

LEGITIMATION

This packet contains forms and information on:

How to Legitimate a Child

Note: The forms and instructions in this packet are to be used by the father of a child born out of wedlock to legitimate the child. They cannot be used by the mother or any person other than the father.

IMPORTANT

IF THERE IS ANY QUESTION in your mind concerning these forms, the use of these forms, or your legal rights, it is strongly recommended that the services of an attorney be obtained. If you do not know an attorney you should contact your local Bar Association.

If you are unable to afford the services of an attorney, you should contact the following organizations to see if you are eligible for their services:

- **Georgia Legal Services Program, Piedmont Regional Office (833) 457-7529 or (800) 498-9469.**

DUE TO THE CHANGING NATURE OF THE LAW, the forms and information contained in these packets may become outdated. Therefore, you should review and research statutes and rules of procedure referenced in the instructions to ensure that the forms are accurate and current.

IN NO EVENT will the Clerk of Court or ADR Office or anyone contributing to the production of these forms, commentary, instructions, and appendices be liable for any indirect or consequential damages resulting from the use of the booklet.

USE THESE FORMS AT YOUR OWN RISK. THESE FORMS MAY OR MAY NOT BE APPROPRIATE IN YOUR PARTICULAR CASE. ANY DESIRED OUTCOME FROM THE USE OF THESE FORMS CANNOT BE PREDICTED OR GUARANTEED. IT IS STRONGLY RECOMMENDED THAT YOU SEEK LEGAL ADVICE.

It is advisable to have an attorney when filing legal papers to be sure that your rights are protected and that all the procedures are correctly followed. **Courthouse personnel are prohibited by state law O.C.G.A. § 15-19-51 from giving legal advice.** Different situations may require special procedures and courthouse personnel cannot advise you on how to proceed or what forms may be necessary in specific situations.

Be aware that answering questions about legal procedure (such as what the law requires you to do, how to prove your case, how to respond to requests by the opposing party or how to get that party to respond to your requests, how to comply with a law or a court order, etc.) constitutes "giving legal advice." Georgia law strictly forbids anyone employed by the Clerk's office, Sheriff's office, judge's chambers, or ADR office from answering such questions. *When you choose to represent*

Superior Court of Henry County

yourself, it is your responsibility to research the law yourself and figure out what the law requires you to do and how you should proceed. The fact that you are not an attorney is not an excuse or an exception to this requirement.

QUESTIONS AND ANSWERS ABOUT LEGITIMATIONS

WHAT IS A “LEGITIMATION”?

Legitimation is a legal action that is the only way, other than by marrying the mother of a child, that the biological father of a child born in the State of Georgia may establish legal rights to his child.

WHO MAY FILE FOR LEGITIMATION?

Only the biological father of a child may file a *Petition* seeking to legitimate his child.

WHAT IS THE LEGAL EFFECT OF A LEGITIMATION?

An *Order of Legitimation* creates a father and child relationship legally between the Petitioner and his child. An *Order of Legitimation* establishes that the child may inherit from this legal father and vice versa. An *Order of Legitimation* allows the legal father to be listed on the child’s birth certificate as such. An *Order of Legitimation* is the only way that the biological father of child born out of wedlock can be recognized as the legal father of a child, and therefore can petition for custody and/or visitation with this child.

If custody is an issue, you must file your legitimation first, and get the *Order of Legitimation* signed. Once your child has been legitimated by the court order, then you may file a separate action for custody.

Note: The exception to this rule is if the mother is deceased, there is no other legal parent or guardian, or the mother consents to custody.

Even if you are already listed on the child’s birth certificate as the father, but you and the child’s mother were not married to each other, you must file a *Petition* with the court to legitimate your child.

WHERE SHOULD THE PETITION BE FILED?

The *Petition for Legitimation* must be filed in the child’s county of residence, or if there is an adoption pending, in the county where the adoption was filed. If custody or visitation is desired, you should petition the court for custody and/or visitation after you have been granted an order of legitimation.

HOW MUCH DOES IT COST TO FILE FOR LEGITIMATION?

There are basic filing fees for petitions that are scheduled by the Henry County Superior Court Clerk’s Office. Therefore, inquiries regarding the cost to file for legitimation should be addressed to that office at 770-288-8022.

If the mother has not signed a consent and/or waiver of jurisdiction form, she will need to be served with the *Petition* by the sheriff. There is a fee for each address to which the sheriff has to go, if you are in the State of Georgia. If you are out of the state, and want the sheriff to serve the mother, you must check with the respective jurisdiction to determine the fees for service. “Service” is an official way to give notice to the mother, and other people involved with your case, that you have filed your case and then they may choose to file a response with the court.

If the mother has left the child with you, and you do not know her address, and you have tried but cannot find her, then you will have to serve her with the *Petition* by publication after you have been given an Order to Serve by Publication. This means that the *Petition* is written up and then published in the official county newspaper for the county in which you knew she last lived. There will be a publication fee.

If the mother was married to someone else when your child was born, or she has listed someone else on your child’s birth certificate as the father of the child, you will also have to pay a fee to have the sheriff serve that person with a copy of the *Petition*. If you don’t know where that person lives, he will also have to be served by publication.

WHAT CAN I DO IF I DON'T HAVE THE MONEY TO PAY FEES?

If you do not have the money to pay your filing fees and sheriff's fees, then you may ask the Court to allow you to file free of charge. In order to do so, you must complete a *Poverty Affidavit*.

You must make a written statement to the court about your monthly income and monthly expenses, and why it would be a hardship for you to have to pay the filing fees. You should submit pay stubs for the last three months or unemployment check statements for the last three months. The court will then let you know by a written order whether you may file your case without having to pay. The county newspaper will not usually waive their fees so you will still have to pay for publication if it is necessary.

DO I HAVE TO ATTEND MEDIATION?

Yes, if the case is contested. After you have filed your case, and the Respondent has been properly served but does not agree to the legitimation, you are ready for the next step, which is mediation. For all contested domestic relations cases, complete and submit the Domestic Relations Initiation Form and Domestic Relations Screening Form to the ADR Office. These forms are available by calling the ADR Office at 770-288-8448 or online at www.adr6th.org.

Once the paperwork has been received by the ADR Office, the case will be screened to determine if it is appropriate for mediation. If for some reason it is not appropriate, the case will be released from the mediation requirement. Otherwise, it will be scheduled for a mediation session. Mediation is mandatory for contested cases only. Failure to appear at a scheduled mediation session may result in fines and other court sanctions. Once the mediation requirement has been met, a Release for Hearing will be forwarded to the Court and a copy mailed to all parties. The case is now ready for a hearing.

HOW LONG WILL ALL OF THIS TAKE?

This length of time depends on the facts of your case. There are several options for what can happen with your case:

- If custody is not an issue, and there is no other father listed on the birth certificate, then an *Order for Legitimation* can be heard by a judge on the same day that you file it, and you may get your *Order for Legitimation* signed on the same day. If you want this to happen on the same day that you file, you must ask the clerk in the Clerk's office whether the judge can accommodate your request. It might not be possible if the judge is in mid-trial or otherwise busy.
- If the mother or another person listed as the father on the birth certificate must be served by publication, then the hearing cannot take place until after the publication is finished (60 days).
- If the mother or another father must be served by the sheriff with the *Petition to Legitimate*, then the case will be placed on a judge's calendar by his/her case manager.
- If custody is to be an issue, then you should file your legitimation first, and get the *Order of Legitimation* signed. Once your child has been legitimated by the Court, then you may file another action for custody.

Note: The exceptions to this rule are if the mother is deceased and there is no other legal parent or guardian, or if the mother consents to custody. It is recommended that you seek the advice of an attorney before you proceed.

- If the mother or legal guardian of the child consents to the legitimation (and the consent is properly signed, notarized, and filed with the Clerk of Superior Court), and if you have correctly filled out and signed all the required forms and filed all the original copies, then it may be possible for you to obtain judgment in your case without having to come to court for a hearing. Judgment obtained in this way is done by filing a document called a Motion for Judgment on the Pleadings. However, if there is no consent by the mother or legal guardian, the Respondent/Defendant has filed objections to the legitimation, any information or calculation is wrong, or the judge requires further information before s/he can decide your case, then a hearing will be required, and thus the judge will not grant judgment on the pleadings. Therefore, include the Motion for Judgment on the Pleadings just in case the judge can grant judgment without hearing the case.

Before you begin:

***Write neatly and legibly** so that anyone reading your writing can easily determine how all names are spelled and what you are trying to say.

*Write out the name in full. Write clearly and legibly so that anyone reading your writing can easily tell how each part of the name is spelled. Do not use initials, nicknames, or the short version of a legal name (do not write “Ricky” if your real name is “Richard” or “Becky” if your real name is “Rebecca”). Do not use abbreviations other than “Jr.,” or “Sr.,” or “St.” (St. John, for example).

FORMS INCLUDED IN THIS PACKET:

- Petition for Legitimation
- Verification
- Mother’s Consent to Legitimation
- Acknowledgment of Service
- Rule Nisi
- Order
- Motion for Judgment on the Pleadings

NOTICE:

(The following forms may not be applicable if the parties are legitimating only and not addressing issues of custody, visitation or support.)

- “Exhibit A” – Visitation Schedule
- Domestic Relations Financial Affidavit
- Certificate of Service
- Child Support Addendum

ADDITIONAL FORMS NEEDED:

(These forms may be obtained from the Superior Court Clerk’s Office)

- Domestic Relations Case Filing
- Domestic Relations Disposition
- Summons
- Sheriff’s Entry of Service

DEFINITIONS

- LEGITIMATION:** A legal action brought by a biological but not legal father to establish his legal rights concerning his child who was born out of wedlock.
- LEGAL FATHER:** A father who has legitimated his child; a father who was married to the mother of the child at the time of the child’s conception or birth; or a biological father who married the mother after the child was born and then executed an *Affidavit of Paternity* stating or acknowledging that the child is his child.
- BIOLOGICAL FATHER:** The natural, lineal, blood father of a child.
- PETITION:** A form filed with a court that requests that a judge do something for you.

- PATERNITY:** A legal action brought by either a father, mother, or another interested party to establish that a father is the biological father of a child, and therefore has a duty to support the child he has fathered. Not the same thing as Petition to Legitimate.
- PETITIONER:** The person who files the *Petition* with the court; may in some cases be listed as “Petitioner.”
- RESPONDENT:** The person who the *Petition* is being filed against; the person who should respond to the *Petition*; may in some cases be listed as “Respondent.”
- SURNAME:** Last name

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

Petitioner: _____

and

Respondent: _____

Civil Action File No.: _____

PETITION FOR LEGITIMATION

The Petitioner files this action, and states the following in support of his *Petition*:

1

I believe am the father of the following minor child(ren), born out of wedlock:

Child's Name	Year of Birth

2

Jurisdiction and venue are proper in this Court because:

[Check and complete only one (1) of the following choices.]

- (a) the Respondent mother resides in Henry County, Georgia.
- (b) the Respondent mother resides in Georgia outside Henry County, but the child or I reside in Henry County, and the mother has consented to venue here.
- (c) the Respondent mother resides outside the State of Georgia, and the child or I reside in Henry County, Georgia.
- (d) the whereabouts of the Respondent mother are unknown, and the child or I reside in Henry County, Georgia.
- (e) the mother of the child is deceased, and the child or I reside in Henry County, Georgia.

The Respondent, _____, is the child’s mother.

[Check and complete only one (1) of the following choices.]

- (a) The mother’s address is _____.
- (b) The mother is deceased.

No other man is shown as the father on the birth certificate, and the mother was not married to any other man at the time of the child’s concept or birth.

[Check and complete all that apply.]

The child lives with the following person who takes care of the child:

- (a) The Respondent/ mother
- (b) The Petitioner/ father
- (c) Neither the child’s mother nor the Petitioner. Instead, the child lives with _____, whose relationship to the child is _____.
They reside at the following address: _____
_____ in _____
_____ County, in the State of _____.

My paternity of the child has been established by a court or by operation of law based on the child’s birth certificate or, if paternity has not been legally established, I state that I am the child’s natural father. I want to legitimate my relationship with the child, as provided in O.C.G.A. § 19-7-22, so that the child will have full rights as my child, and I will have full rights as the father of the child. I believe that legitimation would be in the child’s best interests.

[Check and complete all that apply.]

I want the birth records of the child to be changed as follows:

- (a) I want the child's last name to be changed on the birth certificate to my last name. The child's full name should be changed to: _____
(Write neatly. Do not use initials or nicknames)
- (b) I want my name to be entered as the father on the birth certificate.
- (c) No changes are necessary on the birth certificate concerning either the father's name or the child's last name.

[Check and complete only one (1) of the following.]

- (a) There is already a child support order in _____ County, State of _____, concerning the child. The current order was issued by the _____ Court/Agency in the court case number _____ on _____ (date). It requires me to pay \$_____ per _____.
- (b) There is currently no child support order concerning the child.

THEREFORE, the Petitioner asks:

[Check and complete only those that apply.]

- (a) That process issue and the Respondent be served with a copy of this *Petition for Legitimation* (**must be checked**);
- (b) That the Court order service by publication for the Respondent mother, whose address is unknown. I am filing my *Affidavit(s) of Diligent Search* with this *Petition*, and incorporate it here by reference.
- (c) I ask that the Court enter an *Order* legitimating my relationship with the child, so that the child will be recognized as my legitimate child, capable of inheriting in the same manner as if born in lawful wedlock;
- (d) That the last name of the child be changed to my last name;
- (e) That the Department of Vital Statistics be ordered and directed to amend the child's birth record and to reissue the birth certificate as follows:
- (1) entering my name as the father on the birth record.

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

Petitioner: _____

and

Respondent: _____

Civil Action File No.: _____

SUMMONS

TO THE ABOVE NAMED RESPONDENT:

You are hereby summoned and required to file with the Clerk of said court and serve upon the Petitioner, whose name and address is:

an answer to the *Petition* which is herewith served upon you, within 30 days after service of this *Summons* upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the *Petition*.

If a hearing has already been scheduled in this case, you must appear at that scheduled hearing, regardless of whether the 30 days for filing an answer has elapsed.

This _____ day of _____, 20_____.

Sabriya Hill,
Clerk of Superior Court

By _____
Clerk

To Respondent upon whom this *Petition* is served:

This copy of *Petition and Summons* was served upon you, _____, 20_____.

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

Petitioner: _____
and
Respondent: _____

Civil Action File No.: _____

MOTHER'S CONSENT TO LEGITIMATION

1

I am the mother of the following minor child(ren), who is the subject of this legitimation action filed by the Petitioner:

Child's Name	Year of Birth

2

I hereby give my consent to the following provisions, by writing my initials next to them. I do not agree to any of the provisions unless I have written my initials next to them.

*[Write your initials next to **only** the items to which you agree.]*

- _____ (a) The Petitioner legitimating our children, whose names are listed in Paragraph 1 above.
- _____ (b) Changing the children's last name to _____ making the child's full legal name now: _____ (Write clearly and use no initials or nicknames)
- _____ (c) I agree to the following arrangement concerning custody and visitation: _____

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

Petitioner: _____ and Respondent: _____	Civil Action File No.: _____
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RULE NISI

This action has been filed. Therefore, let the parties appear before the Honorable Judge _____ of the Superior Court of Henry County, Flint Judicial Circuit in Courtroom _____, in the Henry County Courthouse, One Courthouse Square, McDonough, Georgia, on _____, 20____ at _____ o'clock ____m. to show cause why the relief sought should not be granted.

Issued on _____, 20____.

JUDGE
Superior Court of Henry County
Flint Judicial Circuit

Presented by:

 Petitioner Respondent *Pro se*

Name (print or type): _____
Address: _____

Telephone Number: _____
Email Address: _____

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

Petitioner: _____

and

Respondent: _____

Civil Action File No.: _____

ORDER

The above *Petition* having come before this Court, it is considered, ordered, and adjudged that:

1. Legitimacy

The child(ren) named in the *Petition*, to wit:

Child's Name	Year of Birth

be declared the legitimate child(ren) of the Petitioner, _____, and capable of inheriting from him.

The Department of Vital Statistics is hereby ordered and directed to amend and reissue the birth certificate of each child listed above to indicate the Petitioner, _____, is the father of said child(ren).

The Department of Vital Statistics is hereby ordered and directed to remove the name of _____ from the birth certificate of each child, and replace it with the name of the Petitioner, _____.

The surname of each child is hereby changed to _____. The Department of Vital Statistics is hereby ordered and directed to amend and reissue the birth certificate of each child listed above to reflect the change of the child(ren)'s name to:

(Write neatly and write the child's full name, using no initials or nicknames).

The *Agreement* entered into by the parties and filed with this Court on _____, 20____ is hereby attached and adopted by the Court. Each party is ORDERED to abide by the terms of the *Agreement*.

2. Custody and Visitation

Respondent having consented to the consideration of the issue of visitation in this action, visitation with the child(ren) is hereby granted to the Petitioner/Respondent as follows: _____

Respondent having consented to the consideration of the issue of custody in this action, custody of the child(ren) is hereby ordered as follows: _____

The mother, _____, of the minor child(ren) is deceased. The Petitioner is hereby awarded legal and physical custody of the minor child(ren).

3. Child Support

Application of Child Support Guidelines – The statutory requirements of O.C.G.A. § 19-6-15 have been applied in reaching the amount of child support provided under the *Order* in this action. The specifics are as follows:

- (1) Gross Income – The Father’s gross monthly income (before taxes) is \$ _____; the Mother’s gross monthly income (before taxes) is \$ _____.
- (2) Child(ren) – The number of children for whom support is being provided under this order is _____. Their names and dates of birth are as follows:

Child’s Name	Year of Birth

- (3) Attachments – The *Child Support Worksheet* and *Schedules* are attached hereto, along with any other applicable schedules.

(4) Child Support Amount – The _____ shall pay to the _____, for the support of the minor child(ren) in the sum of _____ dollars (\$ _____) per month, beginning on _____, 20_____, and continued with a payment of _____ dollars (\$ _____) on the _____ day of each and every month thereafter until the minor child(ren) reach the age of majority, become self-supporting, marry, die, no longer reside with the _____, or are otherwise emancipated, whichever of these events shall first occur. PROVIDED HOWEVER, that if at the time the parties' child(ren) attain eighteen (18) years of age, has not graduated from high school but is enrolled full time in high school and progressing toward graduation in the normal course, then such child support shall continue until such time as said child(ren) graduate from high school, is no longer enrolled full time and progressing normally, or attains the age of twenty (20) years, whichever first occurs.

(5) Deviation from Presumptive Amount

[Check and complete only one (1) of the following choices.]

- (a) No Deviation – It has been determined that none of the deviations allowed under O.C.G.A. § 19-6-15 applies in this case, as shown by the attached *Schedule E*. The amount of support in Paragraph 3 above is the Presumptive Amount of child support shown on the attached *Child Support Worksheet*.
- (b) Deviation – It has been determined that one or more of the Deviations allowed under O.C.G.A. § 19-6-15 applies in this case, as shown by the attached *Schedule E*. The Presumptive Amount of Child Support that would have been required under O.C.G.A. § 19-6-15, if the deviations had not be applied, is \$_____ per month, as shown on the attached *Child Support Worksheet*. The attached *Schedule E* explains the reasons for the deviation, how the application of the guidelines would be unjust or inappropriate considering the relative ability of each parent to provide support, and how the best interest of the children who are subject to this child support determination is served by deviation from the Presumptive Amount of Child Support.

(6) Health, Dental, & Vision Insurance for Children

[Check and complete only one (1) of the following choices.]

- (a) Insurance Available – The following insurance for the child(ren) involved in this action is available at a reasonable cost to the _____ through that parent's employer or the PeachCare Program:

Health (medical, mental health, and hospitalization) Dental Vision

So long as it remains available to that parent, the _____ shall maintain the types of insurance checked above for the benefit of the minor children, until each child reaches the age of eighteen (18), dies, marries, or otherwise becomes emancipated; except that if a child becomes eighteen years old while enrolled in and attending secondary school on a full-time basis, then the insurance shall be continued for the child until the child has graduated from secondary school or reaches twenty (20) years of age, whichever occurs first.

- (1) The parent who maintains the insurance shall provide the other parent with an insurance identification card or such other acceptable proof of insurance coverage and shall cooperate with the other parent in submitting claims under the policy.
- (2) All money received by one of the parties for claims processed under the insurance policy shall be paid within five (5) days after the party receives the money, to the other party (if that other party paid the applicable health care service provider) or to the applicable health care provider (if the provider has not been paid by one of the parties).
- (b) Insurance Not Available – Insurance (other than Medicaid) is not available at this time to either party at a reasonable cost. If health insurance for the children later becomes available to the parent who is required to pay child support for these children, then that parent must obtain the following types of insurance, unless it is then being provided by the other parent:
 Health (medical, mental health, and hospitalization) Dental Vision.
 When insurance has been obtained by either party, Paragraphs 4(b)(6)(a)(1) and (2) shall apply.
- (c) Insurance Not Available – This issue is not addressed in this *Final Judgment*, either because the Court lacks personal jurisdiction over the Respondent, or because neither party has asked the Court to address the issue of children’s health care expenses in this action.
 When insurance has been obtained by either party, Paragraphs 4(b)(6)(a)(1) and (2) shall apply.
- (7) Uninsured Health Care Expenses – The Father shall pay _____% and the Mother shall pay _____% of all expenses incurred for the child(ren)’s health care (including medical, dental, mental health, hospital, and vision care) that are not covered by insurance. The party who incurs a health care expense for one of the child(ren) shall provide verification of the amount to the other party. That other party shall reimburse the incurring party (or pay the health care provider directly) for the appropriate percentage of the expense, within thirty (30) days after receiving the verification of a particular health care expense.
- (8) Parenting Time Amounts – The approximate number of days of parenting time per year according to the *Visitation Schedule* is _____ days for the Father and _____ for the Mother.
- (9) Continuing Garnishment for Child Support – Whenever, in violation of the terms of the order, there shall have been a failure to make payments, so that the amount unpaid is equal to or greater than the amount payable for one month, the payments required to be made may also be collected by the process of continuing garnishment for support.
- (10) Income Withholding Order
[Check and complete only one (1) of the following choices.]
- (a) The parties shall prepare and submit an *Income Withholding Order* which shall be entered by the Court, under O.C.G.A. § 19-6-32, for payment of child support and alimony (if any). The *Income Withholding Order* shall take effect:
- (1) immediately upon entry by the Court.

- (2) upon accrual of a delinquency equal to one month's support. The *Income Withholding Order* may be enforced by serving a *Notice of Delinquency*, as provided in O.C.G.A. § 19-6-32(f).
- (b) The parties agree that an *Income Withholding Order* is not immediately necessary.
- (c) The Court finds that there is good cause to not require income deduction, having determined that income deduction will not serve the children's best interests and that there has been sufficient proof of timely payment of any previously ordered support.

This Order entered on _____ day of _____, 20_____.

Judge, Henry Superior Court
Flint Judicial Circuit

“Exhibit A” – Visitation Schedule

If the parties cannot agree on specific visitation, the _____ shall have the right to visitation according to the schedule below. To resolve any conflicts in the visitation provided under this schedule, the holiday visitation provided under paragraph (b) shall have priority over the weekend and summer visitation in paragraphs (a) and (c).

- (a) **Weekends** – The first and third weekends of every month, from Friday at 6:00 p.m. until Sunday at 6:00 p.m. The first and third weekends shall be defined as the weekends containing the first and third Fridays of the month.
- (b) **Holidays** – The children shall spend holidays with each parent on the following schedule:

[Check only one (1) preference per section. Be careful not to check the same numbered years for both parents.]

Holidays	With Father	With Mother
<p>Spring Vacation, from _____(time) on the day school lets out for vacation, until _____(time) on the day before the children return to school.</p> <p>If none of the children are enrolled in school, this vacation shall be for up to one week (seven consecutive days) during the months of March or April, provided that the visiting parent shall give written notice of the chosen week to the other parent at least 30 days prior to the beginning of this visitation.</p>	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years
<p>Easter Weekend, _____(time) Friday to _____(time) Sunday, provided that it does not conflict with Spring Vacation described above.</p>	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years
<p>Mother’s Day, from _____(time) to _____(time)</p>	Not applicable	Every year
<p>Memorial Day Weekend, _____(time) Friday to _____(time) Monday.</p>	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years
<p>Father’s Day, From _____(time) to _____(time)</p>	Every year	Not applicable
<p>Fourth of July, from _____(time) to _____(time)</p>	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years
<p>Labor Day Weekend, _____(time) Friday to _____(time). Sunday.</p>	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years

Thanksgiving Weekend , _____(time) Wednesday to _____(time) Sunday.	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years
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Holidays	With Father	With Mother
<p>First Part of Christmas Vacation, from _____(time) on the day school lets out for vacation, until _____(time) on December 25th.</p> <p>If none of the children are enrolled in school, this visitation shall be from _____(time) on December 20th until _____(time) on December 25th.</p>	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years
<p>Latter Part of Christmas Vacation, from _____(time) on December 25th to _____(time) on the day before the children return to school.</p> <p>If none of the children are enrolled in school, this visitation shall be from _____(time) on December 25th until _____(time) on January 1st.</p>	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years	<input type="checkbox"/> Even-number years <input type="checkbox"/> Odd-number years

- (c) Summer Vacation - _____ weeks during the children’s summer vacation from school. However, if none of the children are enrolled in school, this summer visitation shall be taken during the months of June, July, and August, until such time as one of the children begins to attend school. The weeks may be taken consecutively or non-consecutively, but shall be taken in increments of at least seven (7) consecutive days. The parent with visitation shall give written notice of the chosen weeks to the other parent on or before March 1st (so that both parties will have ample time to make camp and child care arrangements for the summer).

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

Petitioner: _____

and

Respondent: _____

Civil Action File No.: _____

PARENTING PLAN

This is an agreement between _____ and _____, the parents of the minor children whose names and birthdates are as follows:

Child's Name	Year of Birth

By signing below, the parties recognize that:

- (a) a close and continuing parent-child relationship and continuity in the child(ren)'s life will be in the child(ren)'s best interest;
- (b) the child(ren)'s needs will change and grow as the child matures;
- (c) each parent shall make decisions regarding the day-to-day care of a child while that child is residing with that parent, including any emergency decisions affecting the health or safety of a child; decisions that affect the other parent's parenting time shall be communicated promptly; and
- (d) both parents will have access to all of the child(ren)'s records and information, including but not limited to, education, health, extra-curricular activities, and religious communications.

Set forth below is the agreement of the parties on each of the issues listed:

- **Legal Custody**

- **Primary Physical Custody**

- **Major Decisions**

The parties will consult each other and attempt to arrive at consensus on major decisions. Should they be unable to reach consensus final decisions will be made as follows:

- | | | |
|-----------------------------------|---------------------------------|---------------------------------|
| Non-emergency health care | <input type="checkbox"/> Mother | <input type="checkbox"/> Father |
| Education | <input type="checkbox"/> Mother | <input type="checkbox"/> Father |
| Religious upbringing | <input type="checkbox"/> Mother | <input type="checkbox"/> Father |
| Extracurricular activities | <input type="checkbox"/> Mother | <input type="checkbox"/> Father |
| _____ | <input type="checkbox"/> Mother | <input type="checkbox"/> Father |
| _____ | <input type="checkbox"/> Mother | <input type="checkbox"/> Father |
| _____ | <input type="checkbox"/> Mother | <input type="checkbox"/> Father |

- **Parenting Schedule**

If the parties cannot otherwise agree, during the term of this parenting plan, the non-custodial parent or in joint custodial arrangements the mother / father, shall have at a minimum the following parenting time:

- First and third weekend of each month
- First, third, and fifth weekend of each month
- Second and fourth weekend of each month
- Every other weekend, starting on _____, 20_____.
- Each _____ starting at _____ a.m./ p.m. and ending at _____ a.m./ p.m.
- Other: _____

- Weekday times include:
 - None
 - Every _____ evening.
 - Every other _____ evening during the week prior to a non-visitation weekend.
 - Every _____ and _____ evening.
 - Other: _____

For the purposes of this parenting plan, a weekend will start at _____ a.m./ p.m. on Thursday/ Friday/ Saturday/ Other: _____ and end at _____ a.m./ p.m. on Sunday/ Monday/ Other: _____.

Weekday time will begin at _____ a.m./ p.m. and will end at _____ p.m. when the child(ren) return(s) to school or day care the next morning.

Other: _____

This parenting schedule begins _____, 20____ or on the date of the Court's Order.

- **Fall Vacation**

The day to day schedule shall apply except as follows: _____

_____ beginning on _____, 20_____.

- **Winter Vacation**

The mother/ father shall have the child(ren) for the first period from the day and time school is dismissed until December _____ at a.m./ p.m. in odd numbered year/ even number years/ every year. The other parent will have the child(ren) for the second period from the day and time indicated above until _____ at a.m./ p.m. The parties shall alternate the first and second periods each year. Or, the parties have chosen a different winter vacation plan as set out here: _____

- **Spring Vacation**

The day to day schedule shall apply except as follows: _____

_____ beginning on _____, 20_____.

- **Summer Vacation**

The day to day schedule shall apply except as follows: _____

 _____ beginning on _____, 20_____.

Note: Parents will confer with each other by _____ each year to confirm school breaks/vacations and by _____ to determine summer parenting schedule.

- **Special Days and Holidays**

Indicate whether the child(ren) will be with the parent in ODD or EVEN number years or EVERY year:

Holiday	Mother	Father	Start/Stop Time
Martin Luther King Day			
President's Day			
Mother's Day			
Father's Day			
July Fourth			
Labor Day			
Halloween			
Thanksgiving Day and Friday			
Child(ren)'s Birthday			
Free School Days			
Mother's Birthday			
Father's Birthday			
Religious Holidays			
Other			

- **Schedule Conflicts**

When holiday parenting times conflict with extended/summer parenting time:

- holiday schedule will be observed
- extended visitation will be uninterrupted
- other: _____

If there is conflict between the regular schedule and the holiday schedule, the holiday schedule will prevail.

For the purposes of this parenting plan, the holiday will start and end as follows:

- Holidays that fall on Friday will include the following Saturday and Sunday.
- Holidays that fall on Monday will include the preceding Saturday and Sunday.
- Other: _____

- **Transportation Arrangements**

Exchanging the child(ren) between the parents shall take place as follows: _____

Payment of long distance transportation costs, if applicable, will be paid by: mother/ father / both equally

Long distance for purposes of transportation are defined as: _____

Other transportation arrangements (Ex: disabled parent, parent without a valid driver’s license, other approved drivers, etc.): _____

Should the parent picking up the child(ren) exceed a _____ minute grace period without prior notification or alerting the other parent by phone of an unavoidable breakdown or delay en route, the parenting time for that period is forfeited.

Should either party repeatedly cause a delay by not having the child(ren) prepared for exchange or being late for pick-up or return, a modification of parenting time may be sought. Repeatedly causing delay is defined as: _____

- **Relocation**

If either parent decides to relocate more than _____ miles away from the other parent’s home, the moving parent will give the other parent written notice of the intent to relocate no less than 30 days/ 60 days/ 90 days/. 180 days prior to the date of moving.

- **Communication Access**

The parents agree that when the child(ren) resides with one parent, the other parent will have the right to unimpeded telephone conversations with the child(ren) as follows: *[Check all that apply.]*

- Unrestricted telephone access during reasonable hours and of reasonable duration.
- _____ telephone calls to the child(ren) per day/week with the duration of each call not to exceed _____ minutes within the following time consideration: _____
- The child(ren) is allowed to call either parent at any time.
- Other agreed provisions for telephone/e-mail access: _____

• **Other Parenting Time Provisions and Agreements**

- Each parent shall promptly notify the other parent of a change of address, phone number, or cell phone number so that the other parent may exercise their parenting time, notify the other parent as needed, and reach the child(ren) while they are in the other parent's household.
- When making childcare arrangements while the child is with them, parents agree to the following (Ex: age before child(ren) will be left alone, appropriate caregivers, right of first refusal to provide care, etc.): _____

- Excluding any agreed limitation on access rights below, both parents will have access to the child(ren)'s records and information, including but not limited to education, health, extracurricular activities and religious communications. Agreed limitations: _____

- Mother/ Father will notify school authorities where child(ren) is enrolled each year to list both parents to receive all notifications and reports.
- Each parent shall promptly notify the other parent of any information received through the child(ren) concerning parent meetings, reports, school activities in which the child(ren) may be engaged or interested.

Parents will consult with each other prior to scheduling any activity that will impact time the other parent spends with the child(ren).

Additional agreements: _____

• **Supervised Parenting Time**

Supervised parenting time shall apply during day-to-day schedule as follows:

Place: _____

Person/Organization supervising: _____

Responsibility for cost: Mother Father both equally

Any transition to alter supervised parenting would require _____

• **Modification of Plan**

Over time, as the child(ren)'s and families' circumstances/needs change, parties may, by mutual agreement, vary the parenting schedule. Such altered agreements shall not be a binding court order and custody shall only be modified by court order.

Prior to involving the court in resolving disagreements, parties will attempt further mediation, consultation with a child specialist/family counselor or _____.

I have read, understand, and agree to each of the provisions of this *Parenting Plan Agreement*, this _____ day of _____, 20_____.

Sign your name before Notary) PETITIONER, *Pro se*

Name (print or type): _____

Address: _____

Daytime Telephone Number: _____

Email Address: _____

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

NOTARY PUBLIC

My commission expires: _____
(Notary Seal)

Signatures continue on following page

I have read, understand, and agree to each of the provisions of this *Parenting Plan Agreement*, this _____ day of _____, 20_____.

Sign your name before Notary) RESPONDENT, *Pro se*

Name (print or type): _____

Address: _____

Daytime Telephone Number: _____

Email Address: _____

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

NOTARY PUBLIC

My commission expires: _____
(Notary Seal)

ORDER

The Court has reviewed the foregoing *Parenting Plan*, and it is hereby made the order of this Court.

This Order entered on _____, 20_____ .

Judge, Henry Superior Court
Flint Judicial Circuit

**N THE SUPERIOR COURT OF HENRY COUNTY
STATE OF GEORGIA**

Petitioner: _____

and

Respondent: _____

Civil Action File No.: _____

CHILD SUPPORT ADDENDUM

Instructions: All parts of this Addendum must be completed and it must be attached to all final orders and judgments determining the amount of child support. However, it is not required for orders on contempt motions.

[You must check one of the following boxes.]

- () The parties have agreed to the terms of this order and this information has been furnished by both parties to meet the requirements of OCGA §19-6-15. The parties agree on the terms of the order and affirm the accuracy of the information provided, as shown by their signatures at the end of this addendum.
- () This addendum includes findings of fact and conclusions of law and fact made by the Court, in compliance with OCGA §19-6-15.

Application of Child Support Guidelines. The statutory requirements of OCGA §19-6-15 have been applied in reaching the amount of child support provided under the final order in this action. The specifics are as follows:

1. Gross Income - The Father's gross monthly income (before taxes) is \$ _____ ; the Mother's gross monthly income is \$ _____ (before taxes).
2. Number of Children - The number of children for whom support is being provided under this order is _____ .
3. Attachments - The *Child Support Worksheet* and *Schedule E* are attached and made a part of this addendum, along with any other applicable schedules.
4. Child Support Amount - The _____ shall pay to the _____, for the support of the minor children, the sum of _____ Dollars (\$ _____) per month, beginning on _____, 20 ____.
5. **Duration of Child Support**

*[You must check & complete **only one** of the following paragraphs.]*

- () (a) **Beyond Age 18 for High School** - The child support shall continue monthly thereafter until each child reaches the age of eighteen, dies, marries, or otherwise becomes emancipated; provided that if a child becomes eighteen years old while enrolled in and attending secondary school on a fulltime basis, then the child support shall continue for the child until the child has graduated from secondary school or reaches twenty years of age, whichever occurs first.

- () (b) **Stops at Age 18** - The child support shall continue monthly thereafter until each child reaches the age of eighteen, dies, marries, or otherwise becomes emancipated.
- () (c) **Until Further Order** - This is not a final order, so the child support shall continue until further order of this Court.
- () (d) **Until Specific Date** - The child support shall continue monthly thereafter until _____.

6. **Split Parenting** – A split parenting situation occurs when the parents have two or more children together, where at least one of the children spends more than 50% of the time with one parent, and at least one of the children spends more than 50% of the time with the other parent.

*[You must check & complete **only one** of the following paragraphs.]*

- () (a) **Not Split Parenting Case** - This case does not involve Split Parenting.
- () (b) **Split Parenting Case** – This is a Split Parenting Case. Separate *Child Support Worksheets* have been filed for the children living with the Mother and for the children living with the Father, and a *Child Support Addendum* has been entered on this action for each parent. At this time, Mother is obligated to pay the sum of \$ _____ per month to the Father, and the Father is obligated to pay the sum of \$ _____ per month to the Mother.

*[To complete (b), you must check & complete **only one** of the following sub paragraphs: (1), (2) or (3)]*

() 1. **Net Payment** - For so long as these amounts remain in effect, the _____ shall pay only the difference between the two amounts (which is \$ _____) to the _____, who shall not be required to pay the child support obligation to the other parent.

() 2. **Zero Payment** - The parents’ child support obligations are equal. For so long as the amounts remain equal, neither parent shall pay any child support payment to the other parent.

() 3. **Full Payment From Each** – Each parent shall pay the full amount of his or her child support obligation to the other.

7. **Deviation from Presumptive Amount**

*[You must check & complete **only one** of the following paragraphs.]*

- () (a) **No Deviation** - It has been determined that none of the Deviations allowed under OCGA §19-6-15, applies in this case. The amount of support in Paragraph 4 above is the Presumptive Amount of Child Support shown on the attached *Child Support Worksheet*.
- () (b) **Parenting Time Deviation Only**– It has been determined that the “Parenting Time” Deviation allowed under O.C.G.A. ' 19-6-15 applies in this case, as shown by the attached Child Support Worksheet and Schedule E. The amount of support in Paragraph 4 above is the Final Child Support Amount shown on the attached Child Support Worksheet.
- () (c) **Deviation** - It has been determined that one or more of the Deviations allowed under OCGA §19-6-15 applies in this case, as shown by the attached *Schedule E*. The Presumptive Amount of Child Support that would have been required under OCGA §19-6-15 if the deviations had not been applied is \$ _____ per month, as shown on the attached *Child Support Worksheet*. The attached *Schedule E* explains the reasons for

the deviation, how the application of the guidelines would be unjust or inappropriate considering the relative ability of each parent to provide support, and how the best interest of the children who are subject to this child support determination is served by deviation from the presumptive amount of child support.

8. **Health, Dental & Vision Insurance for Children**

*[You must check & complete all parts of **only one** of the following paragraphs, (a) or (b).]*

- () (a) **Insurance Available** - The following insurance for the children involved in this action is available at a reasonable cost to the _____ through that parent’s employer or the PeachCare program:

() Health (medical, mental health and hospitalization) () Dental () Vision

So long as it remains available to that parent, the _____ shall maintain the types of insurance checked above for the benefit of the minor children, until each child reaches the age of eighteen, dies, marries, or otherwise becomes emancipated; except that if a child becomes eighteen years old while enrolled in and attending secondary school on a full-time basis, then the insurance shall be continued for the child until the child has graduated from secondary school or reaches twenty years of age, whichever occurs first.

(1) The parent who maintains the insurance shall provide the other parent with an insurance identification card or such other acceptable proof of insurance coverage and shall cooperate with the other parent in submitting claims under the policy.

(2) All money received by one of the parties for claims processed under the insurance policy shall be paid within five (5) days after the party receives the money, to the other party (if that other party paid the applicable health care service provider) or to the applicable health care provider (if the provider has not been paid by one of the parties).

- () (b) **Insurance Not Available** - Insurance (other than Medicaid) is not available at this time to either party at a reasonable cost. If health insurance for the children later becomes available to the parent who is required to pay child support for these children, then that parent must obtain the following types of insurance, unless it is then being provided by the other parent:

() Health (medical, mental health and hospitalization) () Dental () Vision.

When insurance has been obtained by either party, Paragraphs 7 (a)(1) and (2) shall apply.

9. **Uninsured Health Care Expenses** - The _____ shall pay _____% and the _____ shall pay _____% of all expenses incurred for the children’s health care (including medical, dental, mental health, hospital and vision care) that are not covered by insurance. The party who incurs a health care expense for one of the children shall provide verification of the amount to the other party. That other party shall reimburse the incurring party (or pay the health care provider directly) for the appropriate percentage of the expense, within fifteen (15) days after receiving the verification of a particular health care expense.

10. **Parenting Time Amounts** - The approximate number of days of parenting time per year according to the visitation order is _____ days for the Father and _____ days for the Mother.

11. **Social Security Benefits**

*[You must check & complete **only one** of the following paragraphs.]*

- () (a) **Not Received** - The children do not receive Title II Social Security benefits under the account of the parent ordered to pay child support.

- () (b) **Received** - The children receive Title II Social Security benefits under the account of the parent ordered to pay child support. The benefits received by the children shall be counted as child support payments, and shall be applied against the final child support order to be paid by that parent.

(1) If the amount of benefits received is less than the amount of support ordered, the obligor shall pay the amount exceeding the Social Security benefit.

(2) If the amount of benefits received is equal to or more than the amount of support ordered, the obligor's responsibility is met and no further support shall be paid.

(3) Any Title II benefits received for the children's benefit shall be retained by the custodial parent or nonparent custodian for the children's benefit, and it shall not be used as a reason for decreasing the final child support order or reducing arrearages.

12. **Modification**

*[You must check & complete **only one** of the following paragraphs.]*

- () (a) **Not Modification Action** - This is an initial determination of child support, not a modification action.
- () (b) **Support Not Modified** - This action is a modification action, but the order does not modify the amount of child support that was previously ordered for these children. The date of the initial support order concerning this child support case was: _____.
- () (c) **Support Amount Modified** - The order modifies the amount of child support that was previously ordered for these children. The basis for the modification is:
- () (1) Substantial change in the income and financial status of the Father;
 - () (2) Substantial change in the income and financial status of the Mother;
 - () (3) Substantial change in the needs of the Children;
 - () (4) The noncustodial parent failed to exercise visitation provided under the prior order;
 - () (5) The noncustodial parent has exercised more visitation than was provided in the prior order.

The date of the initial support order concerning this child support case was: _____ .

13. **Continuing Garnishment for Child Support** - Whenever, in violation of the terms of the order, there shall have been a failure to make the support payments, so that the amount unpaid is equal to or greater than the amount payable for one month, the payments required to be made may also be collected by the process of continuing garnishment for support.

14. **Income Deduction Order**

*[You must check & complete **only one** of the following paragraphs: (a), (b) or (c).]*

- () (a) An *Income Deduction Order* shall be entered by the Court, under OCGA § 19-6-32, for payment of the child support and alimony (if any) provided. The *Income Deduction Order* shall take effect:
- [To finish (a), you must check either (1) or (2). Do not check both.]*
- () (1) immediately upon entry by the Court.
 - () (2) upon accrual of a delinquency equal to one month's support. The *Income Deduction Order* may be enforced by serving a "Notice of Delinquency," as provided in OCGA §19-6-32 (f).
- () (b) The parties agree that an *Income Deduction Order* is not immediately necessary.

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

Petitioner: _____

and

Respondent: _____

Civil Action File No.: _____

DOMESTIC RELATIONS FINANCIAL AFFIDAVIT

(1) Your Name:		Your Age:	
Spouse's Name		Spouse's Age:	
Date of Marriage:		Date of Separation:	
Names and birth dates of child(ren) for whom support is to be determined in this action:			
Name:	Year of Birth:	Resides With:	
Names and birth dates of your other child(ren):			
Name:	Year of Birth:	Resides With:	
(2) SUMMARY OF YOUR INCOME AND NEEDS: (fill out this part after you complete pages 2-5 of this form)			
(a) Gross Monthly Income (from Item 3A below) (before taxes)			\$
(b) Net Monthly Income (from Item 3B below) (after taxes)			\$
(c) Average Monthly Expenses (Item 5A below)			\$
Monthly Payments to Creditors (Item 5B below)			\$
Total Monthly Expenses & Payments to Creditors (Item 5C below)			\$

(3) (a) YOUR GROSS MONTHLY INCOME: (Complete this section or attach Child Support Schedule A). (All income must be entered based on monthly average regardless of date of receipt. Where applicable, income should be annualized.)

Salary or Wages – ATTACH COPIES OF 2 MOST RECENT WAGE STATEMENTS	\$
Commissions, Fees & Tips	\$
Income from self-employment, partnership, close corporations and independent contracts (gross receipts minus ordinary and necessary expenses required to produce income) ATTACH SHEET ITEMIZING YOUR CALCULATIONS	\$
Rental income (gross receipts minus ordinary and necessary expenses required to produce income) ATTACH SHEET ITEMIZING YOUR CLACULATIONS	\$
Bonuses	\$
Overtime Payments	\$
Severance Pay	\$
Recurring Income from Pensions or Retirement Plans	\$
Interest and Dividends	\$
Trust Income	\$
Income from Annuities	\$
Capital Gains	\$
Social Security Disability or Retirement Benefits	\$
Worker’s Compensations Benefits	\$
Unemployment Benefits	\$
Judgments from Personal Injury or Other Civil Cases	\$
Gifts (cash or other gifts that can be converted to cash)	\$
Prizes & Lottery Winnings	\$
Alimony and maintenance from persons not in this case	\$
Assets which are used for support of family	\$
Fringe Benefits (if significantly reduce living expenses)	\$
Any Other Income (Do not include means-tested public assistance, such as TANF or food stamps.)	\$
TOTAL Gross Monthly Income (also write in 2A on page one)	\$
(3) (b) Net Monthly Income From Employment (deducting only state and federal taxes and FICA) (also write in 2B on page one of this form)	\$
Your Pay Period (i.e. monthly, weekly, etc.):	Number of Exemption Claimed by You for Tax Purposes:

(4) ASSETS

(List all assets here, including both non-marital and marital property. If you claim or agree that all or part of an asset is non-marital, indicate the non-marital portion under the appropriate spouse's column and state the amount and the basis: pre-marital, gift, inheritance, source of funds, etc. The total value of each asset must be listed in the "value" column. "Value" means what you feel the item of property would be worth if it were offered for sale.)

Description	Value	Separate Asset of Husband	Separate Asset of Wife	Basis of the Claim (pre-marital, gift, inheritance, etc.)
Cash	\$	\$	\$	
Stocks, Bonds	\$	\$	\$	
CD's/Money Market Accounts	\$	\$	\$	
Bank Accounts (list each account below, any account numbers should only include last four digits):				
(1)	\$	\$	\$	
(2)	\$	\$	\$	
(3)	\$	\$	\$	
Retirement Pensions, 401(k), IRA or Profit-Sharing	\$	\$	\$	
Money Owed to You (or Spouse)	\$	\$	\$	
Tax Refund Owed to You	\$	\$	\$	
Real Estate (list properties & mortgages):				
Home	\$	\$	\$	
Debt owed on Home	\$			
Other Real Estate	\$	\$	\$	
Debt owed on Other Real Estate	\$			
Automobiles/Vehicles (list vehicles & amounts owed on each one):				
(1)	\$	\$	\$	
Debt owed on Vehicle (1)	\$			
(2)	\$	\$	\$	
Debt owed on Vehicle (2)	\$			
Life Insurance (net cash value)	\$	\$	\$	
Furniture/Furnishings	\$	\$	\$	
Jewelry	\$	\$	\$	
Collectibles	\$	\$	\$	

Other Assets (specify):	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
TOTAL ASSETS	\$	\$	\$	

(5) (a) AVERAGE MONTHLY EXPENSES FOR YOU AND YOUR HOUSEHOLD

HOUSEHOLD EXPENSES

Mortgage or Rent Payments	\$	Gas	\$
Property taxes	\$	Repairs & Maintenance	\$
Homeowner's/Renter's Insurance	\$	Lawn Care	\$
Electricity	\$	Pest Control	\$
Water	\$	Cable TV/Internet Access	\$
Garbage & Sewer	\$	Misc. Household & Grocery Items	\$
Telephones	\$	Meals Outside Home	\$
Residential Lines	\$	Other (specify)	\$
Cellular Telephones	\$		\$

AUTOMOTIVE

Gasoline & Oil	\$	Auto Tags/Registration/License	\$
Repairs & Maintenance	\$	Insurance	\$

OTHER VEHICLES (boats, trailers, RVs, etc.)

Gasoline & Oil	\$	Tags/Registration/License	\$
Repairs & Maintenance		Insurance	

CHILDREN'S EXPENSES

Child Care (total monthly cost)	\$	Allowance	\$
School Tuition	\$	Child(ren)'s Clothing	\$
Tutoring	\$	Diapers	\$
Private lessons (e.g. music, dance)	\$	Medical, Dental, Prescriptions (out-of-pocket uncovered expenses)	\$
School Supplies/Expenses	\$	Grooming/Hygiene	\$
Lunch Money	\$	Gifts from child(ren) to others	\$

Other Educational Expenses (list type & amount)	Entertainment	\$
	\$	Activities (including extra-curricular, school, religious, cultural, etc.)
	\$	Summer Camps

OTHER INSURANCE

Health Insurance	\$	Life Insurance	\$
Child(ren)'s portion:	\$	Relationship of Beneficiary:	
Dental Insurance	\$	Disability Insurance	\$
Child(ren)'s portion:	\$	Other Insurance (specify)	\$
Vision Insurance	\$		\$
Child(ren)'s portion:	\$		\$

YOUR OTHER EXPENSES

Dry Cleaning & Laundry	\$	Publications	\$
Clothing	\$	Dues, Clubs	\$
Medical/Dental/Prescription (out-of-pocket uncovered expenses)	\$	Religious & Charities	\$
Your gifts (special holidays)	\$	Pet expenses	\$
Entertainment	\$	Alimony Paid to Former Spouse	
Recreational Expenses (e.g. fitness)	\$	Child Support Paid for other child(ren)	\$
Vacations	\$	Date of initial CS order:	
Travel Expenses for Visitation	\$	Other (attach sheet to list)	\$
TOTAL ABOVE MONTHLY EXPENSES <i>(also write on first line of 2C on page one of this form)</i>			\$

5 (b) YOUR PAYMENTS & DEBTS TO CREDITORS

To Whom:	Balance Due	Monthly Payments	(Please check one)		
			Joint	Husband	Wife
	\$	\$			
	\$	\$			
	\$	\$			
	\$	\$			
	\$	\$			

	\$	\$			
Total Monthly Payments to Creditors <i>(also write this total on line 3 of 2C on page one of this form)</i>					\$
(5) (c) TOTAL MONTHLY EXPENSES <i>(Total Expenses from final line on page 5 + Total Monthly Payments to Creditors above) (also write this total on line 3 or 2C on page one of this form)</i>					\$

 (Sign your name before Notary) Petitioner Respondent, *Pro se*

Name (print or type): _____

Address: _____

Daytime Telephone Number: _____

Email Address: _____

Sworn to and affirmed before me, this

_____ day of _____.

NOTARY PUBLIC

My commission expires: _____

(Notary Seal)

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

_____,
PETITIONER,

VERSUS

_____,
RESPONDENT.

CIVIL ACTION FILE NUMBER

**RESPONDENT'S ANSWER TO PETITIONER'S
PETITION FOR LEGITIMATION**

My name is _____, and I am representing myself in this legitimation action.

In support of my case, I state the following:

1.

Respondent (CIRCLE ONE: ADMITS OR DENIES) the allegations contained in Paragraph 1 of Petitioner's Petition for Legitimation.

2.

Respondent (CIRCLE ONE: ADMITS OR DENIES) the allegations contained in Paragraph 2 of Petitioner's Petition for Legitimation.

3.

Respondent (CIRCLE ONE: ADMITS OR DENIES) the allegations contained in Paragraph 3 of Petitioner's Petition for Legitimation.

4.

Respondent (CIRCLE ONE: ADMITS OR DENIES) the allegations contained in Paragraph 4 of Petitioner's Petition for Legitimation.

5.

Respondent (CIRCLE ONE: ADMITS OR DENIES) the allegations contained in Paragraph 5 of Petitioner's Petition for Legitimation.

6.

Respondent (CIRCLE ONE: ADMITS OR DENIES) the allegations contained in Paragraph 6 of Petitioner's Petition for Legitimation.

7.

Respondent (CIRCLE ONE: ADMITS OR DENIES) the allegations contained in Paragraph 7 of Petitioner's Petition for Legitimation.

8.

Respondent (CIRCLE ONE: ADMITS OR DENIES) the allegations contained in Paragraph 8 of Petitioner's Petition for Legitimation.

Signed this _____ day of _____, 20____.

(Sign your name here before notary) Respondent, *Pro Se*

Respondent's Name (Print or Type): _____

Respondent's Address: _____

Respondent's Telephone Number: _____

Respondent's Email Address: _____

Sworn to and affirmed before me

this ____ day of _____, 20____.

NOTARY PUBLIC

My Commission Expires: _____

(Notary Seal)

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

_____, PETITIONER, VERSUS _____, RESPONDENT.		CIVIL ACTION FILE NUMBER _____
------------------------------------------------------------------	--	---------------------------------------

CERTIFICATE OF SERVICE

This document certifies that on _____, 20____, I sent copies of the following documents:

ANSWER TO PETITIONER’S PETITION FOR LEGITIMATION

to the opposing party by: (CHOOSE ONE: first class mail OR certified mail and return receipt was requested).

The documents were addressed as follows:

Signed this _____ day of _____, 20_____.

(Sign your name here before notary) Respondent, *Pro Se*
Respondent’s Name (Print or Type): _____
Respondent’s Address: _____
Respondent’s Telephone Number: _____
Respondent’s Email Address: _____

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

NOTARY PUBLIC
My Commission Expires: _____
(Notary Seal)

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

Petitioner: _____

and

Respondent: _____

Civil Action File No.: _____

MOTION FOR JUDGMENT ON THE PLEADINGS

Comes now _____, Petitioner in the above-styled action, and files this Motion for Judgment on the Pleadings in the above-styled case as follows:

1. The Petition in the above-styled case was filed on _____.
2. The Respondent was served as required by law.
3. A Settlement Agreement was entered into between the parties and filed on _____.

WHEREFORE, there being no contested issues of law or fact, Petitioner moves this Court for a Judgment on the Pleadings in the above-styled case.

Signed this _____ day of _____, 20____.

(sign your name here) Petitioner, *Pro Se*

Petitioner's Name (Print or Type): _____

Petitioner's Address: _____

Petitioner's Telephone Number: _____

Petitioner's Email Address: _____

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

Petitioner: _____ and Respondent: _____	Civil Action File No.: _____
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RULE NISI

This action has been filed. Therefore, let the parties appear before the Honorable Judge _____ of the Superior Court of Henry County, Flint Judicial Circuit in Courtroom _____, in the Henry County Courthouse, One Courthouse Square, McDonough, Georgia, on _____, 20____ at _____ o'clock ____m. to show cause why the relief sought should not be granted.

Issued on _____, 20____.

JUDGE
Superior Court of Henry County
Flint Judicial Circuit

Presented by:

 Petitioner Respondent, *Pro se*

Name (print or type): _____

Address: _____

Daytime Telephone Number: _____

Email Address: _____