Sworn to and subscribed before me this
_____ day of _____, 20_____.

Notary Public

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

ELECTION OF _____.

This Affidavit is given by _____ who, after being duly sworn before an officer authorized in the State of Georgia to administer oaths, states the following:

1.

My name is _____, and I am the son or daughter of _____ and _____. I was born on _____ and am currently _____ years old.

2.

I sign this Affidavit to inform the court that I wish to live and elect to live with my [mother/father/other] _____ on a permanent and full-time basis. I understand that my [mother/father/other] _____ may ask the Court to be made my custodial parent and desire that he be designated as my custodial parent.

3.

I wish my _____ [non-custodial parent] to have reasonable visitation rights.

4.

I hereby affirm that I have given this Affidavit under oath and that the statements contained herein are true and accurate.

5.

I have made this election voluntarily and not because of any pressure or duress or because of any problems made known to me by either of my parents or any other person.

Affiant

Sworn to and subscribed before me
this _____ day of _____, 20_____.

Notary Public

My Commission Expires: _____

**IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA**

_____,)
)
Plaintiff,)
)
v.) Civil Action No. _____
)
_____,)
)
Defendant.)

ACKNOWLEDGMENT OF SERVICE AND WAIVER OF SUMMONS

The undersigned Defendant hereby acknowledges service of the above Complaint for Child Custody by a Third Party, and states that he/she has received a copy of said Complaint, and Defendant hereby waives any and all future notice, service, and issuance of process.

This the _____ day of _____, 20____.

Defendant *pro se*
[Sign in the presence of a Notary Public]

Sworn to and described before me
this _____ day of _____, 20____.

Notary Public, State of Georgia
My Commission Expires: _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

**DEFENDANT’S ACKNOWLEDGMENT OF SERVICE
AFFIDAVIT OF WAIVER OF VENUE AND PERSONAL JURISDICTION**

I, _____, the named Defendant in the above-styled case, after being duly sworn do hereby depose and say that I am a resident of _____ County, _____ (State), and that the Plaintiff in the above-styled case is a resident of _____ County, Georgia. I affirm that I have received a copy of said Petition/Complaint, and I hereby waive any and all further notice, service, and issuance of process.

After being duly informed that I have a constitutional right to a trial by judge or jury on the above matter in the county of my residence, and with that knowledge, I hereby expressly waive my right to venue in the county of my residence, and consent to venue and personal jurisdiction in the county of this superior court.

This _____ day of _____, 20_____.

Affiant

Notary Public

Sworn to and subscribed before me
this _____ day of _____, 20_____.

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

CUSTODY AGREEMENT

This is an agreement by and between _____, (hereinafter referred to as “Father”) and _____, (hereinafter referred to as “Mother”).

WHEREAS, the parties desire to settle between themselves all questions regarding child custody, visitation, child support, and all other rights and obligations arising out of their former marital relationship:

NOW, THEREFORE, in consideration of the mutual covenants hereinafter contained, the parties agree as follows:

1.

Non-interference with Parental Relationships

The parties agree that the welfare of the child(ren) is of paramount importance and each agrees to foster and encourage a feeling of affection between themselves and the child(ren). Neither party shall do anything to hamper the natural development of the children’s love and respect for the other party.

2.

Legal and Physical Custody (Check a, b, or c)

a) The Father/Mother shall have the temporary and permanent legal and physical custody of the minor child (ren) born as issue of the marriage.

b) The Father and Mother shall share joint legal custody of the minor child(ren). The parties shall share decision-making concerning the children; however, the Father/Mother shall have the right to make the final decision in the event the parties cannot agree.

Primary physical custody of the minor child (ren) shall be with the Father/Mother as follows: _____

Secondary physical custody shall be with the Father/Mother as follows:

The Father and Mother shall share joint legal custody and joint physical custody of the minor child (ren).

Physical custody shall be shared by the parties as follows: _____

The parties shall share decision making concerning the child (ren); however, in the event the parties cannot decide, the Father/Mother shall have the final decision concerning

3.

Visitation Schedule (Choose a or b)

a) The Father/Mother shall have the right of visitation with the minor children as follows: _____

b) The visitation schedule is attached hereto and incorporated herein.

4.

Cooperation and Consultation

This Agreement cannot provide for every possible detail with respect to the custody of the Child(ren). In that regard, the parties agree to cooperate and consult with each other so as to carry out visitation in a manner conducive to the best interests of the Child(ren). Neither party shall attempt to influence any of the Child(ren) not to love and respect the other parent. Each party agrees to keep the other informed as to the health and whereabouts of the Child(ren) while having custody of or visitation with the child(ren).

5.

Change of Residence

In the event of any change of residence on the part of either party herein so long as the custody and visitation provisions of this Agreement are in effect, said party changing his or her residence shall notify the other party at least one month in advance of the intent to change residence and of the location of the new residence and shall furnish to him or her the complete new address and, as soon as determined, the new telephone number at the new residence. Said notification shall be in writing with a copy of said writing retained by the other

CHILD SUPPORT

Please go to <http://www.georgiacourts.org/csc/> and complete the **Child Support Worksheet.**

6.

Child Support Amount

The Father/Mother shall pay to the Father/Mother, as support of the minor child(ren), the sum of \$ _____ * per week/bi-weekly/month, starting on _____, and continuing per week/bi-weekly/month thereafter until each respective child reaches the age of eighteen (18), or so long as the child is enrolled in and attending secondary school (not to exceed age twenty (20)), marries, dies, or becomes otherwise emancipated. The child support obligation shall be reduced as follows as each child becomes emancipated:

* This amount was derived from Line 13 of the Child Support Worksheet, which is attached hereto as Exhibit 1.

7.

Child Support Method of Payment (Check a or b)

a) All payments of child support shall be paid directly to the Father/Mother at the following address: _____.

No Income Deduction Order will be entered into at this time. However, when ever, in violation of the terms of this Agreement, there shall have been a failure to make the support payments due hereunder so that the amount unpaid is equal to or greater than the amount payable for one (1) month, the payments required to be made may be collected by the process of continuing garnishment for support. In the event Father/Mother fails to pay any child support obligation in this Agreement on a timely fashion on any three (3) occasions in any twelve (12) month period, the parties agree that an income deduction Order shall then be entered.

b) All payments of child support shall be paid to Georgia Child Support Enforcement pursuant to an Income Deduction Order.

8.

Health Insurance

The Father/Mother shall maintain a policy of medical, dental, and hospitalization insurance for the benefit of the minor child(ren) for so long as the child support obligation set forth herein exists. Costs not covered under the insurance policy shall be divided between Father and Mother as follows: _____

The Father/Mother shall provide the Father/Mother with an insurance identification card or such other acceptable proof of insurance coverage and shall cooperate with the Father/Mother in submitting claims under the policy.

BINDING AGREEMENT

9.

Voluntary Agreement

The parties acknowledge that they have entered into this Agreement freely and voluntarily and that it is not the result of any duress or any undue influence.

10.

Entire Agreement

This Agreement constitutes the entire understanding of the parties. There are no representations, warranties, covenants, or undertaking other than those expressly set forth herein.

Plaintiff *pro se*

Sworn to and subscribed before me
this _____ day of _____, 20_____.

Notary Public, State of Georgia

My Commission Expires: _____

Defendant *pro se*

Sworn to and subscribed before me
this _____ day of _____, 20_____.

Notary Public, State of Georgia

My Commission Expires: _____

Exhibit “ _____ ”

VISITATION SCHEDULE

The non-custodial parent is _____.

The custodial parent is _____.

The non-custodial parent shall be entitled to exercise reasonable visitation with the minor child with the following minimum provisions:

- A. On every 1st, 3rd, and 5th Friday at 6:00 p.m. until the following Sunday at 6:00 p.m.;
- B. During even numbered years (2020, 2022, etc.), the non-custodial parent shall have the right of visitation on the holidays delineated below:
 - 1. Martin Luther King’s Birthday
 - 2. Memorial Day
 - 3. Labor Day
 - 4. Thanksgiving
 - 5. Second week of Christmas Vacation from 2:00 p.m. on December 25 until New Year’s Eve.
- C. During odd numbered years (2019, 2021, etc.) the non-custodial parent shall have the right of visitation on the holidays delineated below:
 - 1. New Year’s Day
 - 2. Easter or Spring Break
 - 3. July 4th
 - 4. Halloween
 - 5. First Week of Christmas vacation, including Christmas Day until 2:00 p.m. on December 25.
- D. During even numbered years (2020, 2022, etc.), the custodial parent shall have the minor child on the holidays delineated below:
 - 1. New Year’s Day
 - 2. Easter or Spring Break
 - 3. July 4th
 - 4. Halloween
 - 5. First week of Christmas vacation, including Christmas Day until 2:00 p.m. on December 25.
- E. During odd numbered years (2019, 2021, etc.), the custodial parent shall have the

right of visitation on the holidays delineated below:

1. Martin Luther King's Birthday
 2. Memorial Day
 3. Labor Day
 4. Thanksgiving
 5. Second week of Christmas vacation from 2:00 p.m. on December 25 until New Year's Eve.
- F. The Mother shall have the minor child on Mother's Day.
- G. The Father shall have the minor child on Father's Day.
- H. The non-custodial parent shall have the right to visit with the minor child for two consecutive weeks in the summer between June 15 and August 15. During this period, the custodial parent shall have the minor child on the first (1st) weekend from 6:00 p.m. Friday until 6:00 p.m. Sunday. The non-custodial parent shall give the custodial parent a minimum of thirty (30) days written notice of the intent to exercise this visitation.
- I. Holiday visitation shall take precedence over week-end visitation.

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____, §
Plaintiff, §
v. § Civil Action
§ File No. _____
_____, §
Defendant. §

DOMESTIC RELATIONS FINANCIAL AFFIDAVIT OF MOTHER

1. AFFIANT'S NAME: _____ Age _____
Spouse's Name: _____ Age _____

Date of Marriage: _____ Date of Separation _____

Names and birth dates of children for whom support is to be determined in this action:

Name	Date of Birth	Resides with
_____	_____	_____
_____	_____	_____
_____	_____	_____

Names and birth dates of affiant's other children:

Name	Date of Birth	Resides with
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. SUMMARY OF AFFIANT'S INCOME AND NEEDS

(a) Gross monthly income (from item 3A) \$ _____
(b) Net monthly income (from item 3C) \$ _____
(c) Average monthly expenses (item 5A) \$ _____

Monthly payments to creditors + _____
Total monthly expenses and payments to credits (item 5C) \$ _____
(subsections (d) & (e) deleted)

3. A AFFIANT'S GROSS MONTHLY INCOME
(complete this section or attach Child Support Schedule A)
(All income must be entered based on monthly average regardless of date of receipt.)

Salary or Wage \$ _____
ATTACH COPIES OF 2 MOST RECENT WAGE STATEMENTS

Commissions, Fees, Tips \$ _____

Income from self-employment, partnership, close corporations,
and independent contracts (gross receipts minus ordinary and
necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Rental Income (gross receipts minus ordinary and
necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Bonuses \$ _____

Overtime Payments \$ _____

Severance Pay \$ _____

Recurring Income from Pensions or Retirement Plans \$ _____

Interest and Dividends \$ _____

Trust Income \$ _____

Income from Annuities \$ _____

Capital Gains \$ _____

Social Security Disability or Retirement Benefits \$ _____

Workers' Compensation Benefits \$ _____

Unemployment Benefits \$ _____

Judgments from Personal Injury or Other Civil Cases \$ _____

Gifts (cash or other gifts that can be converted to cash) \$ _____
 Prizes/Lottery Winnings \$ _____
 Alimony and maintenance from persons not in this case \$ _____
 Assets which are used for support of family \$ _____
 Fringe Benefits (if significantly reduce living expenses) \$ _____
 Any other income (do NOT include means-tested
 Public assistance, such as TANF or food stamps) \$ _____
GROSS MONTHLY INCOME \$ _____
 (prior section B deleted)

3. B Affiant's Net Monthly Income from employment
 (deducting only state and federal taxes and FICA) \$ _____
 Affiant's pay period (i.e., weekly, monthly, etc.) _____
 Number of exemptions claimed _____

4. ASSETS

(If you claim or agree that all or part of an asset is non-marital, indicate the non-marital portion under the appropriate spouse's column and state the amount and the basis: premarital, gift, inheritance, source of funds, etc.)

Description	Value	Separate Asset of the Husband	Separate Asset of the Wife	Basis of the Claim
Cash	\$ _____	_____	_____	_____
Stocks, bonds	\$ _____	_____	_____	_____
CD's/Money Market Accounts	\$ _____	_____	_____	_____
Bank Accounts (list each account):				
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____

Retirement Pensions,
401K, IRA, or Profit Sharing \$ _____

Money owed you: \$ _____

Tax Refund
owed you: \$ _____

Real Estate:

home: \$ _____

debt owed: \$ _____

other: \$ _____

debt owed: \$ _____

Automobiles/Vehicles:

Vehicle 1: \$ _____

debt owed: \$ _____

Vehicle 2: \$ _____

debt owed: \$ _____

Life Insurance
(net cash value): \$ _____

Furniture/furnishings: \$ _____

Jewelry: \$ _____

Collectibles: \$ _____

Other Assets: \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Assets: \$ _____

5. A AVERAGE MONTHLY EXPENSES

HOUSEHOLD

Mortgage or rent payments \$ _____

Cable TV \$ _____

Property taxes \$ _____

Misc. household and
grocery items \$ _____

Homeowner/Renter Insurance \$ _____
 Electricity \$ _____
 Water \$ _____
 Garbage and Sewer \$ _____
 Telephone: \$ _____
 residential line: \$ _____
 cellular telephone: \$ _____
 Gas \$ _____
 Repairs and maintenance: \$ _____
 Lawn Care \$ _____
 Pest Control \$ _____

Meals outside the home \$ _____
 Other \$ _____

AUTOMOBILE

Gasoline and Oil \$ _____
 Repairs \$ _____
 Auto Tags and license \$ _____
 Insurance \$ _____

OTHER VEHICLES

(boats, trailers, RVs, etc.)

Gasoline and oil \$ _____
 Repairs \$ _____
 Tags and license \$ _____
 Insurance \$ _____

CHILDREN'S EXPENSES

Childcare (total monthly cost) \$ _____
 School tuition \$ _____
 Tutoring \$ _____
 Private lessons (e.g., music, dance) \$ _____
 School supplies/expenses \$ _____
 Lunch Money \$ _____
 Other Educational Expenses (list)
 _____ \$ _____
 _____ \$ _____
 Allowance \$ _____
 Clothing \$ _____
 Diapers \$ _____

AFFIANT'S OTHER EXPENSES

Dry cleaning/laundry \$ _____
 Clothing \$ _____
 Medical, dental, prescription \$ _____
 (out of pocket/uncovered expenses) \$ _____
 Affiant's gifts \$ _____
 (special holidays)
 Entertainment \$ _____
 Recreational Expen. \$ _____
 (e.g., fitness)
 Vacations \$ _____
 Travel Exp/Visitation \$ _____
 Publications \$ _____
 Dues, clubs \$ _____
 Religious and charities \$ _____
 Pet expenses \$ _____

Medical, dental, prescription
(out of pocket/uncovered expenses) \$ _____

Alimony paid to
former spouse \$ _____

Grooming, hygiene \$ _____

Child support paid for other
children \$ _____

Gifts from children to others \$ _____

Date of initial Order: _____

Entertainment \$ _____

Other (attach sheet) \$ _____

Activities (including extra-curricular,
school, religious, cultural, etc.) \$ _____

Summer Camps \$ _____

OTHER INSURANCE

Health \$ _____

Child(ren)'s portion: \$ _____

Dental \$ _____

Child(ren)'s portion: \$ _____

Vision \$ _____

Child(ren)'s portion: \$ _____

Life \$ _____

Relationship of Beneficiary: _____

Disability \$ _____

Other(specify): \$ _____

TOTAL ABOVE EXPENSES \$ _____

B. PAYMENTS TO CREDITORS
(please check one)

To Whom:	Balance Due	Monthly Payment	Joint	(please check one)	
				Plaintiff	Defendant
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

TOTAL MONTHLY PAYMENTS TO CREDITORS: \$ _____

C. TOTAL MONTHLY EXPENSE: \$ _____

This _____ day of _____, 20_____.

Affiant

Notary Public

My Commission expires: _____

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____	§	
Plaintiff,		
v.	§	Civil Action
	§	File No. _____
_____	§	
Defendant.		

DOMESTIC RELATIONS FINANCIAL AFFIDAVIT OF FATHER

1. AFFIANT’S NAME: _____ Age _____
 Spouse’s Name: _____ Age _____
 Date of Marriage: _____ Date of Separation _____

Names and birth dates of children for whom support is to be determined in this action:

Name	Date of Birth	Resides with

Names and birth dates of affiant’s other children:

Name	Date of Birth	Resides with

2. SUMMARY OF AFFIANT’S INCOME AND NEEDS

- (a) Gross monthly income (from item 3A) \$ _____
- (b) Net monthly income (from item 3C) \$ _____
- (c) Average monthly expenses (item 5A) \$ _____

Monthly payments to creditors + _____
Total monthly expenses and payments to credits (item 5C) \$ _____
(subsections (d) & (e) deleted)

3. A AFFIANT'S GROSS MONTHLY INCOME
(complete this section or attach Child Support Schedule A)
(All income must be entered based on monthly average regardless of date of receipt.)

Salary or Wage \$ _____
ATTACH COPIES OF 2 MOST RECENT WAGE STATEMENTS

Commissions, Fees, Tips \$ _____

Income from self-employment, partnership, close corporations,
and independent contracts (gross receipts minus ordinary and
necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Rental Income (gross receipts minus ordinary and
necessary expenses required to produce income)
ATTACH SHEET ITEMIZING YOUR CALCULATIONS \$ _____

Bonuses \$ _____

Overtime Payments \$ _____

Severance Pay \$ _____

Recurring Income from Pensions or Retirement Plans \$ _____

Interest and Dividends \$ _____

Trust Income \$ _____

Income from Annuities \$ _____

Capital Gains \$ _____

Social Security Disability or Retirement Benefits \$ _____

Workers' Compensation Benefits \$ _____

Unemployment Benefits \$ _____

Judgments from Personal Injury or Other Civil Cases \$ _____

Gifts (cash or other gifts that can be converted to cash) \$ _____
 Prizes/Lottery Winnings \$ _____
 Alimony and maintenance from persons not in this case \$ _____
 Assets which are used for support of family \$ _____
 Fringe Benefits (if significantly reduce living expenses) \$ _____
 Any other income (do NOT include means-tested
 Public assistance, such as TANF or food stamps) \$ _____
GROSS MONTHLY INCOME \$ _____
 (prior section B deleted)

3. B Affiant's Net Monthly Income from employment
 (deducting only state and federal taxes and FICA) \$ _____
 Affiant's pay period (i.e., weekly, monthly, etc.) _____
 Number of exemptions claimed _____

4. ASSETS

(If you claim or agree that all or part of an asset is non-marital, indicate the non-marital portion under the appropriate spouse's column and state the amount and the basis: premarital, gift, inheritance, source of funds, etc.)

Description	Value	Separate Asset of the Husband	Separate Asset of the Wife	Basis of the Claim
Cash	\$ _____	_____	_____	_____
Stocks, bonds	\$ _____	_____	_____	_____
CD's/Money Market Accounts	\$ _____	_____	_____	_____
Bank Accounts (list each account):				
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____
_____	\$ _____	_____	_____	_____

Retirement Pensions,
401K, IRA, or Profit Sharing \$ _____

Money owed you: \$ _____

Tax Refund
owed you: \$ _____

Real Estate:

home: \$ _____

debt owed: \$ _____

other: \$ _____

debt owed: \$ _____

Automobiles/Vehicles:

Vehicle 1: \$ _____

debt owed: \$ _____

Vehicle 2: \$ _____

debt owed: \$ _____

Life Insurance
(net cash value): \$ _____

Furniture/furnishings: \$ _____

Jewelry: \$ _____

Collectibles: \$ _____

Other Assets: \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Assets: \$ _____

5. A AVERAGE MONTHLY EXPENSES

HOUSEHOLD

Mortgage or rent payments \$ _____

Cable TV \$ _____

Property taxes \$ _____

Misc. household and
grocery items \$ _____

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 Electricity \$ _____
 Water \$ _____
 Garbage and Sewer \$ _____
 Telephone: \$ _____
 residential line: \$ _____
 cellular telephone: \$ _____
 Gas \$ _____
 Repairs and maintenance: \$ _____
 Lawn Care \$ _____
 Pest Control \$ _____

Meals outside the home \$ _____
 Other \$ _____

AUTOMOBILE

Gasoline and Oil \$ _____
 Repairs \$ _____
 Auto Tags and license \$ _____
 Insurance \$ _____

OTHER VEHICLES

(boats, trailers, RVs, etc.)

Gasoline and oil \$ _____
 Repairs \$ _____
 Tags and license \$ _____
 Insurance \$ _____

CHILDREN'S EXPENSES

Childcare (total monthly cost) \$ _____
 School tuition \$ _____
 Tutoring \$ _____
 Private lessons (e.g., music, dance) \$ _____
 School supplies/expenses \$ _____
 Lunch Money \$ _____
 Other Educational Expenses (list)
 _____ \$ _____
 _____ \$ _____
 Allowance \$ _____
 Clothing \$ _____
 Diapers \$ _____

AFFIANT'S OTHER EXPENSES

Dry cleaning/laundry \$ _____
 Clothing \$ _____
 Medical, dental, prescription \$ _____
 (out of pocket/uncovered expenses) \$ _____
 Affiant's gifts \$ _____
 (special holidays)
 Entertainment \$ _____
 Recreational Expen. \$ _____
 (e.g., fitness)
 Vacations \$ _____
 Travel Exp/Visitation \$ _____
 Publications \$ _____
 Dues, clubs \$ _____
 Religious and charities \$ _____
 Pet expenses \$ _____

Medical, dental, prescription
(out of pocket/uncovered expenses) \$ _____

Alimony paid to
former spouse \$ _____

Grooming, hygiene \$ _____

Child support paid for other
children \$ _____

Gifts from children to others \$ _____

Date of initial Order: _____

Entertainment \$ _____

Other (attach sheet) \$ _____

Activities (including extra-curricular,
school, religious, cultural, etc.) \$ _____

Summer Camps \$ _____

OTHER INSURANCE

Health \$ _____

Child(ren)'s portion: \$ _____

Dental \$ _____

Child(ren)'s portion: \$ _____

Vision \$ _____

Child(ren)'s portion: \$ _____

Life \$ _____

Relationship of Beneficiary: _____

Disability \$ _____

Other(specify): \$ _____

TOTAL ABOVE EXPENSES \$ _____

B. PAYMENTS TO CREDITORS
(please check one)

To Whom:	Balance Due	Monthly Payment	Joint	(please check one)	
				Plaintiff	Defendant
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

TOTAL MONTHLY PAYMENTS TO CREDITORS: \$ _____

C. TOTAL MONTHLY EXPENSE: \$ _____

This _____ day of _____, 20_____.

Affiant

Notary Public

My Commission expires: _____

IN THE SUPERIOR COURT OF _____ COUNTY

STATE OF GEORGIA

_____	§	
Plaintiff,		
	§	
v.		Civil Action
	§	File No. _____

Defendant.	§	

**FINAL JUDGMENT AND DECREE
MODIFICATION OF CUSTODY**

The Custody Agreement entered into between the parties and filed with the court on the _____ day of _____, 20_____, is hereby incorporated into and made a part of this Final Judgment and Decree of Change of Custody. The original Order for custody, Civil Action File No. _____, which was issued on the _____ day of _____, 20_____, is hereby modified as follows:

Based on the evidence presented, including the Child Support Worksheet, Schedules “A” through “E,” incorporated by reference, and specifically the Child Support Worksheet and Schedule “E” attached hereto, and where applicable, Special Interrogatories also attached hereto, the Court finds as follows:

- 1. Children for whom support is being determined:

Child	Date of Birth

2. (a) For purposes of Calculating Child Support, the Court Orders that the Custodial Parent shall be _____.

(b) For purposes of Calculating Child Support the Court Orders that the Non-custodial Parent shall be _____.

(c) The Court finds that the amount of the Non-custodial Parent's parenting time as set forth in the Order of Visitation is _____ days.

3. (a) The Court finds as set on Schedule "A," the gross income of the father is \$_____

(b) The Court finds as set on Schedule "A," the gross income of the Mother is \$_____

4. (a) The Court finds as set on the "Child Support Worksheet" and Schedule "B" the Non-custodial Parent's Adjusted Income is \$_____

(b) The Court finds as set on the "Child Support Worksheet" and Schedule "B," the Custodial Parent's Adjusted Income is \$_____

(c) The Court finds as set on the "Child Support Worksheet" and Schedule "B," the Parties' Total Adjusted Income \$_____

5. The Court finds as set by the "Child Support Obligation Schedule Table" and as listed on the "Child Support Worksheet" the Basic Child Support Obligation is \$_____

6. (a) The Court finds as set on the "Child Support Worksheet," the Basic Child Support Obligation for the Custodial Parent is \$_____ %_____

(b) The Court finds as set on the "Child Support Worksheet," the Basic Child Support Obligation for the Non-custodial Parent is \$_____ %_____

7. The Court finds that health insurance that provides for the health care needs of the child is/is not reasonably available at a reasonable cost. If provided, it will be provided by_____.

8. (a) The Court finds as set on the "Child Support Worksheet" and Schedule "D," the Presumptive Amount of Child Support for the Custodial Parent is \$_____

(b) The Court finds as set on the "Child Support Worksheet" and Schedule "D," the Presumptive Amount of Child Support due to the Custodial Parent is \$_____

(c) The Court finds as set on the “Child Support Worksheet” and Schedule “D,” the Presumptive Amount of Child Support due to the Custodial Parent is \$_____

9. The Court finds that the child receives benefits under Title II of the Federal Social Security Act on the obligor’s account and the amount the child receives on a monthly basis is \$_____

10. The Court has considered the existence of special circumstances and as set forth on the “Child Support Worksheet” and Schedule “E,” has found the following special circumstances marked with an [“X”] to be present in this case.

Note: Refer to Schedule “E” and, where applicable, “Special Interrogatories” attached hereto for an explanation for the reasons for the deviation, how the application of the Presumptive Amount of Child Support would have been unjust and how the best interest of the child for whom support is being determined will be served by a deviation from the Presumptive Amount of Child Support.

- _____ A. High Income
- _____ B. Low Income
- _____ C. Other Health-Related Insurance
- _____ D. Life Insurance
- _____ E. Child and Dependent Care Tax Credit
- _____ F. Travel Expenses
- _____ G. Alimony
- _____ H. Mortgage
- _____ I. Permanent Plan or Foster Care Plan
- _____ J. Extraordinary Expenses
- _____ K. Parenting Time
- _____ L. Non-Specific Deviations (Other)

11. (a) The Court finds as set on the “Child Support Worksheet” the Final Amount of Child Support for the Custodial Parent is \$_____

(b) The Court finds as set on the “Child Support Worksheet” the Final of Child Support for the Non-custodial Parent is \$_____

(c) The Court finds as set on the “Child Support Worksheet” the Final Amount of Child Support the Non-custodial Parent shall Pay the Custodial Parent is \$_____

12. (a) The Court finds as set on the “Child Support Worksheet” that the Custodial Parent’s allocated Uninsured Health Care Expenses based on their pro rata responsibility is \$_____
%_____

(b) The Court finds as set on the "Child Support Worksheet" that the Non-custodial Parent's allocated Uninsured Health Care Expenses based on their pro rata responsibility is \$ _____
% _____

The Non-custodial parent, _____, shall pay Child Support for each of the _____ minor child(ren) at \$ _____ per month, for a total of \$ _____ per month to the Custodial parent, starting _____, and continuing until each minor child reaches the age of majority, dies, marries, becomes emancipated, whichever first occurs, provided however, the Court, in the exercise of its sound discretion, directs (or does not direct) the Non-custodial Parent to continue to pay child support for a Child who has not previously married or become emancipated, who is enrolled in and attending a secondary school, and who has attained the age of majority before completing his or her secondary school education, until that child graduates from high school, or until the child attains _____ years of age (not to exceed 20 years), whichever first occurs.

Each party is hereby restrained and enjoined from molesting or harassing the other party.

SO ORDERED, this _____ day of _____, 20 _____.

_____, Judge
Ocmulgee Judicial Circuit Superior Court