

HOW TO OBTAIN IMMEDIATE EX PARTE RESTRAINING ORDERS (Married Parents)

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HOW TO OBTAIN IMMEDIATE EX PARTE RESTRAINING ORDERS

(Married Parents)

(Effective for a Maximum of Fourteen Days
Or Until Hearing Within Fourteen Day Time-Period)

SPOKANE COUNTY FAMILY COURT FACILITATOR

If you have an emergency situation you may need to seek an IMMEDIATE order restraining the other party. You must be able to assure the court that irreparable harm WILL occur if the immediate order is NOT granted without notice to the other party. Examples of such situations include restraints against an abuser in a domestic violence situation when there are threats to snatch the child(ren) of the parties, or financial harm may be likely.

These orders are effective as soon as the Court signs the order. But the order is only good for a **MAXIMUM OF FOURTEEN DAYS**. The order must be served on the other party and a hearing scheduled within the 14-day time-period.

Checklist of Steps to Complete:

_____ 1. Fill out the following papers completely and sign. Print clearly in black ink or type.

() *Motion for Immediate Restraining Order (Ex Parte) (FL Divorce 221)*

(Be sure to clearly state with details, dates, places, what the problem is and what the court must do to help. You must clearly show your fear or the harm you are trying to prevent and that notifying the other party could cause increased harm or fear.)

() *Immediate Restraining Order (Ex Parte) and Hearing Notice (FL Divorce 222)*

() Law Enforcement and Confidential Information (LECIF) (PO 003) PLUS the

following forms, as these will be needed after the 14-day period:

(You **must** schedule any hearings before the Commissioner assigned your case. To determine if your case has been assigned to a Court Commissioner and/or to determine which day your assigned Commissioner is scheduled to hear motions, please see the Court's web page: <http://www.spokanecounty.org/DocumentCenter/View/4266> and search for the commissioner's rotation schedule;

OR call the Superior Court Clerk's Office at 509-477-2211.

(You must choose the day that is appropriate for your matter. The date should be at

least 14 days from the date you file the documents in court and serve them on the other party, not including the date of service on the other party.)

- () *Motion for Temporary Family Law Order and Restraining Order (FL Divorce 223)*
- () *Information for Temporary Parenting Plan (FL All Family 139)* (if children and placement/contacts are at issue)
- () Your *Declaration (FL All Family 135)* and those of others who can support your position, if needed. Be specific in providing details, avoid stating what someone else has told you, and be certain everything has been personally observed. You should type or print very clearly in black ink.
- () Your *Financial Declaration (FL All Family 131)* if there are finances at issue, such as payment of bills, appointment of a Guardian ad Litem, payment of attorney fees.
- () *Proposed Parenting Plan (FL All Family 140)*, *Child Support Worksheets (SCSS Worksheets)* and *Proposed Child Support Order (FL All Family 130)*, if these are issues needing to be addressed and have not already been filed.

_____2. Make two copies (original plus two copies) of documents before going to court and staple each separate document. Copies may be made on the public copy machine on the first floor of the courthouse near the security station.

_____3. Take the original of each document to Courtroom 202, (the Ex Parte Courtroom) Monday, Wednesday or Friday between 9:00 a.m. - 12:00 p.m. and 1:30 p.m. - 4:00 p.m., and Tuesday from 1:30pm to 4pm, to have the Court sign the *Immediate Restraining Order (Ex Parte) and Hearing Notice (FL Divorce 222)*. After the Court has signed the Order, take your copies to Room 300, between the hours of 8:30 a.m. – 12:00 noon and 1:00 p.m. – 4:00 p.m., Monday through Friday and stamp the name of the Judge/Commissioner who signed the Order and put the date stamp on the top, front page of each of your copies.

_____4. If the restraining order provides for your personal safety or that of the child(ren), you should request a **CERTIFIED** copy of the Order to carry with you in the event police may need to enforce this order. The fee is \$5.00 for the first page and \$1.00 for each additional page.

_____5. A copy of all documents filed with the court must be personally served on the opposing party by a third person. **YOU** cannot serve the opposing party. The person who serves the opposing party, must complete and sign the *Proof of Personal Service (FL All Family 101)* form. Make a copy for yourself.

_____6. After the opposing party has been served, file the *Proof of Personal Service* form with the Superior Court Clerk. Put the date stamp on your copy.

_____ 7. The party seeking temporary orders must call in the case as “ready,” **three court days prior to the hearing**, by using the Family Law Coordinator’s Office main line of 509-477-5702 extension 0, or by emailing familylaw@spokanecounty.org, and provide a copy of the signed mandatory local form Family Law/Paternity Motion Status Report

<https://www.spokanecounty.org/DocumentCenter/View/3675/Family-Law-Paternity-Motion-Status-Report-PDF>

Please see the court’s local rules:

<https://www.spokanecounty.org/DocumentCenter/View/34440/2020-Local-Court-Rules-Effective-912020?bidId>

_____ 8. Attend your scheduled hearing in person or via Zoom for temporary orders.

Be prepared to tell the Court why the proposed temporary orders are necessary.

If you are participating in the hearing via Zoom, instructions can be found on the Superior Court’s website at:

<https://www.spokanecounty.org/DocumentCenter/View/33364/Participant-Instructions-for-Zoom---Family-Law>

_____ 9. If you and the other party reach agreement on a *Temporary Family Law Order (FL Divorce 224)* or *Continuance*: 1) Complete the *Temporary Family Law Order* or *Continuance* and both parties sign it; 2) Copies can be made for a fee in the Clerk’s Office on the third floor of the courthouse; 3) The original *Temporary Family Law Order* (by agreement) or *Continuance* should be handed to the courtroom clerk in courtroom 202 and when it has been signed by the Court, you should return to Room 300, between the hours of 8:30 a.m. – 12:00 noon and 1:00 p.m. – 4:00 p.m., to stamp your copies with the name of the Commissioner/Judge who signed the order and place the filing stamp in the upper right hand corner of the documents; 4) Provide a copy to the other party.

_____ 10. At your hearing:

You should take notes when the decision is stated so you do not forget any of the provisions ordered when you write out the order; You will need to complete the *Temporary Family Law Order (FL Divorce 224)* form to show what the Court ordered or decided, and follow the judicial officer’s instructions on submitting the order.

NOTE: All of the above-mentioned forms can be found on the Washington State Court website: www.courts.wa.gov/forms.

Superior Court of Washington, County of _____

In re the marriage/domestic partnership of:

Petitioner (*person who started this case*):

And Respondent (*other spouse / partner*):

No. _____

**Immediate Restraining Order (Ex Parte)
and Hearing Notice**

(TPROTSC / ORTSC)

Clerk's action required: 2, 10, 11,15

**Immediate Restraining Order (Ex Parte)
and Hearing Notice**

Use this form in marriage/domestic partner cases only. For other cases, use FL Parentage 322 or FL Modify 622, depending on the type of case.

- 1. This Order starts immediately and ends after the hearing listed below.**
- 2. Hearing Notice** – The court will consider extending this order and the other requests made by the protected person at a court hearing:



on: _____ at: _____ a.m. p.m.
date time

at: _____, _____
court's address room or department

docket/calendar or judge/commissioner's name

Warning! If you do not go to the hearing, the court may make orders against you without hearing your side.

- 3. This Order Restrains (name):** _____

Warning! You must obey this order or you may be jailed.

- Violation [of sections **6-8**]: You can be arrested even if the protected person or persons invite or allow you to violate the order. You alone are responsible for following the order. Only the court may change the order. Requests for changes must be made in writing. Violation of this order with actual notice of its terms is a **criminal offense** under chapter 7.105 RCW and will subject a violator to arrest.

- Violation of **any** part of this order may result in financial penalties or contempt of court.
- This order is enforceable in all 50 U.S. states, the District of Columbia, and U.S. territories and tribal lands (*18 U.S.C. § 2265*).

4. This Order Protects (name/s): _____ and these children under 18 (if any):

Child's name	Age	Child's name	Age
1.		2.	
3.		4.	
5.		6.	

5. Findings

The court has reviewed the *Motion for Immediate Restraining Order*, supporting documents, and any other evidence considered on the record, including _____.

The court finds that there would be irreparable harm as described in the *Motion* if this order is not granted.

- If hearing date is more than 14 days away* – There is good cause to keep this order in effect until the hearing date (which is between 14 and 28 days after this order is issued) because (*describe the good cause*):

- Other findings: _____
- _____

➤ **Court Orders to the Restrained Person listed in 3:**

6. Do Not Disturb

- No request made.
- Request denied.
- Do not disturb the peace of the Protected Person or of any child listed in 4.

7. Stay Away

- No request made.
- Request denied.
- Do not go onto the grounds of or enter the Protected Person's home, workplace, vehicle, or school, or the daycare or school of any child listed in 4.
 - Do not knowingly go or stay within _____ feet of the Protected Person's home, workplace, vehicle, or school, or the daycare or school of any child listed in 4.

8. Do Not Hurt or Threaten

- No request made.

- Request denied.
- Do not:
 - Assault, harass, stalk, or molest the Protected Person or any child listed in **4**; or
 - Use, try to use, or threaten to use physical force against the Protected Person or children that would reasonably be expected to cause bodily injury.

9. Surrender Weapons

- Does not apply. No order entered in section **8** and no request made.
- Request denied and surrender of weapons not required.
- The Restrained Person must follow the **Order to Surrender and Prohibit Weapons** (form WS 001) signed by the court and filed separately.

Findings – The court finds irreparable injury could result if this order is not issued until the time for response has elapsed.

10. Service On the Restrained Person

- Required.** The Restrained Person must be served with a copy of this order.

Important! The Protected Person has a right to have law enforcement serve this order free of charge if the “Do not disturb,” “Stay away,” “Do not hurt or threaten,” or “Prohibit weapons and order surrender” boxes are checked above.

- The **law enforcement agency** where the Restrained Person lives or can be served shall serve the Restrained Person with a copy of this order and shall promptly complete and return proof of service to this court.

Law enforcement agency: (*county or city*) _____
 (*check only one*): Sheriff’s Office or Police Department

- The **Protected Person** shall make private arrangements for service.
 (*This is only an option if surrender of weapons is **not** ordered*)

After serving, the server fills out a *Proof of Personal Service* (form FL All Family 101) and gives it to you. File the original *Proof of Personal Service* with the court clerk, and give a copy to the law enforcement agency listed in section **11** below.

Clerk’s Action. The court clerk shall forward a copy of this order on or before the next judicial day to the agency and/or person checked above. The court clerk shall also provide a copy to the Protected Person.

- Not required.** The Restrained Person does not have to be served because the Restrained Person or their lawyer signed this order, or was at the hearing when this order was made and the court finds sufficient notice.

11. Washington Crime Information Center (WACIC) and Other Data Entry

Clerk’s Action. The court clerk shall forward a copy of this order on or before the next judicial day to the following law enforcement agency (*county or city*) _____
 (**check only one**): Sheriff’s Office or Police Department.
 (*List the same agency that entered the temporary order, if any*)

This agency shall enter this order into WACIC and National Crime Info. Center (NCIC).

12. Care and Safety of Children until the Hearing

- No request made.
- Request denied.
- The *(check one or both)*: Petitioner Respondent must not take the children listed in **4** out of Washington state.
- Until the hearing, the children listed in **4** will live with the *(check one)*:
 Petitioner Respondent.
- Other: _____

13. Protect Property

- No request made.
- Request denied.
- The *(check one or both)*: Petitioner Respondent must not move, take, hide, damage, borrow against, sell or try to sell, or get rid of any property, unless it is a usual business practice or to pay for basic needs. Both spouses/domestic partners must notify the other about any expenses that are out of the ordinary.

14. Do Not Change Insurance

- No request made.
- Request denied.
- The *(check one or both)*: Petitioner Respondent must not make changes to any medical, health, life, property, or auto insurance policy that covers either spouse/domestic partner or any child named in **4**. That means they must not transfer, cancel, borrow against, let expire, or change the beneficiary of any policy.

15. Bond

- No bond or security is required.
- The Petitioner Respondent must file a bond or post security. *Amount:* \$_____

16. Other Immediate Orders

- Does not apply.
- _____

Ordered.

_____  _____
Date *Time* **Judge/Commissioner**

Presented by: Petitioner Respondent



Sign here

Print name (if lawyer, also list WSBA #)

Date

Protected person must complete a *Law Enforcement and Confidential Information* form, PO 003, and give it to the court clerk.

Law Enforcement and Confidential Information (LECIF)

Clerk: Do not file in a public access file. In criminal cases, do not file. Give to law enforcement.

_____ Court of Washington

County: _____

Case No.: _____

Law Enforcement: Do not serve or show a completed LECIF to the other party.

Instructions – Protected Person must complete this form. Fill out **all** sections as much as you can. If you do not know, write “unknown.” Complete Attachment A if the Restrained Person is under age 18. Type or print clearly! If law enforcement cannot read this form or identify the person, they cannot serve or enforce your order!

1. Restrained Person’s Info

Name: First Middle Last			Date of Birth (if unknown give age range)	
Nickname/Alias/AKA (“Also known as”)			Relationship to Protected Person	
Sex	Race		Height	Weight
Eye Color	Hair Color		Skin Tone	Build
Phone/s with Area Code (voice):			Need Interpreter? <input type="checkbox"/> No <input type="checkbox"/> Yes Language:	

2. Where can the Restrained Person be served? List all known contact information.

Last Known Address. Street:				
City:		State:		Zip:
Cell number (text):			Email:	
Social Media Account/s & User Name/s:				
Other:				
Employer	Employer’s Address			Employer’s Phone
Work Hours	Driver’s License or ID number			State
Vehicle Make and Model	Vehicle License Number	Vehicle Color		Vehicle Year

3. Disability, hazard, and weapon info about the Restrained Person

Law enforcement needs this info to serve the order safely

Does the Restrained Person have a disability, brain injury, or impairment requiring special assistance when law enforcement serves the order? No Yes. If yes, describe (add pages, if needed): _____

Hazard Information Restrained Person's History includes:

Involuntary/Voluntary Commitment Suicide Attempt or Threats (How recent?) _____
 Threats to "suicide by cop" Assault Assault with Weapons Alcohol/Drug Abuse
 Other: _____

Concealed Pistol License: Yes No

Weapons: Handguns Rifles Knives Explosives Unknown

Other (include unassembled firearms and specify): _____

Location of Weapons: Vehicle On Person Residence Describe in detail: _____

Current Status

Is the restrained person a current or former cohabitant as an intimate partner? Yes No

Are you and the restrained person living together now? Yes No

Does the restrained person know they may be moved out of the home? Yes No N/A

Does the restrained person know you are trying to get this order? Yes No

Is the restrained person likely to react violently when served? Yes No

4. Protected Person's Info

(If only minors are protected, list them in 5. Provide contact information in this section for the person filing.)

Name: First Middle Last			Date of Birth	
Sex	Race		Height	Weight
Driver's license or ID number	Eye Color	Hair Color	Skin Tone	Build

If your information **is not confidential**, you must enter your address and phone number/s below.

Current Address. Street:	Phone(s) w/Area Code
City: State: Zip:	
Email address:	Need interpreter? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, language:

If your info **is confidential**, you must give a name, address, and phone of someone willing to be your "contact."
If you filed **for someone else**, list your information as the contact.

Contact Name:	
Contact Address	Contact Phone
Contact Email Address	Date of Birth (if you are Petitioner)

How can law enforcement contact you and other protected household members **if firearms are returned** to the restrained person? (Email/s preferred. Update law enforcement with any changes.)

email above phone number above address above other: _____

Attachment A: Restrained Person is a Minor

Only complete this attachment if the Restrained Person is under age 18. **If not**, skip or remove this attachment.

1. Restrained Person's PARENT or GUARDIAN's Info			
Name: First Middle Last			Date of Birth (if unknown give age range)
Nickname/Alias/AKA ("Also known as")			Relationship to Restrained Person <input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian
Sex	Race	Height	Weight
Eye Color	Hair Color	Skin Tone	Build
Phone/s with Area Code (voice):		Need Interpreter? <input type="checkbox"/> No <input type="checkbox"/> Yes Language:	
2. Where can the Restrained Person's PARENT or GUARDIAN be served?			
List all known contact information.			
Last Known Address. Street:			
City:		State:	Zip:
Cell number (text):		Email:	
Social Media Account/s & User Name/s:			
Other:			
Employer	Employer's Address		Employer's Phone
Work Hours	Driver's License or ID number		State
Vehicle Make and Model	Vehicle License Number	Vehicle Color	Vehicle Year
3. Disability, hazard, and weapon info about Restrained Person's PARENT or GUARDIAN			
Law enforcement needs this info to serve the order safely			
Does the PARENT or GUARDIAN have a disability, brain injury, or impairment requiring special assistance when law enforcement serves the order? <input type="checkbox"/> No <input type="checkbox"/> Yes. If yes, describe (add pages, if needed): _____			
Hazard Information PARENT or GUARDIAN's history includes: <input type="checkbox"/> Involuntary/Voluntary Commitment <input type="checkbox"/> Suicide Attempt or Threats (How recent?) _____ <input type="checkbox"/> Threats to "suicide by cop" <input type="checkbox"/> Assault <input type="checkbox"/> Assault with Weapons <input type="checkbox"/> Alcohol/Drug Abuse <input type="checkbox"/> Other: _____			
Concealed Pistol License: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Weapons: <input type="checkbox"/> Handguns <input type="checkbox"/> Rifles <input type="checkbox"/> Knives <input type="checkbox"/> Explosives <input type="checkbox"/> Unknown <input type="checkbox"/> Other (include unassembled firearms and specify): _____			

Superior Court of Washington, County of _____

In re the marriage/domestic partnership of:

Petitioner (*person who started this case*):

And Respondent (*other spouse/partner*):

No. _____

Motion for Immediate Restraining Order
(Ex Parte)
(MTIRO)

Motion for Immediate Restraining Order (Ex Parte)

Use this form in marriage/domestic partnership cases only. For other cases, use FL Parentage 321 or FL Modify 621, depending on the type of case.

To both parties:

Deadline! Your papers must be filed and served by the deadline in your county's Local Court Rules, or by the State Court Rules if there is no local rule. Court Rules and forms are online at www.courts.wa.gov.

If you want the court to consider your side, you **must**:

- File your original documents with the Superior Court Clerk; AND
- Give the Judge/Commissioner a copy of your papers (if required by your county's Local Court Rules); AND
- Have a copy of your papers served on all other parties or their lawyers; AND
- Go to the hearing.

The court may not allow you to testify at the motion hearing. Read your county's Local Court Rules, if any.

Bring proposed orders to the hearing.

To the person filing this motion:

You must ask the court to sign the *Immediate Restraining Order (Ex Parte) and Hearing Notice* (FL Divorce 222). This Order may be signed "ex parte" (without the other party there). Contact the Superior Court Clerk's office for the procedure in your county. You must have this *Motion* and the *Immediate Restraining Order* personally served (by someone else) on the other party.

To the person receiving this motion:

If you do not agree with the requests in this motion, file a statement (using form FL All Family 135, *Declaration*) explaining why the court should not approve those requests. You may file other written proof supporting your side, and propose your own *Parenting Plan* or *Child Support Worksheets*.

If the court grants an *Immediate Restraining Order* without notice to you, you can file a motion to change or terminate it before the hearing date. (Civil Rule 65(b).) There is no pattern form for that motion.

1. I am the (*check one*): Petitioner. Respondent. I am asking for an *Immediate Restraining Order* against my spouse/domestic partner.

I want my children under 18 to be protected by the order:

Child's name	Age	Child's name	Age
1.		2.	
3.		4.	

2. I ask the court to approve an *Immediate Restraining Order* to protect me and/or my children. Without this Order, my children or I could be hurt or suffer damage or loss immediately. This harm could be irreparable. (*Explain how you or your children could be harmed beyond repair*): _____

(*If you need additional space use the Declaration form FL All Family 135.*)

3. **Notice** (*check one*):

I should **not** have to notify the other side in advance that I am filing this *Motion* because my children or I could be harmed beyond repair if I gave any advance notice. (*Explain why you or the children could be harmed by providing advance notice*): _____

I **have** notified the other side that I am asking for an *Immediate Restraining Order*. (*Describe any steps taken to give your spouse/domestic partner or their lawyer notice of this Motion*): _____

4. Court hearing request

I ask the court to approve an *Immediate Restraining Order* now, and hold a hearing within 14 days to consider all of my requests for temporary orders listed below. I will have my spouse/domestic partner served with notice of the hearing so the court can hear their side.

Other: _____

5. Active duty military

(The federal Servicemembers Civil Relief Act covers:

- *Army, Navy, Air Force, Marine Corps, and Coast Guard members on active duty;*
- *National Guard or Reserve members under a call to active service for more than 30 days in a row; and*
- *commissioned corps of the Public Health Service and NOAA.*

The state Servicemembers' Civil Relief Act covers those service members listed above who are either stationed in or residents of Washington state, and their dependents, except for the commissioned corps of the Public Health Service and NOAA.)

- My spouse/domestic partner is **not** covered by the state or federal Service Members' Civil Relief Acts.
- My spouse/domestic partner is covered by the state federal Service Members' Civil Relief Act.
- For persons covered only by the state act – Military duty may keep the service member or dependent from responding or coming to the hearing on this motion. I ask the court to approve temporary orders even if the covered person asks for a stay or doesn't respond. It would be very unfair (a manifest injustice) not to make temporary orders now because: _____*
- _____
- _____

➤ **I ask the Court to approve these orders immediately (check all that apply):**

6. Do not disturb

- No request.
- Order my spouse/domestic partner not to disturb my peace or the peace of any child listed in **1**.

7. Stay away

- No request.
- Order my spouse/domestic partner not to go onto the grounds of or enter my home, workplace, vehicle, or school, and the daycare or school of any child listed in **1**.
- Also, not knowingly to go or stay within _____ feet of my home, workplace, school, or vehicle, or the daycare or school of any child listed in **1**.

My spouse/domestic partner and I (*check one*): live together. do not live together.

8. Do not hurt or threaten

- No request.
- Order my spouse/domestic partner not to:
 - Assault, harass, stalk, or molest me or any child listed in **1**; or
 - Use, try to use, or threaten to use physical force against me or the children that would reasonably be expected to cause bodily injury.

Warning! If the court extends this order after a full hearing, the court must consider if weapons restrictions are required by state law; federal law may also prohibit the Restrained Person from possessing firearms or ammunition.

9. Surrender weapons

- No request.
- Order my spouse/domestic partner to immediately surrender any firearms, other dangerous weapons, and any concealed pistol licenses that they have in their custody, control, or possession to (*check one*): the police chief or sheriff. their lawyer. (*name*): _____

10. Care and safety of children until the hearing

- No request.
- Order my spouse/domestic partner not to take the children listed in **1** out of Washington State.
- Order that the children listed in **1** will live with (*check one*): me my spouse/ domestic partner until the hearing.
- Other (*specify*): _____

11. Protect property

- No request.
- Order (*check one*): my spouse/domestic partner both parties not to move, take, hide, damage, borrow against, sell or try to sell, or get rid of any property, unless it is a usual business practice or to pay for basic necessities. (If the court makes this order, both spouses/domestic partners must notify each other about any expenses that are out of the ordinary.)

12. Do not change insurance

- No request.
- Order (*check one*): my spouse/domestic partner both parties not to make changes to any medical, health, life, or auto insurance policy that covers either spouse/domestic partner or any child listed in **1**. That means they must not transfer, cancel, borrow against, let expire, or change the beneficiary of any policy.

13. Other immediate orders

- No request.
- (*Specify*): _____

➤ **I ask the court to approve these temporary orders at the hearing to stay in effect until the case is done (check all that apply):**

14. Extend immediate orders

Extend the immediate orders I asked for above to stay in effect until the case is done.

15. Prohibit weapons and order surrender

- No request.
- Order my spouse/domestic partner:
 - Not to access, possess, have in their custody or control, purchase, receive, or attempt to purchase or receive firearms, other dangerous weapons, or concealed pistol licenses until the Order ends, and to
 - Immediately surrender any firearms, other dangerous weapons, or concealed pistol licenses that they have in their custody, control, or possession to (*check one*): the police chief or county sheriff. their lawyer. other person (*name*): _____

16. Care and safety of children (check all that apply):

- No request.
- Approve the parenting plan proposed by me my spouse/domestic partner.
- Order my spouse/domestic partner not to take the children listed in **1** out of Washington State.
- Appoint a person to investigate and report to the court about what is in the children's best interest, and order who will pay this person's fees. This person should be a/n (*check one*):
 - Guardian ad Litem (GAL) or Evaluator/Investigator as chosen by the court.
 - Guardian ad Litem (GAL).
 - Evaluator/Investigator.
 - (*Name*): _____
- Other: _____

17. Provide support

- No request.
- Order child support according to the *Washington State Child Support Schedule*.
- Order (*check one*): me my spouse/domestic partner to pay spousal support (maintenance/alimony) in the amount of: \$_____ every month until (*date or event*):_____.

18. Family home

- No request.
- Stay in the home**
 - I want continue living in the family home.
 - My spouse/domestic partner may continue living in the family home.

Move out

Order my spouse/domestic partner to move out of the family home by (*date*): _____

19. Use of property

No request.

Order that I can possess and use (*specify*):

property in my possession now.

vehicle(s): _____

other: _____

Order that my spouse/domestic partner can possess and use (*specify*):

property in their possession now.

vehicle(s): _____

other: _____

20. Household expenses

No request.

Order household expenses to be paid as follows:

Expense	Who should pay
<input type="checkbox"/> First Mortgage	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Second Mortgage/Line of Credit	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Rent or lease payment	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Utilities	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Homeowner's Insurance	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Property Taxes	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Vehicle (<i>specify</i>):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Vehicle (<i>specify</i>):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Child Care	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Other:	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

21. Divide debts

No request.

Order my spouse/domestic partner and me to:

Each be responsible for their own future debts, including debt from credit cards, loans, security interest, and mortgages.

Divide our debts as follows (*list debts and who will pay each one*):

Debt (<i>describe</i>)	Who should pay
1.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
2.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
3.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
4.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
5.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
6.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

22. Pay for insurance

- No request.
- Pay insurance premiums as follows (*list policies and who should pay each one*):

Policy (<i>describe</i>)	Who should pay
1.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
2.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
3.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

23. Pay fees and costs

- No request.
- Order my spouse/domestic partner to:
- Pay my lawyer's fees for this case. *Amount:* \$ _____
 Make payments to (*name*): _____
- Pay other professional fees and costs for this case. *Amount:* \$ _____
 to (*name*): _____
 for (*purpose*): _____

24. Other temporary orders

- No request.
- (*Specify*): _____

➤ **Reasons for my requests:**

25. Why are you asking the court for the orders you checked above? (*Explain*):

- If you need additional space use the *Declaration* form FL All Family 135.
- If you are asking for a parenting plan, also fill out the *Information for Temporary Parenting Plan*, form FL All Family 139, and a proposed *Parenting Plan*, form FL All Family 140.
- If you are asking for child support, also fill out the *Child Support Worksheets*. If you have received public assistance for any child in this case, also fill out the *Public Assistance Declaration*, form FL All Family 132.

Person asking for this order fills out below:

I declare under penalty of perjury under the laws of the State of Washington that the facts I have provided on this form are true.

Signed at (*city and state*): _____ Date: _____



Person asking for this order signs here *Print name here*

I agree to accept legal papers for this case at (*check one*):

- my lawyer's address, listed below.
- the following address (*this does **not** have to be your home address*):

Street Address or PO Box *City* *State* *Zip*

Email: _____

*(If this address changes before the case ends, you **must** notify all parties and the court clerk in writing. You may use the Notice of Address Change form (FL All Family 120). You must also update your Confidential Information form (FL All Family 001) if this case involves parentage or child support.)*

Lawyer (if any) fills out below:



Lawyer signs here *Print name and WSBA No.* *Date*

Lawyer's Street Address or PO Box *City* *State* *Zip*

Email (*if applicable*): _____

Warning! Documents filed with the court are available for anyone to see unless they are sealed. Financial, medical, and confidential reports, as described in General Rule 22, **must** be sealed so they can only be seen by the court, the other party, and the lawyers in your case. Seal those documents by filing them separately, using a *Sealed* cover sheet (form FL All Family 011, 012, or 013). You may ask for an order to seal other documents.

Superior Court of Washington, County of _____

In re:

Petitioner/s (*person/s who started this case*):

And Respondent/s (*other party/parties*):

No. _____

Restraining Order

Temporary (TMRO)

Final (RSTO)

Clerk's action required: 6, 7

Surrender Weapons Ordered: yes no

Restraining Order

This order replaces all earlier Restraining Orders with the same Restrained Person, issued under this case number.

1. **This Order restrains (*name*):**

Restrained Party's distinguishing features:

Restrained Party's Identifiers

Sex	Race	Hair
Height	Weight	Eyes

Caution: Access to weapons: yes no unknown

2. **This Order protects (*name/s*):** _____
and the following children, who are under 18 (if any)

Child's name	Age	Child's name	Age
1.		2.	
3.		4.	

3. **To the Restrained Person listed in 1:**

This Order starts immediately, and ends in 12 months or on (*date*): _____

Warning! You must obey this order. Violation of this order with actual notice of its terms is a **criminal offense** under Chapter 7.105 RCW and will subject the violator to arrest (*RCW 7.105.450*). This order is enforceable in all 50 U.S. states, the District of Columbia, and U.S. territories and tribal lands (*18 U.S.C. § 2265*).

Location of Weapons: Vehicle On Person Residence Describe in detail:

Current Status

Is the PARENT or GUARDIAN living with the restrained person now? **Yes** **No**

Are you and the PARENT or GUARDIAN living together now? **Yes** **No**

Does the PARENT or GUARDIAN know you are trying to get this order? **Yes** **No**

Is the PARENT or GUARDIAN likely to react violently when served? **Yes** **No**

4. Findings

Authority: The court has jurisdiction over the parties, the children listed in **2**, and the subject matter.

Notice: The Restrained Person had reasonable notice and an opportunity to be heard. They were notified of the hearing by personal service service by mail allowed by the court service by publication allowed by the court.

The Restrained Person was was not present at the hearing.

The Restrained Person had actual notice of the hearing.

other (*specify*): _____

Credible Threat: The Restrained Person represents a credible threat to the physical safety of the Protected Person.

Intimate Partner: The Restrained Person and the Protected Person are/were intimate partners because they are (*check all that apply*):

current or former spouses or domestic partners.

parents of a child-in-common (unless a child was conceived through sexual assault).

current or former dating relationship (age 13 or older) and

never lived together. live or have lived together.

Military: The (*check one*): Petitioner Respondent lives in the state of Washington, but was not able to go to the hearing because they are an active-duty member of the National Guard or Reserves (or a dependent of one). A failure to act despite the absence of the service member will result in a manifest injustice to the other party.

5. Court Orders to the Restrained Person listed in 1:

Warning! You **must** obey this order until it ends. If you know about this order but do not obey, you may be arrested and charged with a crime.

Do not disturb

Do not disturb the peace of the Protected Person or of any child listed in **2**.

Stay away

Do not go onto the grounds of or enter the Protected Person’s home, workplace, vehicle, or school, or the daycare or school of any child listed in **2**.

Do not knowingly go or stay within _____ feet of the Protected Person’s home, vehicle, workplace, school, or the daycare or school of any child listed in **2**.

Do not hurt or threaten

Warning! If the court checks this box, the court must consider if weapons restrictions are required by state law; federal law may also prohibit the Restrained Person from possessing firearms or ammunition.

Do not:

- Assault, harass, stalk, or molest the Protected Person or any child listed in **2**;
or

- Use, try to use, or threaten to use physical force against the Protected Person or children that would reasonably be expected to cause bodily injury.

Prohibit weapons and order surrender (separate order required)

The Restrained Person must:

- Immediately surrender to law enforcement all firearms, dangerous weapons, and concealed pistol licenses in the party's custody, control, or possession;
- Not access, possess, have in their custody or control, purchase, receive, or attempt to purchase or receive firearms, other dangerous weapons, or concealed pistol licenses; and
- Comply with the **Order to Surrender and Prohibit Weapons** (form WS 001) filed separately.

Findings – The court (*check all that apply*):

- must** issue the orders referred to above because:
- the court ordered the **do not hurt or threaten** restraints above and the court finds that the restrained person had **actual notice** and an **opportunity to participate**. AND:
- the Restrained Person represents a **credible threat** to the physical safety of a protected person, OR
 - This order explicitly prohibits the use, attempted use, or threatened use of **physical force** against any protected person.

Therefore, the weapons restrictions are required by state law. RCW 9.41.800(2).

- the court finds by a preponderance of the evidence that the Restrained Person:
- has used, displayed, or threatened to use a firearm or other dangerous weapon in a felony; or
 - is ineligible to possess a firearm under RCW 9.41.040.
- may** issue the orders referred to above because the court finds by a preponderance of the evidence that the Restrained Person presents a serious and imminent threat to public health or safety, or the health or safety of any individual by possessing a firearm or other dangerous weapon.

Other restraining orders: _____

6. Washington Crime Information Center (WACIC) and Other Data Entry

Clerk's Action. The court clerk shall forward a copy of this order immediately to the following law enforcement agency (*county or city*) _____ (**check only one**): Sheriff's Office or Police Department (*List the same agency that entered the temporary order, if any*)

This agency shall enter this order into WACIC and National Crime Info. Center (NCIC).

7. Service

Required. The Restrained Person must be served with a copy of this order.

Superior Court of Washington, County of _____

In re the marriage/domestic partnership of:

Petitioner (*person who started this case*):

Respondent (*other spouse / partner*):

No. _____

**Motion for Temporary Family Law Order
(MTTO)**

and **Restraining Order (MTTMO)**

**Motion for Temporary Family Law Order
 and Restraining Order**

Use this form in marriage/domestic partnership cases only. For other cases, use FL Parentage 323 or FL Modify 623, depending on the type of case.

To both parties:

Deadline! Your papers must be filed and served by the deadline in your county's Local Court Rules, or by the State Court Rules if there is no local rule. Court Rules and forms are online at www.courts.wa.gov.

If you want the court to consider your side, you **must**:

- File your original documents with the Superior Court Clerk; AND
- Give the Judge/Commissioner a copy of your papers (if required by your county's Local Court Rules); AND
- Have a copy of your papers served on all other parties or their lawyers; AND
- Go to the hearing.

The court may not allow you to testify at the motion hearing. Read your county's Local Court Rules, if any.

Bring proposed orders to the hearing.

To the person filing this motion:

You must schedule a hearing on this motion. You may use the *Notice of Hearing* (form FL All Family 185) unless your county's Local Court Rules require a different form. Contact the court for scheduling information.

To the person receiving this motion:

If you do not agree with the requests in this motion, file a statement (using form FL All Family 135, *Declaration*) explaining why the court should not approve those requests. You may file other written proof supporting your side, and propose your own *Parenting Plan* or *Child Support Worksheets*.

1. My name is _____. I ask the court for temporary orders approving the requests listed below.

2. Children

No request.

I want my children under 18 listed below to be included in the court's orders:

Child's name	Age	Child's name	Age
1.		2.	
3.		4.	
5.		6.	

3. Active duty military

*(The **federal** Servicemembers Civil Relief Act covers:*

- *Army, Navy, Air Force, Marine Corps, and Coast Guard members on active duty;*
- *National Guard or Reserve members under a call to active service for more than 30 days in a row; and*
- *commissioned corps of the Public Health Service and NOAA.*

*The **state** Servicemembers' Civil Relief Act covers those service members listed above who are either stationed in or residents of Washington state, and their dependents, except for the commissioned corps of the Public Health Service and NOAA.)*

My spouse/domestic partner is **not** covered by the state or federal Servicemembers Civil Relief Acts.

My spouse/domestic partner is covered by the state federal Servicemembers Civil Relief Act.

*For persons covered only by the **state** act – Military duty may keep the service member or dependent from responding or coming to the hearing on this motion. I ask the court to approve temporary orders even if the covered person asks for a stay or doesn't respond. It would be very unfair (a manifest injustice) not to make temporary orders now because: _____*

4. Care and safety of children (check all that apply):

No request.

Approve the parenting plan proposed by me my spouse/domestic partner.

Order my spouse/domestic partner not to take the children listed in **2** out of Washington State.

Appoint a person to investigate and report to the court about what is in the children's best interest, and order who will pay this person's fees. This person should be a/n (check one):

Guardian ad Litem (GAL) or Evaluator/Investigator as chosen by the court.

Guardian ad Litem (GAL).

Evaluator/Investigator.

(Name): _____

Other: _____

5. Provide support

- No request.
- Order child support according to the Washington state child support schedule.
- Order (*check one*): me my spouse/domestic partner to pay spousal support (maintenance/alimony) in the amount of: \$_____ every month until (*date or event*):_____.

6. Family home

- No request.
- Stay in the home**
 - I want to continue living in the family home.
 - My spouse/domestic partner may continue living in the family home.
- Move out**
Order my spouse/domestic partner to move out of the family home by (*date*): _____
_____.

7. Use of property

- No request.
- Order that I can possess and use (*specify*):
 - property in my possession now.
 - vehicle(s):_____
 - other: _____

- Order that my spouse/domestic partner can possess and use (*specify*):
 - property in their possession now.
 - vehicle(s):_____
 - other: _____

8. Protect property

- No request.

- Order (*check one*): my spouse/domestic partner both parties not to move, take, hide, damage, borrow against, sell or try to sell, or get rid of any property, unless it is a usual business practice or to pay for basic necessities. (If the court makes this order, both spouses/domestic partners must notify each other about any expenses that are out of the ordinary.)

9. Household expenses

- No request.
- Order household expenses to be paid as follows:

Expense	Who should pay
<input type="checkbox"/> First Mortgage	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Second Mortgage/Line of Credit	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Rent or Lease Payment	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Utilities	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Homeowner's Insurance	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Property Taxes	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Vehicle (<i>specify</i>):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Vehicle (<i>specify</i>):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Child Care	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Other:	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

10. Divide debts

- No request.
- Order my spouse/domestic partner and me to:
- Each be responsible for their own future debts, including debt from credit cards, loans, security interest, and mortgages.
 - Divide our debts as follows (*list debts and who should pay each one*):

Debt (<i>describe</i>)	Who should pay
1.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
2.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
3.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
4.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
5.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
6.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

11. Do not change insurance

- No request.
- Order (*check one*): my spouse/domestic partner both parties not to make changes to any medical, health, life, or auto insurance policy that covers either

spouse/domestic partner or any child listed in **2**. That means they must not transfer, cancel, borrow against, let expire, or change the beneficiary of any policy.

Pay insurance premiums as follows (*list policies and who should pay each one*):

Policy (describe)	Who should pay
1.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
2.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
3.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

12. Pay fees and costs

- No request.
- Order my spouse/domestic partner to:
 - Pay my lawyer's fees for this case. Amount: \$ _____
Make payments to (name): _____
 - Pay other professional fees and costs for this case. Amount: \$ _____
to (name): _____
for (purpose): _____

13. Restraining Order

- No request.
- The Court already signed a *Restraining Order* on (date): _____ in this case.
 - I am not asking the court to make any changes to this *Restraining Order*.
 - I ask the Court to remove (terminate) this *Restraining Order*.
 - I ask the Court to change this *Restraining Order* as follows (*specify*):

- I ask the Court for a *Restraining Order* (form FL All Family 150) that orders my spouse/domestic partner to obey the restraints and orders checked below. (*Check all that apply; also check the "and Restraining Order" boxes in the form titles on page 1*):
 - Do not disturb** – Do not disturb my peace or the peace of any child listed in **2**.
 - Stay away** – Do not go onto the grounds of or enter my home, workplace, vehicle, or school, and the daycare or school of any child listed in **2**.
 - Also, do not knowingly go or stay within _____ feet of my home, workplace, vehicle, or school, or the daycare or school of any child listed in **2**.
 - Do not hurt or threaten**
 - Do not assault, harass, stalk, or molest me or any child listed in **2**; and
 - Do not use, try to use, or threaten to use physical force against me or the children that would reasonably be expected to cause bodily injury.

Warning! If the court makes this order, the court must consider if weapons restrictions are required by state law; federal law may also prohibit the Restrained Person from possessing firearms or ammunition.

Prohibit weapons and order surrender

- Not to access, possess, have in their custody or control, purchase, receive, or attempt to purchase or receive firearms, other dangerous weapons, or concealed pistol licenses until the Order ends, and
- Immediately surrender any firearms, other dangerous weapons, and any concealed pistol licenses that they have in their custody, control, or possession to (*check one*): the police chief or sheriff. their lawyer. other person (*name*): _____.

Other: _____

14. Other temporary orders

- No request.
- (*Specify*): _____

➤ **Reasons for my requests**

15. Why are you asking the court for the orders you checked above? (*Explain*):

- If you need additional space use the *Declaration* form FL All Family 135.
- If you are asking for a parenting plan, also fill out the *Information for Temporary Parenting Plan*, form FL All Family 139, and a proposed *Parenting Plan*, form FL All Family 140.
- If you are asking for child support, also fill out the *Child Support Worksheets*. If you have received public assistance for any child in this case, also fill out the *Public Assistance Declaration*, form FL All Family 132.
- If you are asking for any order involving money (including child support), also fill out the *Financial Declaration*, form FL All Family 131, and file the required financial records.
- If you are asking to prohibit weapons or order surrender, give your reasons at the end of this section.
- If you are asking to change an earlier temporary order, give the date of the earlier order and explain how circumstances have changed since then.

Person asking for this order fills out below:

I declare under penalty of perjury under the laws of the State of Washington that the facts I have provided on this form are true.

Signed at (*city and state*): _____ Date: _____



Person asking for this order signs here *Print name here*

I agree to accept legal papers for this case at (*check one*):

- my lawyer's address, listed below.
 the following address (*this does **not** have to be your home address*):

Street Address or PO Box *City* *State* *Zip*

Email: _____

*(If this address changes before the case ends, you **must** notify all parties and the court clerk in writing. You may use the Notice of Address Change form (FL All Family 120). You must also update your Confidential Information form (FL All Family 001) if this case involves parentage or child support.)*

Lawyer (if any) fills out below:



Lawyer signs here *Print name and WSBA No.* *Date*

Lawyer's Street Address or PO Box *City* *State* *Zip*

Email (*if applicable*): _____

Warning! Documents filed with the court are available for anyone to see unless they are sealed. Financial, medical, and confidential reports, as described in General Rule 22, **must** be sealed so they can only be seen by the court, the other party, and the lawyers in your case. Seal those documents by filing them separately, using a *Sealed* cover sheet (form FL All Family 011, 012, or 013). You may ask for an order to seal other documents.

Superior Court of Washington, County of _____

In re:

Petitioner/s *(person/s who started this case)*:

And Respondent/s *(other party/parties)*:

No. _____

Information for Temporary Parenting Plan
(DCLSPP)

Information for Temporary Parenting Plan

The court needs the information below to order a temporary parenting plan. You may attach pages to this form if you need more space. You may fill out a separate form for each child if the information is different for each child.

1. My name is: _____.

2. The information on this form is about:

Child's name	Age	Child's name	Age
1.		4.	
2.		5.	
3.		6.	

3. List the people the children have lived with in the last 12 months:

Who the children lived with <i>(names)</i>	Where <i>(county/state)?</i>	For how long?

7. List the other parent's **current** work schedule below, if any:

Monday	Tuesday	Wed.	Thursday	Friday	Saturday	Sunday

How long has this work schedule been in place? (*Check one*):

- For the past 12 months or longer.
- For **less** than 12 months, since (*date*): _____ . Before then, the other parent had the work schedule listed below:

Monday	Tuesday	Wed.	Thursday	Friday	Saturday	Sunday

8. List the **children's** schedule below, including school, childcare, and other activities:

Monday	Tuesday	Wed.	Thursday	Friday	Saturday	Sunday

9. Abandonment, abuse, domestic violence, sex offense, or other serious problems (*RCW 26.09.191*)

- Does not apply. There are no abandonment, abuse, domestic violence, sex offense, or other serious problems that affect the children in this case.
- (*Check one*): The other parent's My parenting time and decision-making should be limited for the reasons listed in my proposed *Parenting Plan*, section **3.a.**

Explain and give examples supporting those reasons for limitations: _____

10. Any other information the court needs to make a decision about a temporary *Parenting Plan*:

I declare under penalty of perjury under the laws of the state of Washington that the facts I have provided on this form (and any attachments) are true. I have attached (*number*) ___ pages.

Signed at (*city and state*): _____ Date: _____



Sign here

Print name

Warning! Documents filed with the court are available for anyone to see unless they are sealed. Financial, medical, and confidential reports, as described in General Rule 22, **must** be sealed so they can only be seen by the court, the other party, and the lawyers in your case. Seal those documents by filing them separately, using a *Sealed* cover sheet (form FL All Family 011, 012, or 013). You may ask for an order to seal other documents.

Superior Court of Washington, County of _____

In re:

Petitioner/s (*person/s who started this case*):

And Respondent/s (*other party/parties*):

No. _____

Declaration of
(*name*): _____

(DCLR)

Declaration of (*name*): _____

1. I am (*age*): _____ years old and I am the (*check one*): Petitioner Respondent
 Other (*relationship to the people in this case*): _____

2. I declare: _____

Superior Court of Washington, County of _____

In re:

Petitioner/s (*person/s who started this case*):

And Respondent/s (*other party/parties*):

No. _____

Financial Declaration of
(*name*): _____

(FNDCLR)

Financial Declaration

1. Your personal information

Name: _____

Highest year of education you completed: _____ Your job/profession is: _____

Are you working now?

Yes. List the date you were hired (*month / year*): _____

No. List the last date you worked (*month / year*): _____

What was your monthly pay *before* taxes: \$ _____

Why are you not working now? _____

2. Summary of your financial information

(*Complete this section after filling out the rest of this form.*)

1. Total Monthly Net Income (<i>copy from section 3, line C. 3.</i>)	\$
2. Total Monthly Expenses After Separation (<i>copy from section 7, line I.</i>)	\$
3. Total Monthly Payments for Other Debts (<i>copy from section 9</i>)	\$
4. Total Monthly Expenses + Payments for Other Debts (<i>add line 2 and line 3</i>)	\$
Gross Monthly Income of Other Party (<i>copy from section 3. A.</i>)	\$

3. Income

List monthly income and deductions below for you and the other person in your case. If your case involves child support, this same information is required on your *Child Support Worksheets*. If you do not know the other person's financial information, give an estimate.

Tip: If you do not get paid once a month, calculate your *monthly* income like this:

Monthly income = Weekly x 4.3 **or** 2-week x 2.15 **or** Twice a month x 2

A. Gross Monthly Income (before taxes, deductions, or retirement contributions)		
	You	Other Party
Monthly wage / salary		
Income from interest / dividends		
Income from business		
Spousal support / maintenance received (Paid by: _____)		
Other income		
Total Gross Monthly Income (add all lines above)		
Total gross income for this year before deductions (starting January 1 of this year until now)		

B. Monthly Deductions		
	You	Other Party
Income taxes (federal and state)		
FICA (Soc.Sec. + Medicare) or self-employment taxes		
State Industrial Insurance (Workers' Comp.)		
Mandatory union or professional dues		
Mandatory pension plan payments		
Voluntary retirement contributions (up to the limit in RCW 26.19.071(5)(g))		
Spousal support / maintenance paid		
Normal business expenses		
Total Monthly Deductions (add all lines above)		

C. Net Monthly Income		
	You	Other Party
1. Total Gross Monthly Income (from A above)		
2. Total Monthly Deductions (from B above)		
3. Net Monthly Income (Line 1 minus Line 2)		

4. Other Income and Household Income

Tip: If this income is not once a month, calculate the *monthly* amount like this:
 Monthly income = Weekly x 4.3 or 2-week x 2.15 or Twice a month x 2

A. Other Income (Do not repeat income you already listed on page 2.)		
	You	Other Party
Child support received from other relationships		
Other income (From: _____)		
Other income (From: _____)		
Total Other Income (add all lines above)		

B. Household Income (Monthly income of other adults living in the home)		
	Your Home	Other Party's Home
Other adult's gross income (Name: _____)		
Other adult's gross income (Name: _____)		
Total Household Income of other adults in the home (add all lines above)		

5. Disputed Income – If you disagree with the other party's statements about anyone's income, explain why the other party's statements are not correct, and your statements are correct:

6. Available Assets

List your liquid assets, like cash, stocks, bonds, that can be easily cashed.	
Cash on hand and money in all checking & savings accounts	\$
Stocks, bonds, CDs and other liquid financial accounts	\$
Cash value of life insurance	\$
Other liquid assets	\$
Total Available Assets (add all lines above)	

7. Monthly Expenses After Separation

Tell the court what your monthly expenses are (or will be) after separation. If you have dependent children, your expenses must be based on the parenting plan or schedule you expect to have for the children.

A. Housing Expenses		F. Transportation Expenses	
Rent / Mortgage Payment		Automobile payment (<i>loan or lease</i>)	
Property Tax (if not in monthly payment)		Auto insurance, license, registration	
Homeowner's or Rental Insurance		Gas and auto maintenance	
Other mortgage, contract, or debt payments based on equity in your home		Parking, tolls, public transportation	
Homeowner's Association dues or fees		Other transportation expenses	
Total Housing Expenses		Total Transportation Expenses	
B. Utilities Expenses		G. Personal Expenses (not children's)	
Electricity and heating (gas and oil)		Clothes	
Water, sewer, garbage		Hair care, personal care	
Telephone(s)		Recreation, clubs, gifts	
Cable, Internet		Education, books, magazines	
Other (<i>specify</i>):		Other Personal Expenses	
Total Utilities Expenses		Total Personal Expenses	
C. Food and Household Expenses		H. Other Expenses	
Groceries for (<i>number of people</i>): _____		Life insurance (not deducted from pay)	
Household supplies (cleaning, paper, pets)		Other (<i>specify</i>):	
Eating out		Other (<i>specify</i>):	
Other (<i>specify</i>):		Other (<i>specify</i>):	
Total Food and Household Expenses		Total Other Expenses	
D. Children's Expenses		List all Total Expenses from above:	
Childcare, babysitting		A. Total Housing Expenses	
Clothes, diapers		B. Total Utilities Expenses	
Tuition, after-school programs, lessons		C. Total Food and Household Expenses	
Other expenses for children		D. Total Children's Expenses	
Total Children's Expenses		E. Total Health Care Expenses	
E. Health Care Expenses		F. Total Transportation Expenses	
Insurance premium (health, vision, dental)		G. Total Personal Expenses	
Health, vision, dental, orthodontia, mental health expenses not covered by insurance		H. Total Other Expenses	
Other health expenses not covered by insurance		I. All Total Expenses (add A - H above)	
Total Health Care Expenses		<i>Use section 10 below to explain any unusual expenses, or attach additional pages.</i>	

Financial Records – You must provide financial records as required by statute and state and local court rules. These records may include:

- Personal Income Tax Returns
- Partnership or Corporate Income Tax Returns
- Pay stubs
- Other financial records

Important! Do not attach financial records to this form. Financial records should be served on the other party and filed with the court separately using the *Sealed Financial Source Documents* cover sheet (FL All Family 011). If filed separately using the cover sheet, the records will be sealed to protect your privacy (although they will be available to all parties and lawyers in this case, court personnel and certain state agencies and boards.) See GR 22(c)(2).

Superior Court of Washington, County of _____

In re:

Petitioner/s (person/s who started this case):

And Respondent/s (other party/parties):

No. _____

Sealed Financial Source Documents
(Cover Sheet)

(SEALFN)

Clerk's action required.

For use in Family Law and Guardianship cases.

**Sealed Financial Source Documents
(Cover Sheet)**

Use this form as a cover sheet to keep your financial documents **private** from the public. On the first page of each document, write the word "SEALED" 1 inch from the top of the page.

Check the documents you are attaching to this cover sheet to be sealed:

- Income tax records
- Credit card statements
- Checks or the equivalent
- Check registers
- Other financial information sealed by court order (specify): _____
- Pay stubs or other proof of earnings
- Bank statements
- Loan application documents
- Retirement plan orders

Submitted by: Petitioner or lawyer Respondent or lawyer

▶ _____
Sign here

Print name (if lawyer, also provide WSBA #)

Important! The other person and the lawyers in your case can see your **sealed** documents. If you need to keep your address information private for safety reasons, you may cross out or delete your address information.

Superior Court of Washington, County of _____

In re:

Petitioner/s (*person/s who started this case*):

And Respondent/s (*other party/parties*):

No. _____

Parenting Plan
(PPP/PPT/PP)

Clerk's Action Required: **1**

Parenting Plan

1. This parenting plan is a (*check one*):
- Proposal** (request) by a parent (*name/s*): _____
It is not a signed court order. (PPP)
 - Court order** signed by a judge or commissioner. This is a (*check one*):
 - Temporary order. (PPT)
 - Final order. (PP)
 - This final parenting plan changes the last final parenting plan.

2. **Children** – This parenting plan is for the following children:

Child's name	Age	Child's name	Age
1.		2.	
3.		4.	
5.		6.	

3. **Reasons for putting limitations on a parent** (under RCW 26.09.191)
- a. **Abandonment, neglect, child abuse, domestic violence, assault, or sex offense.** (*If a parent has any of these problems, the court **must** limit that parent's contact with the children and that parent's right to make decisions for the children, and may not require dispute resolution other than court.*)
- Neither parent has any of these problems. (*Skip to 3.b.*)

- A parent has one or more of these problems as follows (*check all that apply*):
 - Abandonment** – (*Parent's name*): _____ intentionally abandoned a child listed in **2** for an extended time.
 - Neglect** – (*Parent's name*): _____ substantially refused to perform his/her parenting duties for a child listed in **2**.
 - Child Abuse** – (*Parent's name*): _____ (or someone living in that parent's home) abused or threatened to abuse a child. The abuse was (*check all that apply*):
 - physical
 - sexual
 - repeated emotional abuse.
 - Domestic Violence** – (*Parent's name*): _____ (or someone living in that parent's home) has a history of domestic violence as defined in RCW 7.105.010.
 - Assault** – (*Parent's name*): _____ (or someone living in that parent's home) has assaulted or sexually assaulted someone causing grievous physical harm, causing fear of such harm, or resulting in a pregnancy.
 - Sex Offense** –
 - (*Parent's name*): _____ has been convicted of a sex offense as an adult.
 - Someone living in (*parent's name*): _____'s home has been convicted as an adult or adjudicated as a juvenile of a sex offense.

b. Other problems that may harm the children's best interests. (*If a parent has any of these problems, the court may limit that parent's contact with the children and that parent's right to make decisions for the children.*)

- Neither parent has any of these problems. (*Skip to 4.*)
- A parent has one or more of these problems as follows (*check all that apply*):
 - Neglect** – (*Parent's name*): _____ neglected his/her parental duties towards a child listed in **2**.
 - Emotional or physical problem** – (*Parent's name*): _____ has a long-term emotional or physical problem that gets in the way of his/her ability to parent.
 - Substance Abuse** – (*Parent's name*): _____ has a long-term problem with drugs, alcohol, or other substances that gets in the way of his/her ability to parent.
 - Lack of emotional ties** – (*Parent's name*): _____ has few or no emotional ties with a child listed in **2**.
 - Abusive use of conflict** – (*Parent's name*): _____ uses conflict in a way that may cause serious damage to the psychological development of a child listed in **2**.
 - Withholding the child** – (*Parent's name*): _____ has kept the other parent away from a child listed in **2** for a long time, without a good reason.

Other (*specify*): _____

4. Limitations on a parent

Does not apply. There are no reasons for limitations checked in **3.a. or 3.b.** above. (*Skip to 5.*)

No limitations despite reasons (*explain why there are no limitations on a parent even though there are reasons for limitations checked in 3.a. or 3.b. above*): _____

The following limits or conditions apply to (*parent's name*): _____
_____ (*check all that apply*):

No contact with the children.

Limited contact as shown in the Parenting Time Schedule (sections **8 – 11**) below.

Limited contact as follows (*specify schedule, list all contact here instead of in the Parenting Time Schedule*): _____

Supervised contact. All parenting time shall be supervised. Any costs of supervision must be paid by (*name*): _____

The supervisor shall be:

a professional supervisor (*name*): _____

a non-professional supervisor (*name*): _____

The dates and times of supervised contact will be:

as shown in the Parenting Time Schedule (sections **8 – 11**) below.

as follows (*specify*): _____

(*Specific rules for supervision, if any*): _____

Other limitations or conditions during parenting time (*specify*): _____

Evaluation or treatment required. (*Name*): _____ must:

be evaluated for: _____.

start (or continue) and comply with treatment:

as recommended by the evaluation.

as follows (*specify kind of treatment and any other details*): _____

provide a copy of the evaluation and compliance reports (specify details): _____

If this parent does not follow the evaluation or treatment requirements above, then (what happens): _____

5. Decision-making

When the children are with you, you are responsible for them. You can make day-to-day decisions for the children when they are with you, including decisions about safety and emergency healthcare. Major decisions must be made as follows:

a. Who can make major decisions about the children?

Type of Major Decision	Joint <i>(parents make these decisions together)</i>	Limited <i>(only the parent named below has authority to make these decisions)</i>
School/Educational	<input type="checkbox"/>	<input type="checkbox"/> (Name):
Healthcare (not emergency)	<input type="checkbox"/>	<input type="checkbox"/> (Name):
Other:	<input type="checkbox"/>	<input type="checkbox"/> (Name):
Other:	<input type="checkbox"/>	<input type="checkbox"/> (Name):
Other:	<input type="checkbox"/>	<input type="checkbox"/> (Name):

Important! Parenting involves decision-making in many areas. If you believe there are other decisions that are important to your family, list them under "Other" above. Some examples include: extracurricular activities, international travel, cell phones, driver's licenses, tattoos, and haircuts.

b. Reasons for limits on major decision-making, if any:

- There are no reasons to limit major decision-making.
- Major decision-making **must** be limited because one of the parents has problems as described in **3.a.** above.
- Major decision-making **should** be limited because (check all that apply):
 - Both parents are against shared decision-making.
 - One of the parents does not want to share decision-making and this is reasonable because of:
 - problems as described in **3.b.** above.
 - the history of each parent's participation in decision-making.
 - the parents' ability and desire to cooperate with each other in decision-making.
 - the distance between the parents' homes makes it hard to make timely decisions together.

6. Dispute Resolution

Important! After this parenting plan is signed by a judge or commissioner, if you and the other parent disagree about shared decisions or what parts of this plan mean, the court may require you to use a dispute resolution provider before going back to court. The court may only require a dispute resolution provider if there are **no** limitations in **3.a.** above. If a dispute resolution provider is checked below, the parents may, and sometimes must, use this provider before filing a Petition to Change a Parenting Plan or a Motion for Contempt for not following the plan. Check your county's Local Court Rules.

a. The parents will go to (check one):

- The dispute resolution provider below (before they may go to court):
 - Mediation (mediator or agency name): _____
 - Arbitration (arbitrator or agency name): _____
 - Counseling (counselor or agency name): _____

If a dispute resolution provider is not named above or if the named provider is no longer available, the parents may agree on a provider or ask the court to name one.

Important! Unless there is an emergency, the parents must participate in the dispute resolution process listed above in good faith, before going to court for disagreements about joint decisions or what parts of this plan mean. This section does **not** apply to disagreements about money or support.

- Court (without having to go to mediation, arbitration, or counseling).
(If you check this box, skip to section 7 below and do not fill out **6.b.**)

b. If mediation, arbitration, or counseling is required, one parent must notify the other parent by (check one): certified mail other (specify): _____.

The parents will pay for the mediation, arbitration, or counseling services as follows (check one):

- (Name): _____ will pay _____%,
(Name): _____ will pay _____%.
- based on each parents' Proportional Share of Income (percentage) from line 6 of the *Child Support Worksheet*.
- as decided through the dispute resolution process.

What to expect in the dispute resolution process:

- Preference shall be given to carrying out the parenting plan.
- If you reach an agreement, it must be put into writing, signed, and both parents must get a copy.
- If the court finds that you have used or frustrated the dispute resolution process without a good reason, the court can order you to pay financial sanctions (penalties) including the other parent's legal fees.
- You may go back to court if the dispute resolution process doesn't solve the disagreement or if you disagree with the arbitrator's decision.

7. Custodian

The custodian is (name): _____ solely for the purpose of all state and federal statutes which require a designation or determination of custody. Even though one parent is called the custodian, this does not change the parenting rights and responsibilities described in this plan.

(Washington law generally refers to parenting time and decision-making, rather than custody. However, some state and federal laws require that one person be named the custodian. The custodian is the person with whom the children are scheduled to reside a majority of their time.)

➤ **Parenting Time Schedule (Residential Provisions)**

Check one:

- Limited schedule only** – The children live with (name): _____ and have no contact with the other parent except as described in section 4.

(You may skip the parenting time schedule in sections 8 – 11, unless you want a different Summer or Holiday schedule, including to give uninterrupted time for vacation and holidays to the parent not subject to limitations.)

- Complete the parenting time schedule in sections 8 – 11.**

8. School Schedule

a. Children under school-age

- Does not apply. All children are school-age.
- The schedule for children under school-age is the same as for school-age children.
- Children under school-age are scheduled to live with (name): _____, except when they are scheduled to live with (name): _____ on (check all that apply):
 - WEEKENDS: every week every other week other (specify): _____ from (day) _____ at ____:____.m. to (day) _____ at ____:____.m. from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
 - WEEKDAYS: every week every other week other (specify): _____ from (day) _____ at ____:____.m. to (day) _____ at ____:____.m. from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
 - OTHER (specify): _____
- Other (specify): _____

b. School-age children

This schedule will apply (*check one*):

- immediately.
- when the youngest child enters (*check one*): Kindergarten 1st grade
- when the oldest child enters (*check one*): Kindergarten 1st grade
- Other: _____

The children are scheduled to live with (*name*): _____, except when they are scheduled to live with (*name*): _____ on (*check all that apply*):

- WEEKENDS: every week every other week other (*specify*): _____
 from (*day*) _____ at ____:____.m. to (*day*) _____ at ____:____.m.
 from (*day*) _____ at ____:____.m. to (*day*) _____ at ____:____.m.
- WEEKDAYS: every week every other week other (*specify*): _____
 from (*day*) _____ at ____:____.m. to (*day*) _____ at ____:____.m.
 from (*day*) _____ at ____:____.m. to (*day*) _____ at ____:____.m.
- OTHER (*specify*): _____

- Other (*specify*): _____

9. Summer Schedule

Summer begins and ends according to the school calendar. as follows: _____

- The Summer Schedule is the **same** as the School Schedule. (*Skip to 10.*)
- The Summer Schedule is the **same** as the School Schedule **except** that each parent shall spend _____ weeks of uninterrupted vacation time with the children each summer. The parents shall confirm their vacation schedules in writing by the end of (*date*) _____ each year. (*Skip to 10.*)
- The Summer Schedule is **different** than the School Schedule. The Summer Schedule will begin the summer before (*check one*): the youngest child the oldest child each child
 begins (*check one*): Kindergarten 1st grade Other: _____
 During the summer the children are scheduled to live with (*name*): _____, except when they are scheduled to live with (*name*): _____ on (*check all that apply*):

- WEEKENDS: every week every other week other (specify): _____
 from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
 from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
- WEEKDAYS: every week every other week other (specify): _____
 from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
 from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
- OTHER (specify): _____
-

10. Holiday Schedule (includes school breaks and special occasions)

- The Holiday Schedule is the **same** as the School and Summer Schedules above for all holidays, school breaks, and special occasions. *(Skip to 11.)*
- The children are scheduled to spend holidays, school breaks, and special occasions as follows:
(Check all that apply. Note any differences for children who have not yet started school.)
- Martin Luther King Jr. Day** – Begins and ends (day/time): _____
 Odd years with (name): _____; Even years with the other parent.
 Every year with (name): _____
 With the parent who has the children for the attached weekend.
 Other plan: _____
- Presidents' Day** – Begins and ends (day/time): _____
 Odd years with (name): _____; Even years with the other parent.
 Every year with (name): _____
 With the parent who has the children for the attached weekend.
 Other plan: _____
- Mid-winter Break** – Begins and ends (day/time): _____
 Odd years with (name): _____; Even years with the other parent.
 Every year with (name): _____
 Each parent has the children for the half of break attached to his/her weekend. The children must be exchanged on Wednesday at (time): _____
 Other plan: _____
- Spring Break** – Begins and ends (day/time): _____
 Odd years with (name): _____; Even years with the other parent.
 Every year with (name): _____
 Each parent has the children for the half of break attached to his/her weekend. The children must be exchanged on Wednesday at (time): _____
 Other plan: _____

- Mother's Day** – Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - Other plan: _____
- Memorial Day** – Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - With the parent who has the children for the attached weekend.
 - Other plan: _____
- Father's Day** – Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - Other plan: _____
- Fourth of July** – Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - Follow the Summer Schedule in section 9.
 - Other plan: _____
- Labor Day** – Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - With the parent who has the children for the attached weekend.
 - Other plan: _____
- Thanksgiving Day/Break** – Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - Other plan: _____
- Winter Break** – Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - Other plan: _____

- Christmas Eve/Day** – Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - Follow the Winter Break schedule above.
 - Other plan: _____

- New Year's Eve/Day** – Begins and ends (*day/time*): _____
(*odd/even is based on New Year's Eve*)
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - Follow the Winter Break schedule above.
 - Other plan: _____

- All three-day weekends not listed elsewhere**
(*Federal holidays, school in-service days, etc.*)
 - The children shall spend any unspecified holiday or non-school day with the parent who has them for the attached weekend.
 - Other plan: _____

Important! Families in Washington observe a broad range of religions and traditions. Your Parenting Plan can provide for how children will spend time on other significant days. (Examples: Eid, Passover, Easter, Chinese New Year, birthdays, etc.) Add lines as needed.

- Other occasion important to the family:** _____
 - Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - Other plan: _____
- Other occasion important to the family:** _____
 - Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - Other plan: _____

- Other occasion important to the family:** _____
 - Begins and ends (*day/time*): _____
 - Odd years with (*name*): _____; Even years with the other parent.
 - Every year with (*name*): _____
 - Other plan: _____

11. Conflicts in Scheduling

The Holiday Schedule must be observed over all other schedules. If there are conflicts within the Holiday Schedule (*check all that apply*):

- Named holidays shall be followed before school breaks.
- Children’s birthday/s shall be followed before named holidays and school breaks.
- Other (*specify*): _____

12. Transportation Arrangements

The children will be exchanged for parenting time (picked up and dropped off) at:

- each parent’s home
- school or daycare, when in session
- other location (*specify*): _____

Who is responsible for arranging transportation?

- The **picking up** parent – The parent who is about to **start** parenting time with the children must arrange to have the children picked up.
- The **dropping off** parent – The parent whose parenting time is **ending** must arrange to have the children dropped off.

Other details (if any): _____

13. Moving with the Child/ren (Relocation)

Anyone with majority or substantially equal residential time (at least 45 percent) who wants to move with the children **must notify** every other person who has court-ordered time with the children.

Move to a different school district

If the move is to a different school district, the relocating person must complete the form *Notice of Intent to Move with Children* (FL Relocate 701) and deliver it at least **60 days** before the intended move.

Exceptions:

- If the relocating person could not reasonably have known enough information to complete the form in time to give 60 days' notice, they must give notice within **5 days** after learning the information.
- If the relocating person is relocating to a domestic violence shelter or moving to avoid a clear, immediate, and unreasonable risk to health or safety, notice may be delayed **21 days**.
- If information is protected under a court order or the address confidentiality program, it may be withheld from the notice.
- A relocating person who believes that giving notice would put themselves or a child at unreasonable risk of harm, may ask the court for permission to leave things out of the notice or to be allowed to move without giving notice. Use form *Motion to Limit Notice of Intent to Move with Children (Ex Parte)* (FL Relocate 702).

The *Notice of Intent to Move with Children* can be delivered by having someone personally serve the other party or by any form of mail that requires a return receipt.

If the relocating person wants to change the *Parenting Plan* because of the move, they must deliver a proposed *Parenting Plan* together with the *Notice*.

Move within the same school district

If the move is within the *same* school district, the relocating person still has to let the other parent know. However, the notice does not have to be served personally or by mail with a return receipt. Notice to the other party can be made in any reasonable way. No specific form is required.

Warning! If you do not notify...

A relocating person who does not give the required notice may be found in contempt of court. If that happens, the court can impose sanctions. Sanctions can include requiring the relocating person to bring the children back if the move has already happened, and ordering the relocating person to pay the other side's costs and lawyer's fees.

Right to object

A person who has court-ordered time with the children can object to a move to a different school district and/or to the relocating person's proposed *Parenting Plan*. If the move is within the same school district, the other party doesn't have the right to object to the move, but they may ask to change the *Parenting Plan* if there are adequate reasons under the modification law (RCW 26.09.260).

An objection is made by filing the *Objection about Moving with Children and Petition about Changing a Parenting/Custody Order (Relocation)* (form FL Relocate 721). File your *Objection* with the court and serve a copy on the relocating person and anyone else who has court-ordered time with the children. Service of the *Objection* must be by personal service or by mailing a copy to each person by any form of mail that requires a return receipt. The *Objection* must be filed and served no later than **30 days** after the *Notice of Intent to Move with Children* was received.

Right to move

During the 30 days after the *Notice* was served, the relocating person may not move to a different school district with the children unless they have a court order allowing the move.

After the 30 days, if no *Objection* is filed, the relocating person may move with the children without getting a court order allowing the move.

After the 30 days, if an *Objection* has been filed, the relocating person may move with the children **pending** the final hearing on the *Objection* **unless**:

- The other party gets a court order saying the children cannot move, or
- The other party has scheduled a hearing to take place no more than 15 days after the date the *Objection* was served on the relocating person. (However, the relocating person may ask the court for an order allowing the move even though a hearing is pending if the relocating person believes that they or a child is at unreasonable risk of harm.)

The court may make a different decision about the move at a final hearing on the *Objection*.

Parenting Plan after move

If the relocating person served a proposed *Parenting Plan* with the *Notice*, **and** if no *Objection* is filed within 30 days after the *Notice* was served (or if the parties agree):

- Both parties may follow that proposed plan without being held in contempt of the *Parenting Plan* that was in place before the move. However, the proposed plan cannot be enforced by contempt unless it has been approved by a court.
- Either party may ask the court to approve the proposed plan. Use form *Ex Parte Motion for Final Order Changing Parenting Plan – No Objection to Moving with Children* (FL Relocate 706).

Forms

You can find forms about moving with children at:

- The Washington State Courts' website: www.courts.wa.gov/forms,
- Washington LawHelp: www.washingtonlawhelp.org, or
- The Superior Court Clerk's office or county law library (for a fee).

(This is a summary of the law. The complete law is in RCW 26.09.430 through 26.09.480.)

14. Other

15. Proposal

- Does not apply. This is a court order.
- This is a **proposed** (requested) parenting plan. *(The parent/s requesting this plan must read and sign below.)*

- is an agreement of the parties.
- is presented by me.
- may be signed by the court without notice to me.

- is an agreement of the parties.
- is presented by me.
- may be signed by the court without notice to me.

▶ _____
Other party or lawyer signs here + WSBA #

▶ _____
Other party or Guardian ad Litem signs here

Print Name

Date

Print Name

Date

Washington State Child Support Schedule Worksheets

Proposed by (name) _____ State of WA (CSWP)
 Or, Signed by the Judicial/Reviewing Officer. (CSW)

County _____ Case No. _____

Child/ren and Age/s: _____

Parents' names: _____

	(Column 1)	(Column 2)
	Column 1	Column 2
Part I: Income (see Instructions, page 6)		
1. Gross Monthly Income		
a. Wages and Salaries	\$	\$
b. Interest and Dividend Income	\$	\$
c. Business Income	\$	\$
d. Maintenance Received	\$	\$
e. Other Income	\$	\$
f. Imputed Income	\$	\$
g. Total Gross Monthly Income (add lines 1a through 1f)	\$	\$
2. Monthly Deductions from Gross Income		
a. Income Taxes (Federal and State)	\$	\$
b. FICA (Soc. Sec.+ Medicare)/Self-Employment Taxes	\$	\$
c. State Industrial Insurance Deductions	\$	\$
d. Mandatory Union/Professional Dues	\$	\$
e. Mandatory Pension Plan Payments	\$	\$
f. Voluntary Retirement Contributions	\$	\$
g. Maintenance Paid	\$	\$
h. Normal Business Expenses	\$	\$
i. Total Deductions from Gross Income (add lines 2a through 2h)	\$	\$
3. Monthly Net Income (line 1g minus 2i)	\$	\$
4. Combined Monthly Net Income (add both parents' monthly net incomes from line 3)	\$	
5. Basic Child Support Obligation Number of children: _____ x \$ _____ per child (enter total amount in box →)	\$	

	Column 1	Column 2
6. Proportional Share of Income (divide line 3 by line 4 for each parent)	.	.
Part II: Basic Child Support Obligation (see Instructions, page 7)		
7. Each Parent's Basic Child Support Obligation without consideration of low income limitations. (Multiply each number on line 6 by line 5.)	\$	\$
8. Calculating low income limitations: Fill in only those that apply.		
Self-Support Reserve: (125% of the federal poverty guideline for a one-person family.)	\$	
a. Is Combined Net Income Less Than \$1,000? If yes , for each parent enter the presumptive \$50 per child.	\$	\$
b. Is Monthly Net Income Less Than Self-Support Reserve? If yes , for that parent enter the presumptive \$50 per child.	\$	\$
c. Is Monthly Net Income equal to or more than Self-Support Reserve? If yes , for each parent subtract the self-support reserve from line 3. If that amount is less than line 7, enter that amount or the presumptive \$50 per child, whichever is greater.	\$	\$
9. Each parent's basic child support obligation after calculating applicable limitations. For each parent, enter the lowest amount from line 7, 8a - 8c, but not less than the presumptive \$50 per child.	\$	\$
Part III: Health Care, Day Care, and Special Child Rearing Expenses (see Instructions, page 8)		
10. Health Care Expenses		
a. Monthly Health Insurance Premiums Paid for Child(ren)	\$	\$
b. Uninsured Monthly Health Care Expenses Paid for Child(ren)	\$	\$
c. Total Monthly Health Care Expenses (line 10a plus line 10b)	\$	\$
d. Combined Monthly Health Care Expenses (add both parents' totals from line 10c)	\$	
11. Day Care and Special Expenses		
a. Day Care Expenses	\$	\$
b. Education Expenses	\$	\$
c. Long Distance Transportation Expenses	\$	\$
d. Other Special Expenses (describe)	\$	\$
	\$	\$
	\$	\$
	\$	\$
e. Total Day Care and Special Expenses (add lines 11a through 11d)	\$	\$
12. Combined Monthly Total Day Care and Special Expenses (add both parents' day care and special expenses from line 11e)	\$	
13. Total Health Care, Day Care, and Special Expenses (line 10d plus line 12)	\$	
14. Each Parent's Obligation for Health Care, Day Care, and Special Expenses (multiply each number on line 6 by line 13)	\$	\$

	Column 1	Column 2
Part IV: Gross Child Support Obligation		
15. Gross Child Support Obligation (line 9 plus line 14)	\$	\$
Part V: Child Support Credits (see Instructions, page 9)		
16. Child Support Credits		
a. Monthly Health Care Expenses Credit	\$	\$
b. Day Care and Special Expenses Credit	\$	\$
c. Other Ordinary Expenses Credit (describe)		
	\$	\$
d. Total Support Credits (add lines 16a through 16c)	\$	\$
Part VI: Standard Calculation/Presumptive Transfer Payment (see Instructions, page 9)		
17. Standard Calculation (line 15 minus line 16d or \$50 per child whichever is greater)	\$	\$
Part VII: Additional Informational Calculations		
18. 45% of each parent's net income from line 3 (.45 x amount from line 3 for each parent)	\$	\$
19. 25% of each parent's basic support obligation from line 9 (.25 x amount from line 9 for each parent)	\$	\$
Part VIII: Additional Factors for Consideration (see Instructions, page 9)		
20. Household Assets (List the estimated present value of all major household assets.)		
a. Real Estate	\$	\$
b. Investments	\$	\$
c. Vehicles and Boats	\$	\$
d. Bank Accounts and Cash	\$	\$
e. Retirement Accounts	\$	\$
f. Other (describe)	\$	\$
	\$	\$
21. Household Debt (List liens against household assets, extraordinary debt.)		
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
22. Other Household Income		
a. Income Of Current Spouse or Domestic Partner (if not the other parent of this action) Name _____ Name _____	\$ \$	\$ \$
b. Income Of Other Adults In Household		

	Column 1	Column 2
Name _____	\$	\$
Name _____	\$	\$
c. Gross income from overtime or from second jobs the party is asking the court to exclude per Instructions, page 8 _____	\$	\$
d. Income Of Child(ren) (if considered extraordinary) Name _____	\$	\$
Name _____	\$	\$
e. Income From Child Support Name _____	\$	\$
Name _____	\$	\$
f. Income From Assistance Programs Program _____	\$	\$
Program _____	\$	\$
g. Other Income (describe) _____	\$	\$
_____	\$	\$
23. Non-Recurring Income (describe) _____	\$	\$
_____	\$	\$
24. Monthly Child Support Ordered for Other Children		
Name/age: _____ Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$
Name/age: _____ Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$
Name/age: _____ Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$
25. Other Child(ren) Living In Each Household		
(First name(s) and age(s))		
26. Other Factors For Consideration		

WASHINGTON STATE CHILD SUPPORT SCHEDULE

Including:

- Definitions and Standards
- Instructions
- Economic Table
- Worksheets

Effective Dates:

Definitions & Standards	January 1, 2023
Instructions - only	January 1, 2023
Economic Table	January 1, 2019
Worksheets	January 1, 2023



WASHINGTON
COURTS

ADMINISTRATIVE OFFICE OF THE COURTS

Internet--download forms:

<http://www.courts.wa.gov/>

Child Support Hotline, State DSHS, 1 (800) 442-KIDS

WASHINGTON STATE CHILD SUPPORT SCHEDULE

DEFINITIONS AND STANDARDS

Definitions

Unless the context clearly requires otherwise, these definitions apply to the standards following this section. RCW 26.19.011.

Basic child support obligation: means the monthly child support obligation determined from the economic table based on the parties' combined monthly net income and the number of children for whom support is owed.

Child support schedule: means the standards, economic table, worksheets and instructions, as defined in chapter 26.19 RCW.

Court: means a superior court judge, court commissioner, and presiding and reviewing officers who administratively determine or enforce child support orders.

Deviation: means a child support amount that differs from the standard calculation.

Economic table: means the child support table for the basic support obligation provided in RCW 26.19.020.

Full-time: means the customary number of maximum, non-overtime hours worked in an individual's historical occupation, industry, and labor market. "Full-time" does not necessarily mean hours per week.

Instructions: means the instructions developed by the Administrative Office of the Courts pursuant to RCW 26.19.050 for use in completing the worksheets.

Standards: means the standards for determination of child support as provided in chapter 26.19 RCW.

Standard calculation: means the presumptive amount of child support owed as determined from the child support schedule before the court considers any reasons for deviation.

Support transfer payment: means the amount of money the court orders one parent to pay to another parent or custodian for child support after determination of the standard calculation and deviations. If certain expenses or credits are expected to fluctuate and the order states a formula or percentage to determine the additional amount or credit on an ongoing basis, the term "support transfer payment" does not mean the additional amount or credit.

Worksheets: means the forms developed by the Administrative Office of the Courts pursuant to RCW 26.19.050 for use in determining the amount of child support.

Application Standards

1. **Application of the support schedule:** The child support schedule shall be applied:
 - a. in each county of the state;
 - b. in judicial and administrative proceedings under titles 13, 26 and 74 RCW;
 - c. in all proceedings in which child support is determined or modified;
 - d. in setting temporary and permanent support;
 - e. in automatic modification provisions or decrees entered pursuant to RCW 26.09.100; and
 - f. in addition to proceedings in which child support is determined for minors, to adult children who are dependent on their parents and for whom support is ordered pursuant to RCW 26.09.100.

The provisions of RCW 26.19 for determining child support and reasons for deviation from the standard calculation shall be applied in the same manner by the court, presiding officers and reviewing officers. RCW 26.19.035(1).

2. **Written findings of fact supported by the evidence:** An order for child support shall be supported by written findings of fact upon which the support determination is based and shall include reasons for any deviation from the standard calculation and reasons for denial of a party's request for deviation from the standard calculation. RCW 26.19.035(2).
3. **Completion of worksheets:** Worksheets in the form developed by the Administrative Office of the Courts shall be completed under penalty of perjury and filed in every proceeding in which child support is determined. The court shall not accept incomplete worksheets or worksheets that vary from the worksheets developed by the Administrative Office of the Courts. RCW 26.19.035(3).
4. **Court review of the worksheets and order:** The court shall review the worksheets and the order setting child support for the adequacy of the reasons set forth for any deviation or denial of any request for deviation and for the adequacy of the amount of support ordered. Each order shall state the amount of child support calculated using the standard calculation and the amount of child support actually ordered. Worksheets shall be attached to the decree or order or if filed separately, shall be initialed or signed by the judge and filed with the order. RCW 26.19.035(4).

Income Standards

1. **Consideration of all income:** All income and resources of each parent's household shall be disclosed and considered by the court when the court determines the child support obligation of each parent. Only the income of the parents of the children whose support is at issue shall be calculated for purposes of calculating the basic support obligation. Income and resources of any other person shall not be included in calculating the basic support obligation. RCW 26.19.071(1).
2. **Verification of income:** Tax returns for the preceding two years and current paystubs shall be provided to verify income and deductions. Other sufficient verification shall be required for income and deductions which do not appear on tax returns or paystubs. RCW 26.19.071(2).
3. **Income sources included in gross monthly income:** Monthly gross income shall include income from any source, including: salaries; wages; commissions; deferred compensation; overtime, except as excluded from income in RCW 26.19.071(4)(h); contract-related benefits; income from second jobs except as excluded from income in RCW 26.19.071(4)(h); dividends; interest; trust income; severance pay; annuities; capital gains; pension retirement benefits; workers' compensation; unemployment benefits; maintenance actually received; bonuses; social security benefits; disability insurance benefits; and income from self-employment, rent, royalties, contracts, proprietorship of a business, or joint ownership of a partnership or closely held corporation. RCW 26.19.071(3).

Veterans' disability pensions: Veterans' disability pensions or regular compensation for disability incurred in or aggravated by service in the United States armed forces paid by the Veterans' Administration shall be disclosed to the court. The court may consider either type of compensation as disposable income for purposes of calculating the child support obligation. See RCW 26.19.045.

4. **Income sources excluded from gross monthly income:** The following income and resources shall be disclosed but shall not be included in gross income: income of a new spouse or domestic partner or income of other adults in the household; child support received from other relationships; gifts and prizes; temporary assistance for needy families (TANF); Supplemental Security Income; general assistance; food stamps; and overtime or income from second jobs beyond forty hours per week averaged over a twelve-month period worked to provide for a current family's needs, to retire past relationship debts, or to retire child support debt, when the court finds the income will cease when the party has paid off their debts. Receipt of income and resources from temporary assistance for needy families, Supplemental Security Income, general assistance and food stamps shall not be a reason to deviate from the standard calculation. RCW 26.19.071(4).

VA aid and attendant care: Aid and attendant care payments to prevent hospitalization paid by the Veterans Administration solely to provide physical home care for a disabled veteran, and special compensation paid under 38 U.S.C. Sec. 314(k) through (r) to provide either special care or special aids, or both to assist with routine daily functions shall be disclosed. The court may not include either aid or attendant care or special medical compensation payments in gross income for purposes of calculating the child support obligation or for purposes of deviating from the standard calculation. See RCW 26.19.045.

Other aid and attendant care: Payments from any source, other than veterans' aid and attendance allowance or special medical compensation paid under 38 U.S.C. Sec. 314(k) through (r) for services provided by an attendant in case of a disability when the disability necessitates the hiring of the services or an attendant shall be disclosed but shall not be included in gross income and shall not be a reason to deviate from the standard calculation. RCW 26.19.055.

5. **Determination of net income:** The following expenses shall be disclosed and deducted from gross monthly income to calculate net monthly income: federal and state income taxes (see the following paragraph); federal insurance contributions act deductions (FICA); mandatory pension plan payments; mandatory union or professional dues; state industrial insurance premiums; court-ordered maintenance to the extent actually paid; up to \$5,000 per year in voluntary retirement contributions actually made if the contributions show a pattern of contributions during the one-year period preceding the action establishing the child support order unless there is a determination that the contributions were made for the purpose of reducing child support; and normal business expenses and self-employment taxes for self-employed persons. Justification shall be required for any business expense deduction about which there is a disagreement. Items deducted from gross income shall not be a reason to deviate from the standard calculation. RCW 26.19.071(5).

Allocation of tax exemptions: The parties may agree which parent is entitled to claim the child or children as dependents for federal income tax exemptions. The court may award the exemption or exemptions and order a party to sign the federal income tax dependency exemption waiver. The court may divide the exemptions between the parties, alternate the exemptions between the parties or both. RCW 26.19.100.

6. **Imputation of income:** The court shall impute income to a parent when the parent is voluntarily unemployed or voluntarily underemployed. The court shall determine whether the parent is voluntarily underemployed or voluntarily unemployed based upon that parent's assets, residence, employment and earnings history, job skills, educational attainment, literacy, health and age, criminal record, dependency court obligations, and other employment barriers, record of seeking work, the local job market, the availability of employers willing to hire the parent, the prevailing earnings level in the local community, or any other relevant factors. A court shall not impute income to a parent who is gainfully employed on a full-time basis, unless the court finds that the parent is voluntarily underemployed and finds that the parent is purposely underemployed to reduce the parent's child support obligation. Income shall not be imputed for an unemployable parent. Income shall not be imputed to a parent to the extent the parent is unemployed or significantly underemployed due to the parent's efforts to comply with court-ordered reunification efforts under chapter 13.34 RCW or under a voluntary placement agreement with an agency supervising the child. Except as provided below regarding high school students, in the absence of records of a parent's actual earnings, the court shall impute a parent's income in the following order of priority:

- (a) Full-time earnings at the current rate of pay;
- (b) Full-time earnings at the historical rate of pay based on reliable information, such as employment security department data;
- (c) Full-time earnings at a past rate of pay where information is incomplete or sporadic;
- (d) Earnings of 32 hours per week at minimum wage in the jurisdiction where the parent resides if the parent is on temporary assistance for needy families (TANF) now or recently came off TANF or recently came off aged, blind, or disabled assistance benefits, pregnant women assistance benefits, essential needs and housing support, Supplemental Security Income, or disability, has recently been released from incarceration, or is a recent high school graduate. Imputation of earnings at 32 hours per week under this provision is a rebuttable presumption;
- (e) Full-time earnings at minimum wage in the jurisdiction where the parent resides if the parent has a recent history of minimum wage earnings, has never been employed and has no earnings history, or has no significant earnings history;
- (f) Median net monthly income of year-round full-time workers as derived from the United States Census Bureau, current population reports, or such replacement report as published by the Census Bureau. (See "Approximate Median Net Monthly Income" table on page 7.) RCW 26.19.071(6).

When a parent is currently enrolled in high school full-time, the court shall consider the totality of the circumstances of both parents when determining whether each parent is voluntarily unemployed or voluntarily underemployed. If a parent who is currently enrolled in high school is determined to be voluntarily unemployed or voluntarily underemployed, the court shall impute income at earnings of 20 hours per week at minimum wage in the jurisdiction where that parent resides. Imputation of earnings at 20 hours per week under this provision is a rebuttable presumption.

Allocation Standards

1. **Basic child support:** The basic child support obligation derived from the economic table shall be allocated between the parents based on each parent's share of the combined monthly net income. RCW 26.19.080(1).

2. **Healthcare expenses:** Healthcare costs are not included in the economic table. Monthly healthcare costs shall be shared by the parents in the same proportion as the basic support obligation. Healthcare costs shall include, but not be limited to, medical, dental, orthodontia, vision, chiropractic, mental health treatment, prescription medications, and other similar costs for care and treatment. RCW 26.19.080(2).
3. **Daycare and special child rearing expenses:** Daycare and special child rearing expenses, such as tuition and long distance transportation costs to and from the parents for visitation purposes, are not included in the economic table. These expenses shall be shared by the parents in the same proportion as the basic child support obligation. RCW 26.19.080(3).
4. The court may exercise its discretion to determine the necessity for and the reasonableness of all amounts ordered in excess of the basic child support obligation. RCW 26.19.080(4).

Limitations Standards

1. **Limit at 45% of a parent's net income:** No parent's child support obligation owed for all of their biological or legal children may exceed 45% of net income except for good cause shown.
 - a. Each child is entitled to a pro rata share of the income available for support, but the court only applies the pro rata share to the children in the case before the court.
 - b. Before determining whether to apply the 45% limitation, the court must consider the best interests of the children and the circumstances of each parent. Such circumstances include, but are not limited to, leaving insufficient funds in the custodial parent's household to meet the basic needs of the children, comparative hardship to the affected households, assets or liabilities, and any involuntary limits on any parent's earning capacity including incarceration, disabilities, or incapacity.
 - c. Good cause includes, but is not limited to, possession of substantial wealth, children with daycare expenses, special medical need, educational need, psychological need, and larger families. RCW 26.19.065(1).
2. **Presumptive minimum support obligation:** When a parent's monthly net income is below 125% of the federal poverty guideline for a one-person family, a support order of not less than \$50 per child per month shall be entered unless the obligor parent establishes that it would be unjust to do so in that particular case. The decision whether there is a sufficient basis to go below the presumptive minimum payment must take into consideration the best interests of the children and circumstances of each parent. Such circumstances can include leaving insufficient funds in the custodial parent's household to meet the basic needs of the children, comparative hardship to the affected households, assets or liabilities, and earning capacity. RCW 26.19.065(2)(a).
3. **Self-support reserve:** The basic support obligation of the parent making the transfer payment, excluding healthcare, daycare, and special child-rearing expenses, shall not reduce their net income below the self-support reserve of 125% of the federal poverty level for a one-person family, except for the presumptive minimum payment of \$50 per child per month or when it would be unjust to apply the self-support reserve limitation after considering the best interests of the children and the circumstances of each parent. Such circumstances include, but are not limited to, leaving insufficient funds in the custodial parent's household to meet the basic needs of the children, comparative hardship to the affected households, assets or liabilities, and earning capacity. This section shall not be construed to require monthly substantiation of income.

(See the Self-Support Reserve memorandum on the courts' website www.courts.wa.gov/forms and at www.WashingtonLawHelp.org.) RCW 26.19.065(2)(b).

4. **Income above \$12,000:** The economic table is presumptive for combined monthly net incomes up to and including \$12,000. When combined monthly net income exceeds \$12,000; the court may exceed the maximum presumptive amount of support upon written findings of fact. RCW 26.19.065(3).

Deviation Standards

1. Reasons for deviation from the standard calculation include but are not limited to the following:
 - a. **Sources of income and tax planning:** The court may deviate from the standard calculation after consideration of the following:
 - i. Income of a new spouse or new domestic partner if the parent who is married to the new spouse or the parent who is in a domestic partnership with the new domestic partner is asking for a deviation based on any other reason. Income of a new spouse or domestic partner is not, by itself, a sufficient reason for deviation;
 - ii. Income of other adults in the household if the parent who is living with the other adult is asking for a deviation based on any other reason. Income of the other adults in the household is not, by itself, a sufficient reason for deviation;
 - iii. Child support actually received from other relationships;
 - iv. Gifts;
 - v. Prizes;
 - vi. Possession of wealth, including but not limited to savings, investments, real estate holdings and business interests, vehicles, boats, pensions, bank accounts, insurance plans or other assets;
 - vii. Extraordinary income of a child; or
 - viii. Tax planning considerations. A deviation for tax planning may be granted only if children would not receive a lesser economic benefit due to the tax planning;
 - ix. Income that has been excluded under RCW 26.19.071(4)(h) if the person earning that income asks for a deviation for any other reason. RCW 26.19.075(1)(a).
 - b. **Nonrecurring income:** The court may deviate from the standard calculation based on a finding that a particular source of income included in the calculation of the basic support obligation is not a recurring source of income. Depending on the circumstances, nonrecurring income may include overtime, contract-related benefits, bonuses or income from second jobs. Deviations for nonrecurring income shall be based on a review of the nonrecurring income received in the previous two calendar years. RCW 26.19.075(1)(b).
 - c. **Debt and high expenses:** The court may deviate from the standard calculation after consideration of the following expenses:
 - i. Extraordinary debt not voluntarily incurred;
 - ii. A significant disparity in the living costs of the parents due to conditions beyond their control;
 - iii. Special needs of disabled children; or
 - iv. Special medical, educational or psychological needs of the children.

- v. Costs anticipated to be incurred by the parents in compliance with court-ordered reunification efforts under chapter 13.34 RCW or under a voluntary placement agreement with an agency supervising the child. RCW 26.19.075(1)(c).
- d. **Residential schedule:** The court may deviate from the standard calculation if the children spend(s) a significant amount of time with a parent who is obligated to make a support transfer payment. The court may not deviate on that basis if the deviation will result in insufficient funds in the household receiving the support to meet the basic needs of the child or if the child is receiving temporary assistance for needy families (TANF). When determining the amount of the deviation, the court shall consider evidence concerning the increased expenses to a parent making support transfer payments resulting from the significant amount of time spent with that parent and shall consider the decreased expenses, if any, to the party receiving the support resulting from the significant amount of time the child spends with the parent making the support transfer payment. RCW 26.19.075(1)(d).
- e. **Children from other relationships:** The court may deviate from the standard calculation when any or all of the parents before the court have children from other relationships to whom the parent owes a duty of support.
 - i. The child support schedule shall be applied to the parents and children of the family before the court to determine the presumptive amount of support.
 - ii. Children from other relationships shall not be counted in the number of children for purposes of determining the basic support obligation and the standard calculation.
 - iii. When considering a deviation from the standard calculation for children from other relationships, the court may consider only other children to whom the parent owes a duty of support. The court may consider court-ordered payments of child support for children from other relationships only to the extent that the support is actually paid.
 - iv. When the court has determined that any or all parents have children from other relationships, deviations under this section shall be based on consideration of the total circumstances of both households. All child support obligations paid, received, and owed for all children shall be disclosed and considered. RCW 26.19.075(1)(e).
- 2. All income and resources of the parties before the court, new spouses or domestic partners, and other adults in the household shall be disclosed and considered as provided. The presumptive amount of support shall be determined according to the child support schedule. Unless specific reasons for deviation are set forth in the written findings of fact and are supported by the evidence, the court shall order each parent to pay the amount of support determined by using the standard calculation. RCW 26.19.075(2).
- 3. The court shall enter findings that specify reasons for any deviation or any denial of a party's request for any deviation from the standard calculation made by the court. The court shall not consider reasons for deviation until the court determines the standard calculation for each parent. RCW 26.19.075(3).
- 4. When reasons exist for deviation, the court shall exercise discretion in considering the extent to which the factors would affect the support obligation. RCW 26.19.075(4).
- 5. Agreement of the parties is not by itself adequate reason for any deviations from the standard calculations. RCW 26.19.075(5).

Benefits paid that apply toward a person's child support obligation

If an injured worker, person with disabilities, deceased person, retired person, or veteran who owes a child support obligation receives one of these benefits:

- Department of Labor and Industries payments
- Self-Insurer's payment
- Social Security Administration:
 - Social Security disability dependency benefits
 - Retirement benefits
 - Survivors insurance benefits
- Veteran's Administration benefits

and shows that the child or the child's household receives a payment from those benefits, then, the amount of the payment made on behalf of the child or on account of the child applies toward the person's child support obligation for the same period covered by the benefit.

Post-Secondary Education Standards

1. The child support schedule shall be advisory and not mandatory for post-secondary educational support. RCW 26.19.090(1).
2. When considering whether to order support for post-secondary educational expenses, the court shall determine whether the child is in fact dependent and is relying upon the parents for the reasonable necessities of life. The court shall exercise its discretion when determining whether and for how long to award post-secondary educational support based upon consideration of factors that include but are not limited to the following: age of the child; the child's needs; the expectations of the parties for their children when the parents were together; the children's prospects, desires, aptitudes, abilities or disabilities; the nature of the post-secondary education sought and the parent's level of education, standard of living and current and future resources. Also to be considered are the amount and type of support that the child would have been afforded if the parents had stayed together. RCW 26.19.090(2).
3. The child must enroll in an accredited academic or vocational school, must be actively pursuing a course of study commensurate with the child's vocational goals and must be in good academic standing as defined by the institution. The court-ordered post-secondary educational support shall be automatically suspended during the period or periods the child fails to comply with these conditions. RCW 26.19.090(3).
4. The child shall also make available all academic records and grades to both parents as a condition of receiving post-secondary educational support. Each parent shall have full and equal access to the post-secondary education records as provided by statute (RCW 26.09.225). RCW 26.19.090(4).
5. The court shall not order the payment of post-secondary educational expenses beyond the child's 23rd birthday, except for exceptional circumstances, such as mental, physical, or emotional disabilities. RCW 26.19.090(5).
6. The court shall direct that any or all parents' payments for post-secondary educational expenses are made directly to the educational institution if feasible. If direct payments are not feasible, then the court in its discretion may order that any or all parents' payments are made directly to the child if the child does not reside with any parent. If the child resides with one of the parents, the court may direct that the parent making the support transfer payments make the payments to the child or to the parent who has been receiving the support transfer payments. RCW 26.19.090(6).

WASHINGTON STATE CHILD SUPPORT SCHEDULE INSTRUCTIONS FOR WORKSHEETS

Two parent families should use WSCSS – Worksheets 2. For families with three legal parents, use WSCSS – Worksheets 3. For families with more than three legal parents, you will need to create your own worksheets.

Worksheets:

Immediately below the form title, check the box showing if the worksheets are proposed or an order signed by the judge. If they are proposed, check the box showing who proposed them and put your name.

Fill in your county, the case number, and the names and ages of only those children whose support is at issue.

Write your name above **Column 1** and write the other parent's name above **Column 2** (and **Column 3** if applicable). In the rest of the worksheet, list your information under **Column 1** and list the other parent's information under **Column 2** (and **Column 3** if applicable).

Part I: Income

Pursuant to **INCOME STANDARD #1: Consideration of all income**, "only the income of the parents of the children whose support is at issue shall be calculated for purposes of calculating the basic support obligation." (See page 1.)

Pursuant to **INCOME STANDARD #2: Verification of income**, "tax returns for the preceding two years and current paystubs are required for income verification purposes. Other sufficient verification shall be required for income and deductions which do not appear on tax returns or paystubs." (See page 1.)

Gross Monthly Income

Gross monthly income is defined under **INCOME STANDARD #3: Income sources included in gross monthly income**. (See page 1.)

Income exclusions are defined under **INCOME STANDARD #4: Income sources excluded from gross monthly income**. (See page 2.) Excluded income must be disclosed and listed in Part VIII of the worksheets.

Monthly Average of Income:

- If income varies during the year, divide the annual total of the income by 12.
- If paid weekly, multiply the weekly income by 52 and divide by 12.
- If paid every other week, multiply the two-week income by 26 and divide by 12.
- If paid twice a month (bi-monthly), multiply the bi-monthly income by 24 and divide by 12

LINE 1a, Wages and Salaries: Enter the average monthly total of all salaries, wages, contract-related benefits, bonuses, and income from overtime and second jobs that is not excluded from income by RCW 26.19.071(4)(i).

LINE 1b, Interest and Dividend Income: Enter the average monthly total of dividends and interest income.

LINE 1c, Business Income: Enter the average monthly income from self-employment, rent, royalties, contracts, proprietorship of a business, or joint ownership of a partnership or closely held corporation.

LINE 1d, Maintenance Received: Enter the monthly amount of maintenance actually received.

LINE 1e, Other Income: Enter the average monthly total of other income. (Other income includes, but is not limited to: income tax refunds, trust income, severance pay, annuities, capital gains, pension retirement benefits, workers compensation, unemployment benefits, social security benefits and disability insurance benefits.)

LINE 1f, Imputed Income: Enter the imputed gross monthly income for a parent who is voluntarily unemployed, underemployed or if you do not have records of a parent's actual earnings. Refer to "INCOME STANDARD #6: Imputation of income." (See page 2.) Impute income using the first method possible based on the information you have in the following order:

Calculate full-time earnings using either:

1. Current rate of pay;
2. Historical rate of pay based on reliable information;
3. Past rate of pay, if current information is incomplete or sporadic;
4. Earnings of 32 hours per week at minimum wage where the parent lives if the parent is on TANF now or recently came off government assistance, is recently released from incarceration, or is a recent high school graduate (if currently enrolled in high school and voluntarily unemployed or underemployed, impute income at 20 hours per week at minimum wage where the parent lives); or
5. Minimum wage where the parent lives when the parent has a history of minimum wage, has never been employed, or has no significant earnings history.

Historical rate of pay information may be available from the Division of Child Support. Use form 18-701: "Request for Income Information for Purposes of Entering a Child Support Order", available online at: <http://www.dshs.wa.gov/dcs/Resources/Forms.asp> employed, or has no significant earnings history.

If you impute income using one of the five methods, above, enter the amount in line 1f. Also, in line 26 of the Worksheets, explain which method you used to impute income and how you calculated the amount of imputed income.

If you cannot use any of the above methods, impute the parent’s net monthly income using the table below, and enter the appropriate amount for the parent’s age and gender on **line 1f and on line 3**. The table, below, shows net income, after deductions. So if you impute using this table, you will not enter any deductions on the worksheet under line 2. Leave lines 2a through 2i blank. For this parent, go to line 4.

Also, in line 26 of the Worksheets, explain that net income was imputed using the Approximate Median Net Monthly Income Table.

Approximate Median Net Monthly Income

MALE	age	FEMALE
\$2,339	15-24	\$2,234
\$3,703	25-34	\$3,542
\$4,851	35-44	\$4,008
\$5,102	45-54	\$4,067
\$5,000	55-64	\$4,107
\$5,982	65 +	\$4,334

U.S. Census Bureau, Current Population Survey, 2021 Annual Social and Economic Supplement, Table PINC-01. Selected Characteristics of People 15 Years Old and Over by Total Money Income in 2020, Work Experience in 2020, Race, Hispanic Origin, and Sex, Worked Full Time, Year Round.

[Net income has been determined by subtracting FICA (7.65%) and the tax liability for a single person (one withholding allowance).]

LINE 1g, Total Gross Monthly Income: Add the monthly income amounts for each parent (lines 1a through 1f) and enter the totals on line 1g.

Monthly Deductions from Gross Income

Allowable monthly deductions from gross income are defined under INCOME STANDARD #5: Determination of net income. (See page 2.)

Monthly Average of Deductions: If a deduction is annual or varies during the year, divide the annual total of the deduction by 12 to determine a monthly amount.

LINE 2a, Income Taxes: Enter the net monthly amount actually owed for state and federal income taxes. (The amount of income tax withheld on a paycheck may not be the actual amount of income tax owed due to tax refunds, deductions, etc. It is appropriate to consider tax returns from prior years as indicating the actual amount of income tax owed if income has not changed.)

LINE 2b, FICA/Self Employment Taxes: Enter the total monthly amount of FICA, Social Security, Medicare and Self-employment taxes owed.

LINE 2c, State Industrial Insurance Deductions: Enter the monthly amount of state industrial insurance deductions such as Medical Aid Fund Tax, Accident Fund Tax, and Supplement Pension Fund Tax. Self-insured employers may use different terms for the deductions.

LINE 2d, Mandatory Union/Professional Dues: Enter the monthly cost of mandatory union or professional dues.

LINE 2e, Mandatory Pension Plan Payments: Enter the monthly cost of mandatory pension plan payments amount.

LINE 2f, Voluntary Retirement Contributions: Enter the monthly cost of voluntary Retirement Contributions. Divide the amount of the voluntary retirement contribution, up to \$5,000 per year, by 12 to calculate the monthly cost. (For more information regarding limitations on the allowable deduction of voluntary retirement contributions, refer to INCOME STANDARD #5: Determination of net income. See page 2.)

LINE 2g, Maintenance Paid: Enter the monthly amount of maintenance actually paid pursuant to a court order.

LINE 2h, Normal Business Expenses: If self-employed, enter the amount of normal business expenses. (Pursuant to INCOME STANDARD #5: Determination of net income, “justification shall be required for any business expense deduction about which there is a disagreement.” See page 2.)

LINE 2i, Total Deductions From Gross Income: Add the monthly deductions for each parent (lines 2a through 2h) and enter the totals on line 2i.

LINE 3, Monthly Net Income: For each parent, subtract total deductions (line 2i) from total gross monthly income (line 1g) and enter these amounts on line 3.

LINE 4, Combined Monthly Net Income: Add the parents’ monthly net incomes (line 3) and enter the total on line 4.

LINE 5, Basic Child Support Obligation: In the work area provided on line 5, enter the basic support obligation amount determined for each child. Add these amounts together and enter the total in the box on line 5. (To determine a per child basic support obligation, see the following economic table instructions.)

Economic Table Instructions

To use the Economic Table to determine an individual support amount for each child:

- Locate in the left-hand column the combined monthly net income amount closest to the amount entered on line 4 of Worksheet (round up when the combined monthly net income falls halfway between the two amounts in the left-hand column);

- Locate on the top row the family size for the number of children for whom child support is being determined (when determining family size for the required worksheets, do not include children from other relationships) and circle the number in the column below the family size that is across from the net income. The amount circled is the basic support amount for each child.

LINE 6, Proportional Share of Income: Divide the monthly net income for each parent (line 3) by the combined monthly net income (line 4) and enter these amounts on line 6. (The entries on line 6 when added together should equal 1.00.)

Part II: Basic Child Support Obligation

LINE 7, Each Parent’s Basic Child Support Obligation without consideration of low income limitations: Multiply the total basic child support obligation (amount in box on line 5) by the income share proportion for each parent (line 6) and enter these amounts on line 7. (The amounts entered on line 7 added together should equal the amount entered on line 5.)

LINE 8, Calculating low income limitations: Fill in only those that apply:

To calculate the low-income limitation standards in lines 8b and 8c, you will need to know the self-support reserve amount, which is 125% of the current federal poverty guideline for a one-person family. As of January 15, 2022, the self-support reserve is \$1,416. The guideline and self-support reserve change roughly annually. To check the current self-support reserve amount go to the court’s web site at: www.courts.wa.gov, or go to www.WashingtonLawHelp.org. Enter the self-support reserve amount in the space provided in line 8. (For more information, see Limitation Standard #2 on page 3 of the Definitions and Standards.)

8a. Is combined net income less than \$1,000? If combined net monthly income on line 4 is less than \$1,000, enter each parent’s presumptive support obligation of \$50 per child. Do **not** enter an amount on line 8a if combined income on line 4 is more than \$1,000.

8b. Is monthly net income less than self-support reserve? For each parent whose monthly net income on line 3 is less than the self-support reserve, enter the parent’s presumptive support obligation of \$50 per child. Do **not** use this box for a parent whose net income on line 3 is greater than the self-support reserve.

8c. Is monthly net income equal to or more than self-support reserve? Subtract the self-support reserve from line 3 and enter this amount or enter \$50 per child whichever is greater. Do not use this box if the amount is greater than the amount in line 7.

LINE 9, Each parent’s basic child support obligation after calculating applicable limitations: For each parent, enter the lowest amount from line 7, 8a – 8c, but not less than the presumptive \$50 per child.

Part III: Healthcare, Daycare, and Special Child Rearing Expenses

Pursuant to **ALLOCATION STANDARD #4:** “the court may exercise its discretion to determine the necessity for and the reasonableness of all amounts ordered in excess of the basic child support obligation.” (See page 2.)

Pursuant to **ALLOCATION STANDARD #2:** Healthcare expenses and #3: Daycare and special child rearing expenses, healthcare, daycare, and special child rearing expenses shall be shared by the parents in the same proportion as the basic support obligation. (See page 2.) **NOTE:** The court order should reflect that healthcare, daycare and special child rearing expenses not listed should be apportioned by the same percentage as the basic child support obligation.

Monthly Average of Expenses: If a healthcare, daycare, or special child rearing expense is annual or varies during the year, divide the annual total of the expense by 12 to determine a monthly amount.

Healthcare Expenses

LINE 10a, Monthly Health Insurance Premiums Paid For Children: List the monthly amount paid by each parent for healthcare insurance for the children of the relationship. (When determining an insurance premium amount, do not include the portion of the premium paid by an employer or other third party and/or the portion of the premium that covers the parent or other household members.)

LINE 10b, Uninsured Monthly Healthcare Expenses Paid For Children: List the monthly amount paid by each parent for the children’s healthcare expenses not reimbursed by insurance.

LINE 10c, Total Monthly Healthcare Expenses: For each parent add the health insurance premium payments (line 10a) to the uninsured healthcare payments (line 10b) and enter these amounts on line 10c

LINE 10d, Combined Monthly Healthcare Expenses: Add the parents’ total healthcare payments (line 10c) and enter this amount on line 10d.

Daycare and Special Expenses

LINE 11a, Daycare Expenses: Enter average monthly day care costs.

LINE 11b, Education Expenses: Enter the average monthly costs of tuition and other related educational expenses.

LINE 11c, Long Distance Transportation Expenses: Enter the average monthly costs of long distance travel incurred pursuant to the residential or visitation schedule.

LINE 11d, Other Special Expenses: Identify any other special expenses and enter the average monthly cost of each.

LINE 12, Combined Monthly Total of Daycare and Special Expenses: Add the parents' total expenses (line 11e) and enter this total on line 12.

LINE 13, Total Healthcare, Daycare and Special Expenses: Add the healthcare expenses (line 10d) to the combined monthly total of daycare and special expenses (line 12) and enter this amount on line 13.

LINE 14, Each Parent's Obligation For Healthcare, Daycare And Special Expenses: Multiply the total healthcare, daycare, and special expense amount (line 13) by the income proportion for each parent (line 6) and enter these amounts on line 14.

LINE 15, Gross Child Support Obligation: For each parent, add the basic child support obligation (line 9) to the obligation for extraordinary healthcare, daycare and special expenses (line 14). Enter these amounts on line 15.

Part V: Child Support Credits

Child support credits are provided in cases where parents make direct payments to third parties for the cost of goods and services which are included in the standard calculation support obligation (e.g., payments to an insurance company or a daycare provider).

LINE 16a, Monthly Healthcare Expenses Credit: Enter the total monthly healthcare expenses amounts from line 10c for each parent.

LINE 16b, Daycare And Special Expenses Credit: Enter the total daycare and special expenses amounts from line 11e for each parent.

LINE 16c, Other Ordinary Expense Credit: If approval of another ordinary expense credit is being requested, in the space provided, specify the expense and enter the average monthly cost in the column of the parent to receive the credit. (It is generally assumed that ordinary expenses are paid in accordance with the children's residence. If payment of a specific ordinary expense does not follow this assumption, the parent paying for this expense may request approval of an ordinary expense credit. This credit is discretionary with the court.)

LINE 16d, Total Support Credits: For each parent, add the entries on lines 16 a through c and enter the totals on line 16d.

Part VI: Standard Calculation/Presumptive Transfer Payment

LINE 17, For Each Parent: subtract the total support credits (line 16d) from the gross child support obligation (line 15) and enter the resulting amounts on line 17. If the amount is less than \$50 per child for any parent, then enter the presumptive minimum support obligation of \$50 per child, instead of the lower amount.

Part VII: Additional Informational Calculations

LINE 18, 45% of Each Parent's Net Income From Line 3: For each parent, multiply line 3 by .45. Refer to LIMITATIONS Standards #1: Limit at 45% of a parent's net income.

LINE 19, 25% of Each Parent's Basic Support Obligation from Line 9: For each parent, multiply line 9 by .25.

Part VIII: Additional Factors for Consideration

Pursuant to INCOME STANDARD #1: Consideration of all income: "all income and resources of each parent's household shall be disclosed and considered by the court when the court determines the child support obligation of each parent." (See page 1.)

LINE 20 a-h, Household Assets: Enter the estimated present value of assets of the household.

LINE 21, Household Debt: Describe and enter the amount of liens against assets owned by the household and/or any extraordinary debt.

Other Household Income

LINE 22a, Income of Current Spouse or Domestic Partner: If a parent is currently married to or in a domestic partnership with someone other than the parent of the children for whom support is being determined, list the name and enter the income of the present spouse or domestic partner.

LINE 22b, Income of Other Adults In The Household: List the names and enter the incomes of other adults residing in the household.

LINE 22c, Gross income from overtime or from second jobs the party is asking the court to exclude per INCOME STANDARD #4, Income sources excluded from gross monthly income (see page 2).

LINE 22d, Income of Children: If the amount is considered to be extraordinary, list the name and enter the income of children residing in the home.

LINE 22e, Income from Child Support: List the name of the children for whom support is received and enter the amount of the support income. Do not include the children for whom support is being determined.

LINE 22f, Income from Assistance Programs: List the program and enter the amount of any income received from assistance programs. (Assistance programs include, but are not limited to: Temporary Assistance for Needy Families (TANF), SSI, general assistance, food stamps and aid, and attendance allowances.)

LINE 22g, Other Income: Describe and enter the amount of any other income of the household. (Include income from gifts and prizes on this line.)

LINE 23, Nonrecurring Income: Describe and enter the amount of any income included in the calculation of gross income (LINE 1g) which is nonrecurring. (Pursuant to DEVIATION STANDARD #1b: Nonrecurring income, “depending on the circumstances, nonrecurring income may include overtime, contract-related benefits, bonuses or income from second jobs.” See page 3.)

LINE 24, Monthly Child Support Ordered for Other Children. List the names and ages and enter the amount of child support owed for other children, (not the children for whom support is being determined). Is the support paid? Check Yes or No.

LINE 25, Other Children Living in Each Household: List the names and ages of children, other than those for whom support is being determined, who are living in each household.

LINE 26, Other Factors For Consideration: In the space provided list any other factors that should be considered in determining the child support obligation. (For information regarding other factors for consideration, refer to DEVIATION STANDARDS. See page 3.) Also use this space to explain how you calculated the income and deductions in lines 1 and 2.

Guardianship Cases: When the children do not reside with any parent, the household income and resources of the children’s custodian(s) should be listed on line 26.

**Washington State Child Support Schedule
Economic Table**

Monthly Basic Support Obligation
Per Child

Combined Monthly Net Income	One Child Family	Repeat column heading			
		Two Children Family	Three Children Family	Four Children Family	Five Children Family
1000	216	167	136	114	100
1100	238	184	150	125	110
1200	260	200	163	137	120
1300	281	217	177	148	130
1400	303	234	191	160	141
1500	325	251	204	171	151
1600	346	267	218	182	161
1700	368	284	231	194	171
1800	390	301	245	205	180
1900	412	317	258	216	190
2000	433	334	271	227	200
2100	455	350	285	239	210
2200	477	367	298	250	220
2300	499	384	311	261	230
2400	521	400	325	272	239
2500	543	417	338	283	249
2600	565	433	351	294	259
2700	587	450	365	305	269
2800	609	467	378	317	279
2900	630	483	391	328	288
3000	652	500	405	339	298
3100	674	516	418	350	308
3200	696	533	431	361	318
3300	718	550	444	372	328
3400	740	566	458	384	337
3500	762	583	471	395	347
3600	784	599	484	406	357
3700	803	614	496	416	366
3800	816	624	503	422	371
3900	830	634	511	428	377
4000	843	643	518	434	382
4100	857	653	526	440	388
4200	867	660	531	445	392
4300	877	668	537	450	396
4400	887	675	543	455	400
4500	896	682	548	459	404
4600	906	689	554	464	408
4700	916	697	559	469	412
4800	927	705	566	474	417
4900	939	714	573	480	422
5000	951	723	580	486	428

For income less than \$1,000, the obligation is based upon the resources and living expenses of each household.
Minimum support shall not be less than \$50 per child per month except when allowed by RCW 26.19.065(2).

5100	963	732	587	492	433
5200	975	741	594	498	438
5300	987	750	602	504	443
5400	999	759	609	510	449
5500	1011	768	616	516	454
5600	1023	777	623	522	459
5700	1030	782	627	525	462
5800	1036	786	630	528	465
5900	1042	791	634	531	467
6000	1048	795	637	534	470
6100	1054	800	641	537	472
6200	1061	804	644	540	475
6300	1067	809	648	543	477
6400	1073	813	651	545	480
6500	1081	819	656	549	483
6600	1096	830	665	557	490
6700	1111	842	674	564	497
6800	1126	853	683	572	503
6900	1141	864	692	579	510
7000	1156	875	701	587	516
7100	1170	886	710	594	523
7200	1185	898	719	602	530
7300	1200	909	727	609	536
7400	1212	918	734	615	541
7500	1222	925	740	620	545
7600	1231	932	745	624	549
7700	1241	939	751	629	554
7800	1251	946	756	634	558
7900	1261	953	762	638	562
8000	1270	960	767	643	566
8100	1280	968	773	647	570
8200	1290	975	778	652	574
8300	1299	981	783	656	577
8400	1308	987	788	660	581
8500	1316	994	793	664	584
8600	1325	1000	797	668	588
8700	1334	1007	802	672	591
8800	1343	1013	807	676	595
8900	1352	1019	812	680	599
9000	1361	1026	817	684	602
9100	1370	1032	822	689	606
9200	1379	1040	828	694	611
9300	1387	1047	835	699	616
9400	1396	1055	841	705	620
9500	1405	1062	848	710	625
9600	1414	1069	854	716	630
9700	1423	1077	861	721	635
9800	1432	1084	867	727	639
9900	1441	1092	874	732	644
10000	1451	1099	879	737	648
10100	1462	1107	885	741	652

10200	1473	1114	890	745	656
10300	1484	1122	895	750	660
10400	1495	1129	900	754	664
10500	1507	1136	906	759	668
10600	1518	1144	911	763	672
10700	1529	1151	916	767	675
10800	1539	1159	921	772	679
10900	1542	1161	924	774	681
11000	1545	1164	926	776	683
11100	1548	1166	928	778	684
11200	1551	1169	931	780	686
11300	1554	1172	933	782	688
11400	1556	1174	936	784	690
11500	1559	1177	938	786	692
11600	1562	1179	940	788	693
11700	1565	1182	943	790	695
11800	1568	1184	945	792	697
11900	1571	1187	948	794	699
12000	1573	1190	950	796	700

The economic table is presumptive for combined monthly net incomes up to and including \$12,000. When combined monthly net income exceeds \$12,000, the court may exceed the maximum presumptive amount of support upon written findings of fact.

Superior Court of Washington, County of _____

In re:

Petitioner/s *(person/s who started this case)*:

And Respondent/s *(other party/parties)*:

No.

Child Support Order

Temporary (TMORS)

Final (ORS)

Clerk's action required: WSSR, 1

Child Support Order

1. Money Judgment Summary

No money judgment is ordered.

Summarize any money judgments from section **23** in the table below.

Judgment for	Debtor's name <i>(person who must pay money)</i>	Creditor's name <i>(person who must be paid)</i>	Amount	Interest
Past due child support from _____ to _____			\$	\$
Past due medical support from _____ to _____			\$	\$
Past due children's exp. from _____ to _____			\$	\$
Other amounts <i>(describe)</i> :			\$	\$
Yearly Interest Rate for child support, medical support, and children's expenses: 12%.				
For other judgments: _____ % <i>(12% unless otherwise listed)</i>				
Lawyer (name):		Represents <i>(name)</i> :		
Lawyer (name):		Represents <i>(name)</i> :		

➤ **Findings and Orders**

2. The court orders child support as part of this family law case. This is a (*check one*):
 temporary order. final order.
3. The *Child Support Schedule Worksheets* attached or filed separately are approved by the court and made part of this order.

4. **Parents' contact and employment information**

Each parent must fill out and file with the court a *Confidential Information* form (FL All Family 001) including personal identifying information, mailing address, home address, and employer contact information.

Important! If you move or get a new job any time while support is still owed, you must:

- Notify the Support Registry, and
- Fill out and file an updated *Confidential Information* form with the court.

Warning! Any notice of a child support action delivered to the last address you provided on the *Confidential Information* form will be considered adequate notice, if the party trying to serve you has shown diligent efforts to locate you.

5. **Parents' Income**

<p>Parent (name): _____</p> <p>Net monthly income \$ _____ <small>(line 3 of the Worksheets)</small></p> <p>This income is (<i>check one</i>): <input type="checkbox"/> imputed to this parent. (<i>Skip to 6.</i>) <input type="checkbox"/> this parent's actual income <small>(after any exclusions approved below).</small></p> <p>Does this parent have income from overtime or a second job? <input type="checkbox"/> No. (<i>Skip to 6.</i>) <input type="checkbox"/> Yes. (<i>Fill out below.</i>)</p> <p>Should this income be excluded? (<i>check one</i>): <input type="checkbox"/> No. The court has included this income in this parent's gross monthly income on line 1 of the <i>Worksheets</i>. <input type="checkbox"/> Yes. This income should be excluded because: <ul style="list-style-type: none"> ▪ This parent worked over 40 hours per week averaged over 12 months, and ▪ That income was earned to pay for <input type="checkbox"/> current family needs <input type="checkbox"/> debts from a past relationship <input type="checkbox"/> child support debt, and ▪ This parent will stop earning this extra income after paying these debts. </p>	<p>Parent (name): _____</p> <p>Net monthly income \$ _____ <small>(line 3 of the Worksheets)</small></p> <p>This income is (<i>check one</i>): <input type="checkbox"/> imputed to this parent. (<i>Skip to 6.</i>) <input type="checkbox"/> this parent's actual income <small>(after any exclusions approved below).</small></p> <p>Does this parent have income from overtime or a second job? <input type="checkbox"/> No. (<i>Skip to 6.</i>) <input type="checkbox"/> Yes. (<i>Fill out below.</i>)</p> <p>Should this income be excluded? (<i>check one</i>): <input type="checkbox"/> No. The court has included this income in this parent's gross monthly income on line 1 of the <i>Worksheets</i>. <input type="checkbox"/> Yes. This income should be excluded because: <ul style="list-style-type: none"> ▪ This parent worked over 40 hours per week averaged over 12 months, and ▪ That income was earned to pay for <input type="checkbox"/> current family needs <input type="checkbox"/> debts from a past relationship <input type="checkbox"/> child support debt, and ▪ This parent will stop earning this extra income after paying these debts. </p>
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Parent (name): _____ The court has excluded \$ _____ from this parent's gross monthly income on line 1 of the <i>Worksheets</i> . <input type="checkbox"/> Other findings: _____ _____ _____ _____	Parent (name): _____ The court has excluded \$ _____ from this parent's gross monthly income on line 1 of the <i>Worksheets</i> . <input type="checkbox"/> Other findings: _____ _____ _____ _____
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6. Imputed Income

To calculate child support, the court may **impute** income to a parent:

- whose income is unknown, or
- who the court finds is unemployed or under-employed by choice.

Imputed income is not actual income. It is an assigned amount the court finds a parent could or should be earning. (RCW 26.19.071(6))

Parent (name): _____ <input type="checkbox"/> Does not apply. This parent's actual income is used. (<i>Skip to 7.</i>) <input type="checkbox"/> This parent's monthly net income is imputed because (<i>check one</i>): <input type="checkbox"/> this parent's income is unknown. <input type="checkbox"/> this parent is voluntarily unemployed. <input type="checkbox"/> this parent is voluntarily under-employed. <input type="checkbox"/> this parent works full-time but is purposely under-employed to reduce child support. <input type="checkbox"/> this parent is currently enrolled in high school full-time and is voluntarily unemployed or under-employed. The imputed amount is based on the information below: (<i>Options are listed in order of required priority. The court used the first option possible based on the information it had unless a presumed option was rebutted.</i>) <input type="checkbox"/> Pay for 20 hours per week at the minimum wage where this parent lives because this parent is enrolled in high school full-time and is voluntarily unemployed or under-employed. <input type="checkbox"/> Full-time pay at current pay rate. <input type="checkbox"/> Full-time pay based on reliable information about past earnings. <input type="checkbox"/> Full-time pay based on incomplete or	Parent (name): _____ <input type="checkbox"/> Does not apply. This parent's actual income is used. (<i>Skip to 7.</i>) <input type="checkbox"/> This parent's monthly net income is imputed because (<i>check one</i>): <input type="checkbox"/> this parent's income is unknown. <input type="checkbox"/> this parent is voluntarily unemployed. <input type="checkbox"/> this parent is voluntarily under-employed. <input type="checkbox"/> this parent works full-time but is purposely under-employed to reduce child support. <input type="checkbox"/> this parent is currently enrolled in high school full-time and is voluntarily unemployed or under-employed. The imputed amount is based on the information below: (<i>Options are listed in order of required priority. The court used the first option possible based on the information it had unless a presumed option was rebutted.</i>) <input type="checkbox"/> Pay for 20 hours per week at the minimum wage where this parent lives because this parent is enrolled in high school full-time and is voluntarily unemployed or under-employed. <input type="checkbox"/> Full-time pay at current pay rate. <input type="checkbox"/> Full-time pay based on reliable information about past earnings. <input type="checkbox"/> Full-time pay based on incomplete or
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Parent (name): _____ irregular information about past earnings. <input type="checkbox"/> Pay for 32 hours per week at the minimum wage where this parent lives because this parent: <input type="checkbox"/> recently graduated from high school. <input type="checkbox"/> is on TANF now, or recently came off TANF, public assistance, SSI, or disability. <input type="checkbox"/> was recently incarcerated. <input type="checkbox"/> Full-time pay at the minimum wage where the parent lives because this parent (<i>check all that apply</i>): <input type="checkbox"/> recently worked at minimum wage jobs. <input type="checkbox"/> has never been employed. <input type="checkbox"/> does not have information about past earnings. <input type="checkbox"/> Table of Median Net Monthly Income. <input type="checkbox"/> Other (<i>specify</i>): _____ _____	Parent (name): _____ irregular information about past earnings. <input type="checkbox"/> Pay for 32 hours per week at the minimum wage where this parent lives because this parent: <input type="checkbox"/> recently graduated from high school. <input type="checkbox"/> is on TANF now, or recently came off TANF, public assistance, SSI, or disability. <input type="checkbox"/> was recently incarcerated. <input type="checkbox"/> Full-time pay at the minimum wage where the parent lives because this parent (<i>check all that apply</i>): <input type="checkbox"/> recently worked at minimum wage jobs. <input type="checkbox"/> has never been employed. <input type="checkbox"/> does not have information about past earnings. <input type="checkbox"/> Table of Median Net Monthly Income. <input type="checkbox"/> Other (<i>specify</i>): _____ _____
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7. Limits affecting the monthly child support amount

Does not apply. The monthly amount was not affected by the upper or lower limits in RCW 26.19.065.

The monthly amount has been affected by (*check all that apply*):

Low-income limits. The self-support reserve and presumptive minimum payment have been calculated in the *Worksheets*, lines 8.a. - c.

The 45% net income limit. The court finds that the paying parent's child support obligations for their biological and legal children are more than 45% of their net income (*Worksheets* line 18). Based on the children's best interests and the parents' circumstances, it is (*check one*): fair. **not** fair to apply the 45% limit. (*Describe both parents' situations*):

Combined Monthly Net Income over \$12,000. Together, the parents earn more than \$12,000 per month (*Worksheets* line 4). The child support amount (*check one*):

is the presumptive amount from the economic table.

is **more** than the presumptive amount from the economic table because (*specify*):

8. Standard Calculation

<i>Parent Name</i>	<i>Standard calculation worksheets line 17</i>
	\$
	\$

Check here if there is a residential split – (each parent has at least one of the children from this relationship living with them most of the time.)

These children (<i>names and ages</i>):	These children (<i>names and ages</i>):
Live with (<i>parent's name</i>):	Live with (<i>parent's name</i>):

The standard calculation for the parent paying support is \$_____.
This is from (*check one*):

The *Attachment for Residential Split Adjustment (Arvey calculation)*, line G (form WSCSS–Attachment for RSA). This *Attachment to the Child Support Schedule Worksheets* is approved by the court and made part of this Order.

Other calculation (*specify method and attach Worksheet/s*): _____

_____.

9. Deviation from standard calculation

Should the monthly child support amount be different from the standard calculation?

No – The monthly child support amount ordered in section **10** is the **same** as the standard calculation listed in section **8** because (*check one*):

No one asked for a deviation from the standard calculation. (*Skip to 10.*)

There is not a good reason to approve the deviation requested by (*name/s*): _____
_____. The facts supporting this decision are (*check all that apply*):

detailed in the *Worksheets*, Part VIII, lines 20 through 26.

the parent asking for a deviation:

has a new spouse or domestic partner with income of
\$_____.

lives in a household where other adults have income of
\$_____.

has income from overtime or a second job that was excluded in section **5** above.

other (*specify*): _____.

Yes – The monthly child support amount ordered in section **10** is **different** from the standard calculation listed in section **8** because (*check all that apply*):

- A parent or parents in this case has:
 - children from other relationships.
 - paid or received child support for children from other relationships.
 - gifts, prizes, or other assets.
 - income that is not regular (non-recurring income) such as bonuses, overtime, etc.
 - unusual unplanned debt (extraordinary debt not voluntarily incurred).
 - tax planning considerations that will not reduce the economic benefit to the children.
 - very different living costs, which are beyond their control.
- The children in this case:
 - spend significant time with the parent who owes support. The non-standard amount still gives the other parent's household enough money for the children's basic needs. The children do not get public assistance (TANF).
 - have extraordinary income.
 - have special needs because of a disability.
 - have special medical, educational, or psychological needs.
- There are (or will be) costs for court-ordered reunification or a voluntary placement agreement.
- The parent who owes support has shown it is not fair to have to pay the \$50 per child presumptive minimum payment.
- The parent who is owed support has shown it is not fair to apply the self-support reserve (calculated on lines 8.a. – c. of the *Worksheets*).
- Other reasons: _____

The facts that support the reasons checked above are (*check all that apply*):

- detailed in the *Worksheets*, Part VIII, lines 20 through 26.
- the parent asking for a deviation:
 - has a new spouse or domestic partner with income of \$_____.
 - lives in a household where other adults have income of \$_____.
 - has income from overtime or a second job that was excluded in section **5** above.
- as follows: _____

10. Monthly child support amount (transfer payment)

After considering the standard calculation in section **8**, and whether or not to apply a deviation in section **9**, the court orders the following monthly child support amount (transfer payment).

(Name): _____ must pay child support to (name): _____ each month as follows for the children listed below (add lines for additional children if needed):

	Child's Name	Age	Amount
1.			\$
2.			\$
3.			\$
4.			\$
5.			\$
Total monthly child support amount:			\$

Residential Split – Each parent has at least one of the children from this relationship living with them most of the time. (Name): _____ must pay child support to (name): _____ each month as follows:

Total monthly child support amount: \$

11. Starting date and payment schedule

The monthly child support amount must be paid starting (month, year): _____ on the following payment schedule:

- in one payment each month by the ___ day of the month.
- in two payments each month: ½ by the _____ and ½ by the _____ day of the month.
- other (specify): _____

12. Step increase or decrease (for modifications or adjustments only)

- Does not apply.
- Approved** – The court is changing a final child support order. The monthly child support amount is increasing or decreasing by more than 30 percent from the last final child support order. This causes significant financial hardship to the parent who owes or receives support, so the increase will be applied in two equal steps:
 - On (date): _____, six months after the Starting Date in section **11**, the monthly child support amount will be the full amount listed in section **10**.
 - For 6 months from the Starting Date in section **11** above, the monthly child support amount will be an amount exactly half way between the old monthly amount and the new monthly amount for a total of \$_____ each month.
- Denied** – The court is changing a final child support order (check one):
 - but the monthly payment increased or decreased by less than 30%.
 - and the monthly payment increased by more than 30%, but this does not cause a significant hardship to the parent who owes support.

and the monthly payment decreased by more than 30%, but this does not cause a significant hardship to the parent who receives support.

13. Periodic Adjustment

Child support may be changed according to state law. The court is not ordering a specific periodic adjustment schedule below.

Any party may ask the court to adjust child support periodically on the following schedule **without** showing a substantial change of circumstances:

The *Motion to Adjust Child Support Order* may be filed:

every ____ months.

on (*date/s*): _____

other (*describe condition or event*): _____

Important! A party must file a *Motion to Adjust Child Support Order* (form FL Modify 521), and the court must approve a new *Child Support Order* for any adjustment to take effect.

Deadlines, if any (*for example, deadline to exchange financial information, deadline to file the motion*): _____

14. Payment Method (check either Registry or Direct Pay)

Registry – Send payment to the Washington State Support Registry. The Division of Child Support (DCS) will forward payments to the person owed support and keep records of all payments.

Address for payment: Washington State Support Registry
PO Box 45868, Olympia, WA 98504

Phone number/s: 1 (800) 922-4306 or 1 (800) 442-5437

Important! If you are ordered to send your support payments to the Washington State Support Registry, and you pay some other person or organization, you will **not** get credit for your payment.

DCS Enforcement (if Registry is checked above):

DCS will **enforce** this order because (*check all that apply*):

this is a public assistance case.

one of the parties has already asked DCS for services.

one of the parties has asked for DCS services by signing the application statement at the end of this order (*above the Warnings*).

DCS will **not** enforce this order unless one of the parties applies for DCS services or the children go on public assistance.

Direct Pay – Send payment to the other parent or non-parent custodian by:

mail to: _____
Street Address or PO Box City State Zip

or any new address the person owed support provides to the parent who owes support. (*This does not have to be a home address.*)

other method: _____

15. Enforcement through income withholding (garnishment)

DCS or the person owed support can collect the support owed from the income, earnings, assets, or benefits of the parent who owes support, and can enforce liens against real or personal property as allowed by any state’s child support laws without notice to the parent who owes the support.

*If this order is **not** being enforced by DCS and the person owed support wants to have support paid directly from the employer, the person owed support must ask the court to sign a separate income withholding order requiring the employer to withhold income and make payments. (Chapter 26.18 RCW.)*

Income withholding may be delayed until a payment becomes past due if the court finds good reason to delay.

Does not apply. There is no good reason to delay income withholding.

Income withholding will be **delayed** until a payment becomes past due because (*check one*):

the child support payments are enforced by DCS, and there are good reasons in the children’s best interest **not** to withhold income at this time. If this is a case about changing child support, previously ordered child support has been paid on time.

List the good reasons here: _____

the child support payments are **not** enforced by DCS and there are good reasons **not** to withhold income at this time.

List the good reasons here: _____

the court has approved the parents’ written agreement for a different payment arrangement.

16. Temporary reduction if incarcerated (abatement)

Important! *Read Support Abatement Warnings at the end of this order.*

If the person who owes support is incarcerated:

- The total monthly child support amount may be temporarily reduced to \$10 while the person who owes support is in jail, prison, or a correctional facility for at least six months (or serving a sentence of more than six months), and has no income or assets available to pay the support.
- If reduced, the support amount will be \$10 a month.
- Beginning the fourth month after the person who owes support is released, support will be 50% of the original amount, or \$50 per child, whichever is more.

- One year after release, support will return to the original amount in section 10.
- Reinstatement of the support amount at 50% does not automatically apply, if a *Petition to Modify Child Support Order* is filed during the period of abatement.

The person who owes support qualifies for abatement. Monthly child support is temporarily reduced (abated) to \$10 and will be reinstated as described above.

17. End date for support

Support must be paid for each child until the court signs a different order or (*check one*):

the child turns 18 or is no longer enrolled in high school, whichever happens last, unless the court makes a different order in section **18**.

the child turns 18 or is emancipated, unless the court makes a different order in section **18**.

after (*child's name*): _____ turns 18. Based on information available to the court, it is expected that this child will be unable to support them self and will remain dependent past the age of 18. Support must be paid until (*check one*):

this child is able to support themselves and is no longer dependent on the parents.

other: _____

other (*specify*): _____

18. Post-secondary educational support (for college or vocational school)

Reserved – A parent or non-parent custodian may ask the court for post-secondary educational support at a later date without showing a substantial change of circumstances by filing a *Petition to Modify Child Support Order* (form FL Modify 501). The *Petition* must be filed *before* child support ends as listed in section **17**.

Granted – The parents must pay for the children’s post-secondary educational support. Post-secondary educational support may include support for the period after high school and before college or vocational school begins. The amount or percentage each person must pay (*check one*):

will be decided later. The parties may make a written agreement or ask the court to set the amount or percentage by filing a *Petition to Modify Child Support Order* (form FL Modify 501).

is as follows (*specify*): _____

Denied – The request for post-secondary educational support is denied.

Other (*specify*): _____

19. Tax Issues

Important! Although personal tax exemptions are currently suspended under federal law through tax year 2025, other tax benefits may flow from claiming a child as dependent.

- The parties will follow the law and IRS rules about claiming children on tax forms.
- The parties have the right to claim the children as their dependents for purposes of personal tax exemptions and associated tax credits on their tax forms as follows (*check one*):
- Every year – (*name*): _____
has the right to claim (*children's names*): _____;
and (*name*): _____
has the right to claim (*children's names*): _____.
- Alternating – (*name*): _____
has the right to claim the children for (*check one*): even odd year and
(*name*): _____
has the right to claim the children for the opposite years.
- Other (*specify*): _____

For tax years when a non-custodial parent has the right to claim the children, the parents **must** cooperate to fill out and submit IRS Form 8332 in a timely manner.

20. Medical Support

Important! Read the Medical Support Warnings at the end of this order. Medical Support includes health insurance (both public and private) and cash payments towards premiums and uninsured medical expenses.

- The court is not ordering how healthcare coverage must be provided for the children because the court does not have enough information to determine the availability of accessible healthcare coverage for the children (coverage that could be used for the children's primary care). The law requires every parent to provide or pay for medical support. DCS or any parent can enforce this requirement. (*Skip to 21.*)
- Private health insurance ordered.** (*Name*): _____ must pay the premium to provide health insurance coverage for the children. The court has considered the needs of the children, the cost and extent of coverage, and the accessibility of coverage.
- The other parent must pay their proportional share* of the premium paid. Health insurance premiums (*check one*):
- are included on the *Worksheets* (line 14). No separate payment is needed.
- are **not** included on the *Worksheets*. Separate payment is needed. A parent or non-parent custodian may ask DCS or the court to enforce payment for the proportional share.

* *Proportional share is each parent's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.*

The other parent is **not** ordered to pay for any part of the children's insurance because (*explain*): _____

A parent cannot be excused from providing health insurance coverage through an employer or union solely because the child receives public healthcare coverage.

A parent has been ordered to pay an amount that is more than 25% of their basic support obligation (*Worksheets*, line 19). The court finds this is in the children's best interest because: _____

A parent cannot be ordered to pay an amount towards healthcare coverage premiums that is more than 25% of their basic support obligation (Worksheets, line 19) unless the court finds it is in the best interest of the children.

Public healthcare coverage. (*Name*): _____ has enrolled the child in public healthcare coverage and does not have available at no cost, accessible health insurance coverage through an employer or union.

The other parent must enroll the child in accessible health insurance coverage through their employer or union up to 25% of their basic support obligation.

The other parent must pay their proportional share* of the premium for public healthcare coverage for the child. Public healthcare premiums (*check one*):

are included on the *Worksheets* (line 14). No separate payment is needed.

are **not** included on the *Worksheets*. Separate payment is needed. A parent or non-parent custodian may ask DCS or the court to enforce payment for the proportional share.

* *Proportional share is each parent's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.*

The other parent is **not** ordered to pay for any part of the children's healthcare coverage because (*explain*): _____

A parent cannot be excused from providing health insurance coverage through an employer or union solely because the child receives public healthcare coverage.

A parent has been ordered to pay an amount that is more than 25% of their basic support obligation (*Worksheets*, line 19). The court finds this is in the children's best interest because: _____

Other (*specify*): _____

21. Healthcare coverage if circumstances change or court has not ordered

If the parties' circumstances change, or if the court is not ordering how healthcare coverage must be provided for the children in section **20**:

- A parent, non-parent custodian, or DCS can enforce the medical support requirement.

- If a parent does not provide proof of accessible healthcare coverage (coverage that can be used for the children’s primary care), that parent must:
 - Get (or keep) insurance through their work or union, unless the insurance costs more than 25% of their basic support obligation (line 19 of the *Worksheets*),
 - Pay their share of the other parent’s monthly premium up to 25% of their basic support obligation (line 19 of the *Worksheets*), or
 - Pay their share of the monthly cost of any public healthcare coverage, such as Apple Health or Medicaid, which is assigned to the state.

22. Children’s expenses not included in the monthly child support amount

Uninsured medical expenses – Each parent is responsible for a share of uninsured medical expenses as ordered below. Uninsured medical expenses include premiums, co-pays, deductibles, and other healthcare costs not paid by healthcare coverage.

Children’s Expenses for:	Parent (name):	Parent (name):	Make payments to:	
	_____ pays monthly	_____ pays monthly	Person who pays the expense	Service Provider
Uninsured medical expenses	Proportional Share*	Proportional Share*	[]	[]

* Proportional Share is each parent’s percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.

Other shared expenses (check one):

[] Does not apply. The monthly amount covers all expenses, except healthcare expenses.

[] The parents will share the cost of the expenses listed below (check all that apply):

Children’s Expenses for:	Parent (name):	Parent (name):	Make payments to:	
	_____ pays monthly	_____ pays monthly	Person who pays the expense	Service Provider
[] Day care: _____ _____	[] Proportional Share* [] \$ _____ [] _____%**	[] Proportional Share* [] \$ _____ [] _____%**	[]	[]
[] Education: _____ _____	[] Proportional Share* [] \$ _____ [] _____%**	[] Proportional Share* [] \$ _____ [] _____%**	[]	[]
[] Long-distance transportation: _____ _____	[] Proportional Share* [] \$ _____ [] _____%**	[] Proportional Share* [] \$ _____ [] _____%**	[]	[]

Children's Expenses for:	Parent (name): _____	Parent (name): _____	Make payments to:	
	pays monthly	pays monthly	Person who pays the expense	Service Provider
[] Other (specify): _____ _____	[] Proportional Share* [] \$ _____ [] _____%**	[] Proportional Share* [] \$ _____ [] _____%**	[]	[]

* Proportional Share is each parent's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.

** If any percentages ordered are different from the Proportional Share, explain why:

[] Other (give more detail about covered expenses here, if needed): _____

A person receiving support can ask DCS to collect:

- expenses owed directly to them.
- reimbursement for expenses the person providing support was ordered to pay.
- an order for a money judgment from the court.

23. Past due child support, medical support and other expenses

[] This order does not address any past due amounts or interest owed.

[] As of (date): _____, no parent owes (check all that apply):

- | | |
|------------------------------|--|
| [] past due child support | [] interest on past due child support |
| [] past due medical support | [] interest on past due medical support |
| [] past due other expenses | [] interest on past due other expenses |

to (check all that apply): [] the other parent or non-parent custodian [] the state.

[] The court orders the following **money judgments** (summarized in section **1** above):

Judgment for	Debtor's name (person who must pay money)	Creditor's name (person who must be paid)	Amount	Interest
[] Past due child support from _____ to _____			\$	\$

Judgment for	Debtor's name <i>(person who must pay money)</i>	Creditor's name <i>(person who must be paid)</i>	Amount	Interest
<input type="checkbox"/> Past due medical support <i>(health insurance & healthcare costs not covered by insurance)</i> from _____ to _____			\$	\$
<input type="checkbox"/> Past due expenses for: <input type="checkbox"/> day care <input type="checkbox"/> education <input type="checkbox"/> long-distance transp. from _____ to _____			\$	\$
<input type="checkbox"/> Other <i>(describe)</i> :			\$	\$

The **interest rate** for child support judgments is 12%.

Other *(specify)*: _____

24. Overpayment caused by change

Does not apply.
 The *Order* signed by the court today or on date: _____
 caused an overpayment of \$_____.

(Name): _____ shall repay this amount
 to *(Name)*: _____ by *(date)*: _____
 _____.

The overpayment shall be credited against the monthly support amount owed
 each month at the rate of \$_____ each month until paid off.


Other *(specify)*: _____

25. Other Orders

All of the *Warnings* below are required by law and are incorporated and made part of this order.

Other (*specify*): _____

Ordered.

Dated: _____  _____
Judge or Commissioner


Petitioner and Respondent or their lawyers fill out below:


This document (*check any that apply*):

- is an agreement of the parties
- is presented by me
- may be signed by the court without notice to me

This document (*check any that apply*):

- is an agreement of the parties
- is presented by me
- may be signed by the court without notice to me

 _____
Petitioner signs here **or** lawyer signs here + WSBA No.

 _____
Respondent signs here **or** lawyer signs here + WSBA No.


Print Name Date

Print Name Date

If any parent or child received public assistance:


The state Department of Social and Health Services was notified about this order through the Prosecuting Attorney's office, and has reviewed and approved the following:

- child support medical support
- past due child support other (*specify*): _____

 _____
Deputy Prosecutor signs here Print name and WSBA No. Date

Parent or Non-Parent Custodian applies for Division of Child Support enforcement services:

I ask the DCS to enforce this order. I understand that DCS will keep \$35 each year as a fee if DCS collects more than \$550, unless I ask to be excused from paying this fee in advance. (*You may call DCS at 1-800-442-5437. DCS will **not** charge a fee if you have ever received TANF, tribal TANF, or AFDC.*)

 _____
Parent or Non-Parent Custodian signs here Print name Date
(lawyer cannot sign for party)

**All the warnings below are required by law and are part of the order.
Do not remove.**

Warnings!

If you don't follow this child support order...

- DOL or other licensing agencies may deny, suspend, or refuse to renew your licenses, including your driver's license and business or professional licenses, and
- Dept. of Fish and Wildlife may suspend or refuse to issue your fishing and hunting licenses and you may not be able to get permits. (*RCW 74.20A.320*)

If you receive child support...

You may have to:

- Document how that support and any cash received for the children's healthcare was spent.
- Repay the other parent for any daycare or special expenses included in the support if you didn't actually have those expenses. (RCW 26.19.080)

Support Abatement Warnings!

The Division of Child Support (DCS), the person required to pay support, the payee under this order, or the person entitled to receive support **may ask the court or DCS to temporarily reduce** child support to \$10 per month when the person required to pay support is in jail, prison, or a correctional facility for at least six months, or serving a sentence of more than six months.

There is a rebuttable presumption that an incarcerated person cannot pay child support. DCS, the payee under this order, or the person receiving the support may overcome the presumption by showing that the person required to pay support has income or other assets available to pay support.

When a request for abatement is made, DCS will review its records and other available information, and decide if abatement is appropriate. DCS will send notice of the decision to the person required to pay support, and to the payee under this order or the person entitled to receive support. Any of those persons may object to DCS's decision.

If at any point during the period of incarceration, a person or DCS later learns of income or other assets available to pay support, a request to terminate or reverse the abatement may be made through DCS or the Office of Administrative Hearings.

Medical Support Warnings!

The parents must keep the Support Registry informed about whether they have access to healthcare coverage for the children at a reasonable cost and to provide the policy information for any such coverage.

If you are ordered to provide children's healthcare coverage...

You have **20 days** from the date of this order to send:

- proof that the children are covered , or
- proof that healthcare coverage is not available as ordered.

Send your proof to the other parent or to the Support Registry (if your payments go there).

If you do **not** provide proof of healthcare coverage:

- The other parent or the support agency may contact your employer or union, without notifying you, to ask for direct enforcement of this order (RCW 26.18.170), and
- The other parent may:
 - Ask the DCS for help,
 - Ask the court for a contempt order, or
 - File a Petition in court.

Don't cancel your employer or union health insurance for your children unless the court approves or your job ends, and you no longer qualify for insurance as ordered in section **20**.

If an insurer sends you payment for a medical provider's service:

- you must send it to the medical provider if the provider has not been paid; or
- you must send the payment to whoever paid the provider if someone else paid the provider; or
- you may keep the payment if you paid the provider.

If the children have public healthcare coverage, the state can make you pay for the cost of the monthly premium.

Always inform the Support Registry and any parent if your access to healthcare coverage changes or ends.

Superior Court of Washington, County of _____

In re:

Petitioner/s (*person/s who started this case*):

And Respondent/s (*other party/parties*):

No. _____

Proof of Personal Service
(AFSR)

Proof of Personal Service

Server declares:

1. My name is: _____. I am **not** a party to this case.
I am 18 or older.

2. Personal Service

I served court documents for this case to (*name of party*): _____
by (*check one*):

giving the documents directly to him/her.

giving the documents to (*name*): _____,
a person of suitable age and discretion who lives at the same address as the party.

3. Date, time, and address of service

Date: _____ Time: _____ a.m. p.m.

Address:

Number and street *city* *state* *zip*

4. List all documents you served (check all that apply):

(The most common documents are listed below. Check only those documents that were served. Use the "Other" boxes to write in the title of each document you served that is not already listed.)

<input type="checkbox"/> Petition to/for _____ _____	<input type="checkbox"/> Notice of Hearing _____
<input type="checkbox"/> Summons <i>(Attach a copy.)</i>	<input type="checkbox"/> Motion for Temporary Family Law Order <input type="checkbox"/> and Restraining Order
<input type="checkbox"/> Order Setting Case Schedule	<input type="checkbox"/> Proposed Temporary Family Law Order
<input type="checkbox"/> Notice Re: Military Dependent	<input type="checkbox"/> Motion for Immediate Restraining Order (Ex Parte)
<input type="checkbox"/> Proposed Parenting Plan	<input type="checkbox"/> Immediate Restraining Order (Ex Parte) and Hearing Notice
<input type="checkbox"/> Proposed Child Support Order	<input type="checkbox"/> Restraining Order
<input type="checkbox"/> Proposed Child Support Worksheets	<input type="checkbox"/> Motion for Contempt Hearing
<input type="checkbox"/> Sealed Financial Documents	<input type="checkbox"/> Order to Go to Court for Contempt Hearing
<input type="checkbox"/> Financial Declaration	<input type="checkbox"/> Motion for Adequate Cause Decision
<input type="checkbox"/> Information for Temporary Parenting Plan	<input type="checkbox"/> Notice of Intent to Move with Children (Relocation)
<input type="checkbox"/> Declaration of: _____	<input type="checkbox"/> Objection about Moving with Children and Petition about Changing a Parenting/ Custody Order (Relocation)
<input type="checkbox"/> Declaration of: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

5. Fees charged for service

Does not apply.

Fees: \$ _____ + Mileage \$ _____ = Total: \$ _____

6. Other Information (if any): _____

I declare under penalty of perjury under the laws of the state of Washington that the statements on this form are true.

Signed at *(city and state)*: _____ Date: _____

Signature of server

Print or type name of server

To the party having these documents served:

- File the original *Proof of Personal Service* with the court clerk.
- If you served a *Restraining Order* signed by the court, you must also give a copy of this *Proof of Personal Service* and a *Law Enforcement Information Sheet* to law enforcement.
- If the documents were personally served outside of Washington state, you must fill out and file form FL All Family 102 (*Declaration: Personal Service Could Not be Made in Washington*).

To the Server: check here if you personally served the documents *outside* Washington state. Your signature must be notarized or sworn before a court clerk.

*(For personal service in Washington state, your signature does **not** need to be notarized or sworn before a court clerk.)*

Signed and sworn to before me on *(date)*: _____.

Signature of notary or court clerk

Print name of notary or court clerk

I am a notary public in and for the state of: _____

My commission expires: _____

I am a court clerk in a court of record in *(county)*: _____

(state): _____

(Print seal above.)

Superior Court of Washington, County of _____

In re the marriage / domestic partnership of:

Petitioner *(person who started this case)*:

And Respondent *(other spouse / partner)*:

No. _____

Temporary Family Law Order
(TFO)

Clerk's action required: **1, 12, 13**

Temporary Family Law Order

Use this form in marriage/domestic partnership cases only. For other cases, use FL Parentage 324, FL Non-Parent 424, or FL Modify 624, depending on the type of case.

1. Money Judgment Summary

- No money judgment is ordered.
- Summarize any money judgments in the table below.

Judgment for	Debtor's name <i>(person who must pay money)</i>	Creditor's name <i>(person who must be paid)</i>	Amount	Interest
Lawyer's fees			\$	\$
Other fees and costs			\$	\$
Other amounts <i>(describe)</i> :			\$	\$
Yearly Interest Rate: ____% <i>(12% unless otherwise listed)</i>				
Lawyer (name):		represents <i>(name)</i> :		
Lawyer (name):		represents <i>(name)</i> :		

2. Findings

The *(check one)*: Petitioner Respondent made a *Motion for Temporary Family Law Order* (form FL Divorce 223) or a *Motion for Immediate Restraining Order* (form FL Divorce 221) and the court finds there is reason to approve this order.

Specific findings: _____

3. Active duty military

(The **federal** Servicemembers Civil Relief Act covers:

- Army, Navy, Air Force, Marine Corps, and Coast Guard members on active duty;
- National Guard or Reserve members under a call to active service for more than 30 days in a row; and
- commissioned corps of the Public Health Service and NOAA.

The **state** Service Members' Civil Relief Act covers those service members listed above who are either stationed in or residents of Washington state, and their dependents, except for the commissioned corps of the Public Health Service and NOAA.)

- None of the parties are covered by the state or federal Service Members' Civil Relief Act, **OR** no party covered by the Acts has asked for a stay.
 - One or more of the parties is covered by the state or federal Service Members' Civil Relief Acts and has not appeared in this case, or has asked for a stay. (Check one):
 - The court signed the *Order re Service Members' Civil Relief Act* (form FL All Family 170) filed separately.
 - The court's order about the service member's rights is in section **14** below.
 - Other Findings: _____
-

➤ The Court Orders

4. Care and safety of children

- No request made.
- This order includes these children:

Child's name	Age	Child's name	Age
1.		4.	
2.		5.	
3.		6.	

- The court signed the temporary *Parenting Plan* filed separately.
 - The (check one or both): Petitioner Respondent must not take the children out of Washington state.
 - The court will appoint the person below to investigate and report on issues affecting the children (check one):
 - Guardian ad Litem (GAL). The court signed the *Order Appointing Guardian ad Litem for a Child* (form FL All Family 146) filed separately.
 - Evaluator/Investigator. The court signed the *Order Appointing Parenting Evaluator/Investigator* (form FL All Family 148) filed separately.
 - Other: _____
-

Important! Attach Summary of the Law about Moving with Children (form FL Relocate 736) if residential time is included in this order instead of a temporary Parenting Plan.

5. Provide support

- No request made.
- Request denied.
- The court signed the temporary *Child Support Order* and *Worksheets* filed separately.
- The (*check one*): Petitioner Respondent must pay spousal support to their spouse/domestic partner.

Amount: \$ _____ per month.

Date 1st payment is due: _____. Day of the month each payment is due: _____.

- Make all payments to:
- the other spouse/domestic partner.
 - Washington State Child Support Registry (*available if child support is paid through the Registry*).
 - Other (*specify*): _____

- Other (*specify*): _____

6. Family home

- No request made.
- Request denied.
- Stay in the home** – The (*check one*): Petitioner Respondent may stay in the family home.
- Move out** – The (*check one*): Petitioner Respondent must move out of the family home by (*date*): _____.
- Other (*specify*): _____

7. Use of property

- No request made.
- Request denied.
- Petitioner will possess and use (*specify*):
 - property in possession now.
 - vehicle/s: _____
 - other _____
- Respondent will possess and use (*specify*):
 - property in possession now.

vehicle/s: _____

other _____

Other (*specify*): _____

8. Protect property

No request made.

Request denied.

The (*check one or both*): Petitioner Respondent must not move, take, hide, damage, borrow against, sell or try to sell, or get rid of any property, unless it is a usual business practice or to pay for basic needs. Both spouses/domestic partners must notify the other about any expenses that are out of the ordinary.

Other (*specify*): _____

9. Household expenses

No request made.

Request denied.

Household expenses must be paid as follows:

Expense	Who pays
<input type="checkbox"/> First Mortgage	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Second Mortgage/Line of Credit	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Rent or lease payment	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Utilities	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Homeowner's Insurance	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Property Taxes	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Vehicle (<i>specify</i>):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Vehicle (<i>specify</i>):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Child Care	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
<input type="checkbox"/> Other:	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

Other (*specify*): _____

10. Divide debts

No request made.

Request denied.

The Petitioner and Respondent must:

Each be responsible for their own future debts, including debt from credit cards, loans, security interest, and mortgages, unless ordered differently.

Pay debts as follows:

Debt (describe)	Who pays
1.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
2.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
3.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
4.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
5.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
6.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

Other (specify): _____

11. Do not change insurance

- No request made.
- Request denied.
- The (check one or both): Petitioner Respondent must not make changes to any medical, health, life, property, or auto insurance policy that covers either spouse/ domestic partner or any child named in section 4 above. That means they must not transfer, cancel, borrow against, let expire, or change the beneficiary of any policy.

Pay premiums as follows:

Policy (describe)	Who pays
1.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
2.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
3.	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

Other (specify): _____


12. Pay fees and costs

- No request made.
- Request denied.
- Request reserved. _____
- The (check one): Petitioner Respondent must:
 - Pay the other party's lawyer fees. Amount: \$ _____
 Make payments to (name): _____ by (date): _____
 - Pay other fees and costs. Amount: \$ _____
 Make payments to (name): _____ by (date): _____
 for: _____

Money Judgment (check one):

- The amount/s listed above must be paid, but the court is **not** entering a money judgment at this time.

Ordered.

_____  _____
Date *Judge or Commissioner*


Petitioner and Respondent or their lawyers fill out below.


This order (*check any that apply*):

- is an agreement of the parties
- is presented by me
- may be signed by the court without notice to me

This order (*check any that apply*):

- is an agreement of the parties
- is presented by me
- may be signed by the court without notice to me

 _____
Petitioner signs here or lawyer signs here + WSBA #

 _____
Respondent signs here or lawyer signs here + WSBA #

_____ *Print Name* _____ *Date*

_____ *Print Name* _____ *Date*

