

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
FAMILY COURT**

PRINT PETITIONER'S/PLAINTIFF'S NAME

PETITIONER/PLAINTIFF,

v.

PRINT RESPONDENT'S/DEFENDANT'S NAME

RESPONDENT/DEFENDANT.

Your SSN _____
[REQUIRED]

Your DOB _____
[REQUIRED]

Child Support Case No. _____
[IF KNOWN]

IV-D No. _____
[IF KNOWN]

MOTION TO MODIFY SUPPORT ORDER DUE TO INCARCERATION
[FOR USE DURING CRIMINAL SENTENCING PROCEEDINGS IN DC SUPERIOR COURT]

1. I, _____, ask that this Court to modify, by
PRINT YOUR NAME

reducing or suspending, the support order in this case. Since the order was entered, there has been a substantial and material change in my ability to pay because I am being incarcerated for more than 30 days.

2. I do do not [CHECK ONE] have income or assets to pay support during my incarceration.

BANK NAME	_____
TYPE OF ACCOUNT	<input type="checkbox"/> checking <input type="checkbox"/> savings <input type="checkbox"/> other _____
CURRENT BALANCE	_____
OTHER INCOME	_____
OTHER ASSETS	_____

[CRIMINAL DIVISION PLEASE ATTACH A COPY OF THE JUDGMENT AND COMMITMENT ORDER]

WHITE-LEGAL

GREEN-RESPONDENT

YELLOW-SERVICE COPY

MOTION TO MODIFY SUPPORT ORDER DUE TO INCARCERATION

Request for Relief

I RESPECTFULLY REQUEST that the Court [CHECK ALL THAT APPLY]

- SUSPEND the support order until I am released from incarceration.
- DECREASE the support order to \$ _____ per month until I am released from incarceration.
- Other _____

I ALSO REQUEST that the Court award any other relief it considers fair and proper.

Respectfully Submitted,

YOUR SIGNATURE

STREET ADDRESS

CITY, STATE AND ZIP CODE

TELEPHONE NUMBER

**POINTS AND AUTHORITIES IN SUPPORT OF
MOTION TO MODIFY SUPPORT ORDER DUE TO INCARCERATION**

1. Super. Ct. Dom. Rel. R. 7(b) (2003).
2. D.C. Code § 23-112a (2005 Supp.)
3. D.C. Code §§ 16-916.01(o), 16-916.01(s), and 46-204(a) (2003 Supp.).
4. Lewis v. Lewis. 637 A.2d 70, 73 (D.C. 1994).

WHITE-LEGAL

GREEN-RESPONDENT

YELLOW-SERVICE COPY

MOTION TO MODIFY SUPPORT ORDER DUE TO INCARCERATION

Respondent _____

Docket Number:

CERTIFICATE OF SERVICE

I, _____, certify that I served a copy of
PRINT DEPUTY CLERK NAME HERE

Respondent's/Defendant's Motion to Suspend Child Support Order Due to Incarceration this

_____ day of _____, 20 _____, as follows:

IF THE CHILD SUPPORT SERVICES DIVISION, OFFICE OF THE ATTORNEY GENERAL FOR THE DISTRICT OF COLUMBIA, IS INVOLVED IN THE CASE (I.E., A IV-D CASE):

By personal delivery through the Paternity & Support Branch, Family Court, DC Superior Court. to the Child Support Services Division, Office of the Attorney General for the District of Columbia, 441 4th Street NW, 6th Floor North, Washington, DC 20001.

IF IT IS A PRIVATE CASE (I.E., A NON-IV-D CASE):

By certified and first-class mail to:

NAME

STREET ADDRESS

CITY

STATE

ZIP

The outcome of service was as follows [CHECK ALL THAT APPLY]:

The certified mail was accepted by _____
INSERT NAME OF SIGNATORY HERE &
ATTACH GREEN CARD

The certified mail was returned as unclaimed
 refused

The first-class mail was not returned.

WHITE-LEGAL

YELLOW-SERVICE COPY