



State of Kansas
29th Judicial District
Wyandotte County Courthouse
Kansas City, Ks

INSTRUCTIONS FOR FILING A PATERNITY CASE

WARNINGS and GENERAL INFORMATION:

- A. The *pro se* forms available through Wyandotte County's Self-Help Center are basic. These forms do NOT deal with every situation. A paternity case can be complicated, and using legal forms without an attorney's help may not be advisable.
- B. Court staff CANNOT give you legal advice or tell you exactly how to fill out your pleadings. If you have legal questions or a complicated case, you should talk to an attorney. An attorney from Kansas Legal Services is available in the Self-Help Center on Wednesdays.
- C. Our courts require everyone to follow court rules. If you cannot follow the court rules you may not be able to finalize your paternity case. If you choose to represent yourself (meaning you are acting as your own attorney), you are still expected to know and follow the same court rules and laws as an attorney.
- D. When your case is filed, you will be given a case number. Your case "caption" with this case number must be included on all pleadings or documents you file with the Court in the future.
- E. After you have filed your initial pleadings and Civil Cover Sheet, which includes your address and contact information, you must inform the Clerk of the District Court and your assigned Division of any changes. A Notice of Change of Address is available in the Self-Help Center.

INSTRUCTIONS FOR FILING AND SERVING YOUR PATERNITY PLEADINGS:

Filing:

- A. To start a paternity case, you must complete and file the following documents:
- a. Civil Information Sheet – a general information form for the Clerk’s office.
 - b. Paternity Petition– the main pleading alleging parenthood and requesting custody orders and child support.
 - c. Domestic Relations Affidavit (DRA) – a sworn affidavit of your income and other facts for Child Support purposes.
 - d. Proposed Parenting Plan – for custody, parenting time, exchanges.
 - e. Request and Service Form, if not filing a Voluntary Entry of Appearance and Summons
- B. After filling out the above forms, Sign the Paternity Petition and the Domestic Relations Affidavit in front of a notary public. Notary publics may commonly be found in the Court House, law firms, title companies and financial institutions, i.e. banks and credit unions. Once they have been notarized, you must file them in the Civil Department on the 3rdFloor.

At the time of filing you must pay the filing fee of \$195.00.

Service:

You must notify the alleged father (or the mother) that you have filed a Paternity Petition in one of the following ways:

- a. “Voluntary Entry of Appearance”: the other party signs a Voluntary Entry of Appearance form in front of a notary public, which acknowledges receipt of the Paternity Petition. You must make sure the Voluntary Entry of Appearance with the other party’s original signature is then filed with the Clerk.
- b. “Sheriff’s Service”: The Clerk issues the “Summons” and the Sheriff “serves” it on the respondent. You must fill out a Request for Service Form, requesting that the sheriff deliver the Petition, a summons and other documents to the other party. The sheriff’s service fee is \$15.00. If he/she lives in a state other than Kansas, contact the sheriff of the county they live in to find out what the service fee is. You must include a separate check/money order for the service fee.
- c. “Court Process Server”: The Clerk issues the “Summons” and the Court Process Server “serves” it on the respondent. The Court Process Server can only be used if the respondent lives in Wyandotte County.

d. **“Certified Mail Service”**: You must mail the summons and Paternity Petition by certified mail - return receipt requested to the other party at his or her last known residential address. File the “green” “return-receipt card” with the Clerk when you receive it from the US Postal Service. Use the “Return of Service” form.

e. **“Publication”**: If you cannot provide notice of the Paternity Petition under either (a), (b), or (c), then you may be able to provide notice of the case by publishing notice in a local newspaper. In order to obtain “publication service,” you must request permission to do so by filing the “Affidavit for Service by Publication,” and obtaining an order from the assigned judge allowing you to publish notice. After you obtain the signed “Order Allowing Service by Publication,” you must then publish notice following the process set out in K.S.A. 60-307. You must obtain “proof of publication” from the newspaper and file the proof with the Court.

INSTRUCTIONS FOR COMPLETING YOUR PATERNITY CASE AFTER FILING

1. **FILE THE NOTICE OF HEARING.** Once you have filed your Paternity Petition you should get a *hearing date and time* from the Administrative Assistant in the Division your case gets assigned to. You will need to fill out and file a Notice of Hearing with the Civil Department. Once you file it, you will need to send a copy to the other party either by certified mail or first-class mail. You will then fill out the “Certificate of Service” portion of the form, swearing that you have mailed the Notice of Final Hearing to the other party.
2. **ATTEND THE EFFECTIVE CO-PARENTING TECHNIQUES CLASS.** You are required to attend the “ETC” class with Domestic Court Services prior to your final hearing. You will turn the Order for ECT in AFTER your first hearing. Classes are currently being held via ZOOM and registration is required. More information is available on our website www.wycodistrictcourt.org/effective-co-parenting-technique. Proof of attendance of the ETC class will be electronically filed with the clerk’s office by Domestic Court Services prior to your final hearing.
3. **HAVE A PARENTING PLAN.** You must decide on a Permanent Parenting Plan prior to your final hearing. Complete the attached Parenting Plan form and take with it you to the final hearing. You must file it with the Civil Clerk’s Office after your hearing.

4. **COMPLETE A CHILD SUPPORT WORKSHEET.** You must prepare EITHER a Child Support Worksheet OR a Shared Expense Plan prior to your final hearing.

Parents CANNOT make their own agreement or “deal” with regard to child support. All child support orders must comply with the Kansas Child Support Guidelines, which are by order of the Kansas Supreme Court.

- a. You can read the Kansas Child Support Guidelines online at <http://www.kscourts.org/Rules-procedures-forms/Child-support-guidelines/2012-guidelines.asp>. Click on “Clean Version” on the website to read the guidelines in full. Section IV of the Guidelines contains specific instructions for completing a child support worksheet.
- b. The easiest way to complete a Child Support Worksheet is to use the Bradley Software Child Support Calculator. The Bradley Software guides you through the child support worksheet with an easy question-and-answer format, and it does the child support calculations for you. The attorney in the Self-Help Center can help you fill out the Child Support Worksheet. You can also download a one-day free trial of the Bradley Software online at <http://www.bradleysoftware.com/free-trial.asp>.
- c. Parents who share time with their children equally or nearly equally under their parenting plan may be able to use a Shared Expense Plan instead of a Child Support Worksheet. Sharing expenses is complicated and is intended for highly cooperative parents who are committed to keeping good records and communicating regularly. The Court will only approve a shared expense plan if it is a voluntary, detailed, written, signed agreement. Examples of Shared Expense Plans that comply with the state guidelines may be found as an appendix to the Child Support Guidelines, linked above, or are available in the Self-Help Center. *Note that even if you have a shared expense plan, you must still prepare and bring a Child Support Worksheet.*

JOURNAL ENTRY OF PATERNITY. You are responsible for drafting and filing your proposed Journal Entry of Paternity. Blank order forms are available in the Self-Help Center and at www.wycodistrictcourt.org/forms. This is the document that legally establishes the parent/child relationship, orders legal custody and parenting time, and orders child support.

5. ATTEND THE FINAL HEARING

As mentioned above, you should **bring the following documents** to your final hearing:

1. A Parenting Plan signed by you (and the other parent if possible)
2. A completed Child Support Worksheet OR Shared Expense Plan
3. Current Domestic Relations Affidavit of each party (petitioners should be on file from initial filing. It may not always be possible to get one from an absent or uncooperative parent).
4. Acknowledgment of Paternity form if you have it.
5. Effective Co-Parenting Techniques Class Certificates of Attendance of both parents (or at least yours).
6. Completed Kansas Payment Center Child Support Order Information Sheet (if there is no shared expense plan).
7. A file stamped copy of your Notice of Hearing Return, stating who you served, how you served them and when you served them.

At the final hearing the judge will ask you for these documents. You should be prepared to tell the Judge about the basic facts supporting your allegation of paternity. You should also be prepared to tell the judge why your proposed Parenting Plan is in the children's best interests.

After the judge has approved your agreements, you must file an Order/Journal Entry with the courts. This form is available at the Self-Help Center and, on our website, www.wycodistrictcourt.org/forms. You must make sure that your order/journal entry is as specific as possible, taking notes during your ZOOM hearing if needed. Once you have filled out the order, take it to the Civil Department and they will place it in the Judges box. You will be notified if the Judge approves your order or not. You must provide a file-stamped copy of all final pleadings to the other parent, and you should keep copies for your own records as well.

WARNING – no paternity or child support orders are in place until your Journal Entry of Paternity has been filed with the Clerk of the District Court.

IF YOU NEED TO CANCEL OR RESCHEDULE YOUR FINAL HEARING, PLEASE CONTACT THE DIVISION ADMINISTRATIVE ASSISTANT IMMEDIATELY. RESCHEDULING YOUR FINAL HEARING WILL REQUIRE YOU TO SERVE A NEW NOTICE OF HEARING

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS
CIVIL COURT DEPARTMENT

ORDERS CONCERNING ZOOM PROCEEDINGS

NOW ON THIS 15th day of June, 2023 the Court enters orders concerning the conduct of Zoom proceedings in Division 10 of the 29th Judicial District. The Court orders as follows:

1. It is the responsibility of each self-represented litigant to ensure that their Zoom link is correct. It is the responsibility of each self-represented litigant to ensure that their device is properly working for the purpose of the hearing. The Court strongly suggests that the parties familiarize themselves with the Zoom platform before the Court hearing.
2. Once a hearing date is set, the parties must file witness and exhibit lists seven days before the hearing. These exhibits must be in digital format and pdf documents are preferred. These documents should be sent to Tina.Rockey@kscourts.org. Paper documents are not to be taken to the clerk's office or left in division 10.
3. Once a hearing date has been set, discovery will close 14 days before the hearing.
4. All litigants must follow the Kansas Rules of Civil Procedure in presenting evidence. If a party cannot present evidence in accordance with the rules of civil procedure, the court will not admit the proffered evidence into the record.

5. Self-represented litigants are considered lawyers in accordance with Kansas case law and the rules of the Kansas Supreme Court. The Court cannot take into account that a self-represented litigant is not law trained.

6. After the hearing, it is the responsibility of the self-represented litigant to prepare a proper journal entry and take the same to the Clerk's office. The Clerk will then forward the document to the Court for review and signature.

IT IS SO ORDERED

**Kathlee
n Lynch**

Digitally signed by Kathleen Lynch
DN: cn=Kathleen Lynch,
o=Wyandotte County District Court,
ou=Division 10,
email=Kathleen.Lynch@kscourts.org
, c=US
Date: 2023.06.20 09:45:29 -05'00'

You will need to fill out and file the following forms to start your case:

- ❖ The Self Represented Litigant Form
- ❖ Civil Cover Sheet
- ❖ Petition for Paternity
- ❖ Request and Service Instructions
- ❖ Voluntary Entry of Appearance (if the other party is waiving service) and Summons
- ❖ Motion for Ex Parte Temporary Orders
- ❖ Ex Parte Temporary Orders

CIVIL COVER SHEET

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

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

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

- | | | | |
|--|---|---|---|
| <p><u>TORT</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Asbestos Product Liability <input type="checkbox"/> Automobile Tort <input type="checkbox"/> Intentional Tort <input type="checkbox"/> Legal Malpractice <input type="checkbox"/> Medical Malpractice <input type="checkbox"/> Other Professional Malpractice <input type="checkbox"/> Premises Liability <input type="checkbox"/> Slander/Label/Defamation <input type="checkbox"/> Tobacco Product Liability <input type="checkbox"/> Toxic/Other Product Liability <input type="checkbox"/> Other Tort | <p><u>CONTRACT</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Buyer Plaintiff <input type="checkbox"/> Employment Dispute - Discrimination <input type="checkbox"/> Employment Dispute - Other <input type="checkbox"/> Fraud <input type="checkbox"/> Landlord/Tenant - Forcible Detainer <input type="checkbox"/> Landlord/Tenant Dispute - Other <input type="checkbox"/> Seller Plaintiff (debt collection) <input type="checkbox"/> Other Contract <p><u>CIVIL APPEALS</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Administrative Agency <input type="checkbox"/> Other Civil Appeal <input type="checkbox"/> Tax Appeal | <p><u>REAL PROPERTY</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Eminent Domain <input type="checkbox"/> Mortgage Foreclosure <input type="checkbox"/> Other Real Property <input type="checkbox"/> Tax Foreclosure <p><u>MISCELLANEOUS</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> 60-1507 <input type="checkbox"/> Habeas Corpus <input type="checkbox"/> Other Writs <input type="checkbox"/> Name Change <input type="checkbox"/> Post Judgment Elevation LM to CV <input type="checkbox"/> Transfer Pre-Judgment LM to CV | <ul style="list-style-type: none"> <input type="checkbox"/> <u>STATE TAX WARRANT</u> <input type="checkbox"/> <u>OTHER CIVIL</u> <input type="checkbox"/> <u>SMALL CLAIMS</u> |
|--|---|---|---|

DOMESTIC

- MARRIAGE DISSOLUTION/DIVORCE** **PROTECTION FROM ABUSE** **PROTECTION FROM STALKING** **UIFSA**
- OTHER DOMESTIC RELATIONS** **NON-DIVORCE SUPPORT, CUSTODY OR VISITATION** **PATERNITY**
- DOMESTIC FOREIGN JUDGMENT (OUT OF COUNTY)**

PROBATE/ESTATE

- | | | |
|---|---|---|
| <p><u>GUARDIAN/CONSERVATOR</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Conservatorship/Trusteeship <input type="checkbox"/> Guardianship - Adult <input type="checkbox"/> Guardianship - Minor <input type="checkbox"/> Guardian/Conservator - Adult <input type="checkbox"/> Guardian/Conservator - Minor <p><u>PROBATE RECORDS</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Probate Record - Other County <input type="checkbox"/> Probate Record - Other State | <ul style="list-style-type: none"> <input type="checkbox"/> <u>DETERMINATION OF DESCENT</u> <input type="checkbox"/> <u>SEXUALLY VIOLENT PREDATOR</u> <input type="checkbox"/> <u>DECEDENT ESTATE</u> <input type="checkbox"/> <u>REFUSAL TO GRANT LETTERS</u> <input type="checkbox"/> <u>FILING WILL AND AFFIDAVIT</u> <input type="checkbox"/> <u>OTHER PROBATE/ESTATE</u> | <ul style="list-style-type: none"> <input type="checkbox"/> <u>ADOPTION</u> <input type="checkbox"/> <u>FOREIGN ADOPTION</u> <input type="checkbox"/> <u>CARE AND TREATMENT</u> <input type="checkbox"/> <u>TERMINATION OF JOINT TENANCY</u> <input type="checkbox"/> <u>TERMINATION OF LIFE ESTATE</u> |
|---|---|---|

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

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

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

PLAINTIFF/SUBJECT INFORMATION

(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: _____

ADDRESS: _____

PHONE: _____ SEX: _____

CELL PHONE: _____

E-MAIL: _____

SSN: _____ DOB: _____

DL OR STATE ID NO: _____
State and Number

ALIAS NAMES USED: _____

ATTORNEYS

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

DEFENDANT/OTHER PARTY INFORMATION

(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: _____

ADDRESS: _____

PHONE: _____ SEX: _____

CELL PHONE: _____

E-MAIL: _____

SSN: _____ DOB: _____

DL OR STATE ID NO: _____
State and Number

ALIAS NAMES USED: _____

ATTORNEYS

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

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

(Name)

(Date of Birth)

(Social Security Number)

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

Self-Represented Litigant Certification Form

By signing this form, I certify that the attached filing complies with the certification requirements in the Temporary Rule for Filing in a District Court by a Self-Represented Litigant.

I CERTIFY: *(You must complete this section.)*

- I signed the attached filing and provided my name, address, telephone number, email address (if available), and fax number (if available).

I ALSO CERTIFY: *(Only complete **one** of the next two sections.)*

My document **does not contain prohibited personally identifiable information** (“PII”). I checked my document for PII and made sure that my document meets the requirements of the Temporary Rule. It meets those requirements because:

- my document does not include any of the items listed in [Supreme Court Rule 24\(b\)](#). *(This list is printed on the back of this form for reference.)*
- my document is a Kansas Judicial Council form and I have only provided information that is required on the form.
- the information in my document meets an exception in [Supreme Court Rule 24\(c\)](#). *(This list is printed on the back of this form for reference.)*

OR:

My document **may contain prohibited PII**, but I am asking the court to file it confidentially under seal for the following reason: *(Choose one.)*

- the court entered a prior order on _____ that seals this document.
- the document I am filing now asks the court to issue an order to seal a different document that is not yet filed *(describe the document without using PII)*: _____.
- the document I am filing now asks the court to seal a document that is already filed in this case *(describe the document without using PII)*: _____.

Date: _____

Signature: _____

Name of Party: _____

Personally Identifiable Information – Supreme Court Rule 24(b)

- (1) the name of a minor who is not a named party in a case and, if applicable, the name of a person whose identity could reveal the name of a minor who is not a named party in a case;
- (2) the name of an alleged victim of a sex crime;
- (3) the name of a petitioner in a protection from abuse case;
- (4) the name of a petitioner in a protection from stalking, sexual assault, or human trafficking case;
- (5) the name of a juror or venire member;
- (6) a person's date of birth except for the year;
- (7) any portion of the following:
 - (A) an email address except when required by statute or rule;
 - (B) a computer username, password, or PIN; and
 - (C) a DNA profile or other biometric information;
- (8) the following numbers except for the last four digits:
 - (A) a Social Security number;
 - (B) a financial account number, including a bank, credit card, and debit card account;
 - (C) a taxpayer identification number (TIN);
 - (D) an employee identification number;
 - (E) a driver's license or nondriver's identification number;
 - (F) a passport number;
 - (G) a brokerage account number;
 - (H) an insurance policy account number;
 - (I) a loan account number;
 - (J) a customer account number;
 - (K) a patient or health care number;
 - (L) a student identification number; and
 - (M) a vehicle identification number (VIN);
- (9) any information identified as personally identifiable information by court order; and
- (10) the physical address of an individual's residence.

Exceptions – Supreme Court Rule 24(c)

- (1) an account number that identifies the property alleged to be the subject of a proceeding;
- (2) the name of an emancipated minor;
- (3) information used by the court for case maintenance purposes that is not accessible by the public;
- (4) information a party's attorney or a self-represented litigant reasonably believes is necessary or material to an issue before the court;
- (5) the first name, initials, or pseudonym of any person identified in Rule 24(j)(2)(A) to (j)(2)(E);
- (6) any information required to be included by statute or rule; and
- (7) any information in a transcript.

NOTE: Supreme Court Rule 24 includes multiple comments that explain the rule's requirements and exceptions. The summary above is provided for reference, but you should read the rule with comments to fully understand the rule. You will find the full rule here:

<https://www.kscourts.org/KSCourts/media/KsCourts/Rules/Rule-24.pdf>



IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT

_____,
minor child(ren), by and through his her
next friend,
_____, Plaintiff
vs.
_____, Defendant

Case No. _____
Division _____

PETITION FOR DETERMINATION OF PATERNITY

_____, a minor child, by their next friend, _____,

father mother state that:

1. _____ is a minor child under the age of eighteen who was born on _____ 20___. They live with _____ the natural father mother at _____ (address), in _____ County, Kansas.

2. _____ is a minor child under the age of eighteen who was born on _____ 20___. They live with _____ the natural father mother at _____ address, in _____ County, Kansas.

[Add more pages if there are additional children]

3. _____ is the natural mother of the children above.

4. _____ is the natural father of the children above.

5. _____ (Father) (Check all that apply)

signed a voluntary acknowledgment of paternity is

named as father on the Child's Birth Certificate

held himself out to the public to be the father; and is thereby presumed to be the father of the child. (Write N/A if there is not a presumed father)

6. The address of the defendant is: _____

7. The children herein are entitled to child support.

WHEREFORE, I and the children request that

_____ be determined to be the father of the minor child(ren)

_____ be determined to be the mother of the minor child(ren)

and that the court establish a parenting plan and child support for the child(ren); and for such other orders as may be appropriate.

Signature of Petitioner

Name: _____

Address: _____

City/State: _____

Phone: _____

Email: _____

Date: _____

VERIFICATION

Pursuant to K.S.A. 53-601, the undersigned within/outside the state of Kansas attests and declares that the foregoing is true under the penalty of perjury I verify under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct.

Signed on _____

Signature of Petitioner

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS

In the Matter of the Marriage of

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Enter your full legal name above)

and

Case Number _____
(Will be assigned when case is filed)

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Enter your spouse's legal name above)

REQUEST AND SERVICE INSTRUCTION FORM

You must give "legal notice" to your spouse that you have filed a Petition for Divorce. Your Petition for Divorce must be filed and stamped with the date it was received by the Clerk of the District Court. Your spouse must get copies of this file-stamped Petition for Divorce and Summons through one of the ways listed below.

Select **ONE** of the five boxes to show how you want to give "legal notice" to your spouse.

Personal Service by Sheriff:

Check options a or b if you want the sheriff to give the paperwork to your spouse.

Option a: If your spouse lives in Kansas, you must fill out the Summons form and pay a sheriff's service fee.

Option b: If your spouse lives in a state other than Kansas, fill out the Summons form. You have to find out the procedures required by the sheriff in that state and county and to pay any fees required.

- a. *Personal Service inside Kansas* – Service through the office of the Sheriff of _____ County, State of Kansas, other than by Service by Return Receipt. The clerk of the court will give your documents to the sheriff.

- b. *Personal Service outside Kansas* – Out of state service by service through the Sheriff of _____ County, State of _____ (your spouse's location) by other than Service by Return Receipt. The clerk of the court will give your documents to the sheriff.

Sheriff's office address (where the Clerk will send the service packet to the sheriff):

(Name of Sheriff's Office)

(Street)

(City)

(State)

(Zip Code)

Sheriff's office phone number:

(Telephone Number with Area Code)

Service by Return Receipt:

Check options c or d if you want the file-stamped paperwork mailed to your spouse.

Option c: After getting the file-stamped copy of the Petition for Divorce and the Summons from the Clerk of the District Court, send the documents to your spouse using return receipt delivery, which can be by certified mail, priority mail, commercial courier service, overnight delivery service or other reliable personal delivery service. For example, these services may be offered by the United States Postal Service, FedEx, or UPS. Once the documents are delivered to your spouse, get the written or electronic receipt from the delivery service and attach it to the Return of Service by Return Receipt form. Complete the Return of Service by Return Receipt form and file it with the Clerk of the District Court's office.

Option d: If you want to have the sheriff send the documents to your spouse using return receipt delivery, the Clerk of the District Court will get the documents to the sheriff. The sheriff will send the documents and file the Return of Service by Return Receipt with the court.

- c. *Service by Return Receipt inside or outside Kansas* – Return Receipt service by the Petitioner. You are responsible for sending the documents to your spouse using return receipt delivery, which can be by certified mail, priority mail, commercial courier service, overnight delivery service or other reliable personal delivery service to the party addressed. The written or electronic receipt must show who the documents were delivered to, the date of delivery, the address where delivered, and the person or entity completing delivery. Complete the Return of Service by Return Receipt form, attach the written or electronic receipt, and file it with the Clerk of the District Court's office. You must file the Return of Service by Return Receipt form before service is complete.

- d. *Service by Return Receipt inside or outside Kansas by Sheriff – Service by Return Receipt by the office of the Sheriff of _____ County, State of _____, AT YOUR EXPENSE. The Sheriff will be responsible for obtaining service and submitting the return of service.*

If the sheriff's office is NOT in Kansas, fill out the name, address, and phone number of the sheriff's office below.

Sheriff's office address (where the Clerk will send the service packet to the sheriff):

(Name of Sheriff's Office)

(Street)

(City)

(State)

(Zip Code)

Sheriff's office phone number:

(Telephone Number with Area Code)

- e. *Personal Service through the Office of the Civil Process Server - Party to be served must live in Wyandotte County, Kansas.*

No Service Required

Check option e if your spouse will complete a Voluntary Entry of Appearance or you are going to ask the court to allow service by publication.

Voluntary Entry of Appearance:

Give your spouse a copy of the completed Petition for Divorce and Domestic Relations Affidavit. After getting the copies of those forms, your spouse can fill out a Voluntary Entry of Appearance form. Your spouse must sign this form in front of a notary public. The completed Voluntary Entry of Appearance with your spouse's original signature must then be filed with the Clerk of the District Court.

Publication:

If you cannot provide notice of the divorce to your spouse through sheriff's service, service by return receipt, or voluntary entry of appearance, then you may be able to provide notice of the divorce by publishing notice in a local newspaper. To get "publication service," you must ask for permission from the judge by filing the Affidavit for Service by Publication form. If the judge says you can use publication service, the judge will sign the Order Allowing Service by Publication. After you get the signed Order Allowing Service by Publication, you must publish notice following the process set out in K.S.A. 60-307. You must obtain "proof of publication" from the newspaper and file the proof with the court. Court personnel cannot help you with this process.

- f. *No service required as my spouse will complete a Voluntary Entry of Appearance, or I am filing an Affidavit for Service by Publication.*

X _____
(Sign above) (Print your name above.)

Your address:

(Street)

(City) (State) (Zip Code)

(Telephone Number with Area Code) (Email Address)

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS

In the Matter of

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Enter your spouse's full legal name above)

and

Case Number _____

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Enter your full legal name above)

VOLUNTARY ENTRY OF APPEARANCE

1. What is your name? (Enter your full legal name on the lines below)

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

2. Where do you receive mail?

This is the address the court will use to send information about your case to you. If you want to change your mailing address, you must tell or send the clerk of the district court your new mailing address.

(Street or P.O. Box Number)

(City) (State) (Zip Code)

3. What is your telephone number?

(Telephone Number with Area Code)

4. What is your email address?

(Email Address)

5. Are you on active duty with the United States military? (Check one of the three boxes.)

If you are on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may apply. You should contact a lawyer about this situation before filing this Voluntary Entry of Appearance.

- Yes.
 No.
 I do not know.

6. If you are on active duty with the United States military, do you give up your rights under the Servicemembers Civil Relief Act for this case? (Check one of the three boxes.)

If you are on active duty in the armed forces of the United States, the Servicemembers Civil Relief Act (SCRA) may apply. You should contact a lawyer about this situation before filing this Voluntary Entry of Appearance.

- Yes.
 No.
 I do not know.

7. How do you want to get documents and notifications about this divorce case: (Check **one** of the two boxes.)

- mailed** to me (paper copies will be mailed to the address given in #2 above).
 emailed to me (documents will be emailed to the email address given in #4 you will not receive paper copies of documents in the mail).

8. I received a copy of the petition filed in this case. I am not requiring that the sheriff or other person hand me the summons and petition as Kansas law may require.

Sign Below in the Presence of a Notary Public

Here are the most common types of businesses where you can find a Notary Public.

Banks, Law Firms or Law Offices, Real Estate Firms or Real Estate Offices, Tax Preparer or Accountant Offices, Photocopy Shops, Parcel Shipping Stores, Auto tag and license service centers, Colleges and Universities, or Public Libraries.

X _____ (Sign above in the presence of a Notary Public.)
_____ (Print your name above.)

Your address:

(Street)

_____ (City) _____ (State) _____ (Zip Code)

_____ (Telephone Number with Area Code) _____ (Email Address)

VERIFICATION

STATE OF KANSAS

COUNTY OF _____

I swear or affirm that the statements made in this affidavit are true and that I am the person filing this petition.

X _____
(Sign above in the presence of a Notary Public.)

SUBSCRIBED AND SWORN to before me, a Notary Public, this _____ day of _____ 20 ____.

Notary Public

CERTIFICATE OF SERVICE AND MAILING

I certify that on this _____ day of _____, 20____, I sent a true copy of this Voluntary Entry of Appearance by depositing it in the United States mail, postage prepaid, addressed to:

Your Spouse's Name and Address:

(Your Spouse's Name)

(Street)

(City) _____ *(State)* _____ *(Zip Code)*

(Telephone Number with Area Code) _____ *(Email Address)*

and

Your Spouse's Attorney's Name and Address, if any:

(Your Spouse's Attorney's Name)

(Street)

(City) _____ *(State)* _____ *(Zip Code)*

(Telephone Number with Area Code) _____ *(Email Address)*

X _____
(Sign your name.) _____ *(Print your name above.)*

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS

Plaintiff

Case No: _____

Proceeding Pursuant to K.S.A. Chapter 60

Vs

Defendant

Defendant's Name: _____

Defendant's Address: _____

SUMMONS

To: _____,
(Defendant's name)

A civil lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it), you must serve on the plaintiff an answer to the attached petition or a motion under K.S.A. 60-212. Under Kansas Supreme Court Rule 113, you may seek from the clerk of the court an extension of up to 14 additional days to serve and to file an answer or a K.S.A. 60-212 motion.

If you fail within 21 days to serve and to file an answer or a K.S.A. 60-212 motion or obtain a Rule 113 extension, the court may enter default judgment against you for the relief demanded in the petition. If you were served outside of Kansas, however, the court may not enter default judgment against you until at least 30 days after service of this summons.

The answer or K.S.A. 60-212 motion must be served on the plaintiff's attorney, or the plaintiff if plaintiff has no attorney, at the following address:

(Attorney's name or Plaintiff's name)

(Attorney's address or Plaintiff's address)

You also must file your answer or K.S.A. 60-212 motion with the court.

When you file an answer, you must state as a counterclaim(s) any related claim(s) that you may have against the plaintiff. If you fail to do so, you will thereafter be barred from making such claim(s) in any other action.

Date _____

Clerk's Seal

Clerk of the District Court.

By _____
Clerk or Deputy

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT

_____,
minor child(ren), by and through his her
next friend,
_____, Plaintiff

Case No. _____
Division _____

vs.

_____, Defendant

MOTION FOR EX PARTE TEMPORARY ORDERS

COMES NOW the Petitioner, and moves the Court for the following temporary orders:

1. Petitioner has filed a verified Petition for Determination of Paternity in the District Court of Wyandotte County, Kansas.
2. Petitioner requests the Court grant temporary orders in accordance with K.S.A. 23-2224 pending final hearing of Paternity or until further order of the Court.
3. Petitioner requests that the court enter parenting time reflecting the parties *de facto* parenting plan as set for below.
4. Petitioner requests both parties be restrained as follows:

1. Parties are both restrained and prohibited from bothering, harassing, molesting, or otherwise interfering with the privacy of the other at home or work or elsewhere, in person or by telephone or e-mail or other electronic means. Neither Party shall physically or verbally threaten the other with bodily harm or place the other in fear for his or her safety. **The terms of this Order shall be enforceable by any law enforcement officer to whom a copy of this Order is exhibited and either party shall have the assistance of any such law enforcement officer upon request without further Order of the Court. The parties are each advised that violation of this Order may constitute violation of a protective order under K.S.A. 21-3843, as amended.**

2. Parties are both restrained and prohibited from altering, removing, selling, giving away, disposing, hiding, spending, mortgaging, pledging, or encumbering any assets, including withdrawals from checking, savings or other financial accounts, unless reasonably necessary for normal day-to-day business or personal expenses, for attorneys' fees and litigation expenses, in order to comply with this court's orders, or with written consent from both parties.

3. Parties are both restrained from destroying, altering or hiding any personal or business records, whether written, electronic, or any other form.

Other: _____

B. Restriction of Information Regarding the Child(ren) to Non-Legal Custodian.
The Mother Father is restrained from accessing the child(ren)'s health, educational and other personal information because of the following specific reasons:

7. **Parenting Time.** Both parents shall have parenting time with the child(ren). Time with both parents is the child's right. The current daycare and school arrangements shall not be changed absent written agreement of the parents or Court order.

Mother currently resides at: _____

Father currently resides at: _____

The parents shall follow the temporary parenting time arrangement set forth below, subject to minor alterations by agreement between the parties (**set out the schedule in as much detail as possible; do not simply reference the parenting plan or bar association guidelines; only include reasonably imminent holidays**):

Mother's Parenting Time. Mother shall have the following parenting times:

Father's Parenting Time. Father shall have the following parenting times:

Parenting Time Restrictions. The following parenting time restrictions apply: (supervised, exchange provisions, etc.)

8. **Civility and Protection of the Child(ren) from Harmful Conflict.** Each parent shall make every possible effort to protect their child(ren) from awareness of or involvement in conflict between the parents. Neither parent shall allow the minor child(ren) to read court pleadings or related documents. Neither parent shall make or allow others to make any critical or disparaging remarks about the other parent (or that parent's family, friends and associates), while the minor child(ren) is/are present or can hear or read such remarks. Each parent shall make sure the minor child(ren) is/are not within the presence of any person making any critical or disparaging remarks about the other parent (or that parent's family, friends and associates).

9. **Child Support.**

_____ shall pay to _____ \$ _____ each month as temporary child support, payable as provided in paragraph (11).

10. Payment Due Dates. Support payments shall be in equal monthly installments beginning _____, 20____.

11. Payment Location. All support payments shall be paid through the Kansas Payment Center, P.O. Box 758599, Topeka, KS 66675-8599. Payments shall contain both the case number and the designation of "WY." Both Mother and Father shall provide the Kansas Payment Center, Wyandotte County District Court Trustee's Office and/or DCF/Maximus with any information requested and shall written notice of any change of name, residence address, or employer within seven (7) days after the change.

12. Income Withholding Provisions. (use applicable provisions).

Child Support. (with or without spousal support). The District Court Trustee or DCF shall issue an immediate Income Withholding Order to Obligor's employer under K.S.A. 23-4,107(b) to enforce this order for support.

13. Other Orders:

A. _____

B. _____

C. _____

Submitted by:

Signature

Name: _____

Address: _____

City/State/ZIP: _____

Phone: _____

Email: _____

CERTIFICATE OF SERVICE

This is to certify that on _____, 20____, I did mail a true and correct copy of the foregoing Motion by depositing it in the United States mail, postage prepaid, addressed to the following:

Address of Opposing Party:

Name: _____

Address: _____

City, ST, Zip: _____

Petitioner

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT

_____,
minor child(ren), by and through his her
next friend,
_____, Plaintiff

Case No: _____
Division: _____

vs.

_____, Defendant

EX PARTE TEMPORARY ORDERS

NOW on this _____ day of _____, 20____, after reviewing the (verified Petition and Motion for Ex Parte Temporary Orders submitted by the Petitioner and hearing statements of counsel, the Court issues the following Temporary Orders to remain in effect until modified or terminated. These Temporary Orders supersede all previously filed temporary orders.

Parties are both restrained and prohibited from bothering, harassing, molesting, or otherwise interfering with the privacy of the other at home or work or elsewhere, in person or by telephone or e-mail or other electronic means. Neither Party shall physically or verbally threaten the other with bodily harm or place the other in fear for his or her safety. The terms of this Order shall be enforceable by any law enforcement officer to whom a copy of this Order is exhibited and either party shall have the assistance of any such law enforcement officer upon request without further Order of the Court. The parties are each advised that violation of this Order may constitute violation of a protective order under K.S.A. 21-3843, as amended.

1. Parties are both restrained and prohibited from bothering, harassing, molesting, or otherwise interfering with the privacy of the other at home or work or elsewhere, in person or by telephone or email or other electronic mean. Neither Party shall physically or verbally threaten the other with bodily harm or place the other in fear for his or her safety. **The terms of this Order shall enforceable by any law enforcement officer to whom a copy of this Order and either party shall have the assistance of any such law enforcement upon request without further Order of the Court. The parties are each advised that violation of this Order may constitute violation of a protective order under K.S.A. 21-3843, as amended.**
2. Parties are both restrained and prohibited from altering, removing, selling, giving away, disposing, hiding, spending, mortgaging, pledging, or encumbering any assets, including withdrawals from checking, savings, or other financial accounts, unless reasonably necessary for normal day-to-day business or personal expenses, for attorneys' fees and litigation expenses, in order to comply with this court's orders, or with written consent from both parties.
3. Parties are both restrained from destroying, altering or hiding any personal or business records, whether written, electronic, or any other form.
4. Parties are both restrained and prohibited from modifying, altering, changing or canceling any coverage, persons insured, or beneficiaries named on any existing insurance policy, whether for life, medical, dental, health, vehicle, disability, death, dismemberment or other type or kind of insurance, unless with written consent from both Parties.

Other:

B. Restriction of Information Regarding the Child(ren) to Non-Legal Custodian.

The Mother Father is restrained from accessing the child(ren)'s health, educational and other personal information because of the following specific reasons:

7. Parenting Time. Both parents shall have parenting time with the child(ren). Time with both parents is the child's right. The current daycare and school arrangements shall not be changed absent written agreement of the parents or Court order.

Mother currently resides at: _____

Father currently resides at _____

The parents shall follow the temporary parenting time arrangement set forth below, subject to minor alterations by agreement between the parties (**set out the schedule in as much detail as possible; do not simply reference the parenting plan or bar association guidelines; only include reasonably imminent holidays**):

Mother's Parenting Time. Mother shall have the following parenting times: **All times not with the father.**

Father's Parenting Time. Father shall have the following parenting times: **All times not with the mother.**

Parenting Time Restrictions. The following parenting time restrictions apply: (supervised, exchange provisions, etc.)

8. Civility and Protection of the Child(ren) from Harmful Conflict. Each parent shall make every possible effort to protect their child(ren) from awareness of or involvement in conflict between the parents. Neither parent shall allow the minor child(ren) to read court pleadings or related documents. Neither parent shall make or allow others to make any critical or disparaging remarks about the other parent (or that parent's family, friends and associates), while the minor child(ren) is/are present or can hear or read such remarks. Each parent shall make sure the minor child(ren) is/are not within the presence of any person making any critical or disparaging remarks about the other parent (or that parent's family, friends, and associates).

9. Child Support. _____ shall pay to _____ \$ _____ each month as temporary child support, payable as provided in paragraph (11).

10. Payment Due Dates. Support payments shall be in equal monthly installments beginning _____, 20____.

11. Payment Location. All support payments shall be paid through the Kansas Payment Center, P.O. Box 758599, Topeka, KS 66675-8599. Payments shall contain both the case number and the designation of "WY." Both Mother and Father shall provide the Kansas Payment Center and Wyandotte County District Court Trustee's Office/Maximus with any information requested and shall provide written notice of any change of name, residence address, or employer within seven (7) days after the change.

12. Income Withholding Provisions. (use applicable provisions).

13. Child Support. (with or without spousal support). The District Court Trustee Maximus shall
immediate Income Withholding Order to Obligor's employer under K.S.A. 23-4,107(b) to enforce this order for
support.

14. Other Orders:

- A. _____

- B. _____

- C. _____

IT SO ORDERED

Judge

Submitted by:

Signature

Name: _____

Address: _____

City/State/ZIP: _____

Phone: _____

Email: _____

You will need to fill out and file the following form after the other party has been served.

❖ Notice of Hearing

You must contact the Administrative Assistant to set up your court date and time.

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS

In the Matter of

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

and Case Number _____

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)

NOTICE OF HEARING

Information about the Hearing

1. The hearing will be held at the Wyandotte County Courthouse, Division _____/via Zoom.
2. The date of the hearing is: _____
(mm/dd/yyyy)
3. The time of the hearing is: _____ a.m. p.m.

Person Giving Notice

X _____
(Sign your name) (Print your name)

(Street)

(City) (State) (Zip Code)

(Telephone Number with Area Code) (Email Address)

CERTIFICATE OF SERVICE AND MAILING

You must send (serve) a copy of this *Notice of Hearing* to each of the other parties, or their attorney(s). To obtain service, you may deliver the document by hand, by sending it by first class U.S. mail, or by sending it through a delivery service that provides a written or electronic receipt showing who the documents were delivered to, the date of delivery, the address where delivered, and the person or entity completing deliver. For example, these services may be offered by the United States Postal Service, FedEx, or UPS.

I certified, that on _____ I sent/gave a copy of this *Notice of Hearing* to
(date)
each of the following parties at the following address:

Name	Address

X _____
(Sign your name) (Print your name) (Date)

You will need to fill out and file the following forms
AFTER your hearing date:

- ❖ Order for ECT Class
- ❖ Domestic Relations Affidavit
- ❖ Parenting Plan
- ❖ Child Support Worksheet
- ❖ Journal Entry of Paternity

**IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT**

IN THE MATTER OF THE MARRIAGE OF:

Petitioner,

and

Respondent.

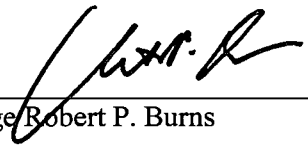
)
)
)
) **Case No.** _____
) **Division** _____
)
)
)
)
)

ORDER FOR EFFECTIVE CO-PARENTING TECHNIQUES (ECT)

NOW ON THE DATE STAMPED ABOVE the Court finds that an action has been filed in this court concerning a parenting plan for parties' minor child(ren) and that it would be in the best interest of the minor child(ren) for the parties to attend **Effective Co-Parenting Techniques (ECT)** within thirty (30) days of service of process, or the entry of an appearance by the respondent (in actions to establish the parentage of a child the parties shall attend within thirty (30) days of the entry of the order establishing parentage). Attendance of ECT must be completed prior to the case being set for trial.

IT IS THEREFORE ORDERED that the parties attend the **Effective Co-Parenting Techniques** educational program through Wyandotte County Domestic Court Services. This is a two-hour educational program which is currently being conducted online. To obtain information regarding registration and class times, contact **Domestic Court Services at (913) 573-2833**. Upon completion of class, your court file will be updated with a certificate of completion.

IT IS SO ORDERED



Chief Judge Robert P. Burns
Div. 1

Domestic Relations Affidavit

IN THE DISTRICT COURT OF
WYANDOTTE COUNTY, KANSAS

IN THE MATTER OF)

Party Name)

and)

Party Name)

Case No. _____

DOMESTIC RELATIONS AFFIDAVIT OF _____
(name)

1. Party Name Residence _____
Party Name Birth Month/Year XXX-XX-____ Social Security Number Telephone _____

2. Party Name Residence _____
Party Name Birth Month/Year XXX-XX-____ Social Security Number Telephone _____

3. Date of Marriage: _____

4. Number of Marriages: _____
Party Name Party Name

5. Number of children of the relationship: _____

6. Names, Social Security Numbers, the month and year of each child's birth and ages of minor children of the relationship:

Name	Social Security Number XXX-XX-____	Birth Month /Year	Age	Custodian
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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

Name	Social Security No. XXX-XX-____	Age	Custodian	Support Payment	Paid or Rec'd
_____	_____	_____	_____	\$ _____	_____
_____	_____	_____	_____	\$ _____	_____
_____	_____	_____	_____	\$ _____	_____
_____	_____	_____	_____	\$ _____	_____

8. Party Name is employed by (name) _____

(address) _____

Party Name is employed by (name) _____

(address) _____

with monthly income as follows:

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

B. Self-Employed	Party Name	Party Name
1. Gross Income from self-employment	\$ _____	\$ _____
2. Other Income	\$ _____	\$ _____
3. Subtotal Gross Income	\$ _____	\$ _____
4. Reasonable Business Expenses (-) (Itemize on attached exhibit)	\$ _____	\$ _____
5. Self-Employment Tax (-)	\$ _____	\$ _____
6. Business Net Income	\$ _____	\$ _____
7. Estimated Tax Payments (Claim _____ exemptions)	\$ _____	\$ _____
8. Federal Income Tax	\$ _____	\$ _____
9. Kansas Withholding	\$ _____	\$ _____
10. Subtotal Deductions	\$ _____	\$ _____

8.	Childcare (non-work-related)	\$ _____	\$ _____
9.	Clothing	\$ _____	\$ _____
10.	School expenses	\$ _____	\$ _____
11.	Haircuts and beauty	\$ _____	\$ _____
12.	Car repair	\$ _____	\$ _____
13.	Gas and oil	\$ _____	\$ _____
14.	Personal property tax	\$ _____	\$ _____

Item	Party Name (Actual or Estimated)	Party Name (Actual or Estimated)
15. Miscellaneous (Specify)		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
16. Debt Payments (Specify)		
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
Total	\$ _____	\$ _____

*Show house payments, mortgage payments, etc., in Section 10.B.

B. Monthly payments to banks, loan companies or on credit accounts: (Indicate actual or estimated monetary amount in each column; use asterisk for secured.) DO NOT LIST ANY PAYMENTS INCLUDED IN PART 10.A ABOVE.

Creditor	When Incurred	Amount of Payment	Date of Last Payment	Balance	Responsibility	
					Party Name	Party Name
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____	\$ _____
				Subtotal of Payments	\$ _____	\$ _____
				Total	\$ _____	\$ _____

C. Total Living Expenses

	Party Name (Actual or Estimated)	Party Name (Actual or Estimated)
1. Total funds available to Both Parties (from No. 8)	\$ _____	\$ _____
2. Total needed (from No. 10.A and B)	\$ _____	\$ _____
3. Net Balance	\$ _____	\$ _____
4. Projected child support	\$ _____	\$ _____

D. Payments or contributions received, or paid, for support of others. Specify source and amount.

Source	Party Name	Party Name
_____ (+/-)	\$ _____	\$ _____
_____ (+/-)	\$ _____	\$ _____

11. How much does the party who provides health care pay for family coverage?
 \$ _____ per _____.
 How much does it cost the provider to furnish health insurance only on the provider?
 \$ _____ per _____.

FURNISH THE FOLLOWING INFORMATION IF APPLICABLE.

12. Income and financial resources of children.

Income/Resources	Amount
_____	\$ _____
_____	\$ _____

13. Child support adjustments requested.

- | | |
|--|---|
| <input type="checkbox"/> parenting time adjustment | <input type="checkbox"/> agreement past majority |
| <input type="checkbox"/> income tax consideration | <input type="checkbox"/> long distance parenting time |
| <input type="checkbox"/> special needs | <input type="checkbox"/> overall financial conditions |
| <input type="checkbox"/> other: _____ | |

14. All other personal property including retirement benefits (including but not limited to qualified plans such as profit-sharing, pension, IRA, 401(k), or other savings-type employee benefits, nonqualified plans, and deferred income plans), and ownership thereof (joint or individual), including policies of insurance, identified as to nature or description, ownership (joint or individual), and actual or estimated value.

Joint or Individual	Amount	(Specify)
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

THE FOLLOWING NEED NOT BE FURNISHED IN POST JUDGMENT PROCEDURES.

15. List real property identified as to description, ownership (joint or individual) and actual or estimated value.

Property Description	Ownership	Actual/Estimated Value
_____	_____	_____
_____	_____	_____
_____	_____	_____

16. Identify the property, if any, acquired by each of the parties prior to marriage or acquired during marriage by a will or inheritance.

Property Description	Ownership	Source of Ownership	Actual/ Estimated Value

17. List debt obligations, including maintenance, not listed in Section 10.A or 10.B above, identified as to name or names of payor or payors and payees, balance due and rate at which payable; and, if secured, identify the encumbered property.

Debt Obligation	Payor	Payee	Balance Due	Payment Rate	Encumbered Property

8. List health insurance coverage and the right, pursuant to ERISA §§ 601-608, 29 U.S.C. §§ 1161-1168 (1986), to continued coverage by the spouse who is not a member of the covered employee group.

<u>Health Insurance</u>	<u>COBRA Continuation</u>		
	<u>Yes</u>	<u>No</u>	<u>Unknown</u>
_____	_____	_____	_____
_____	_____	_____	_____

I declare under penalty of perjury under the laws of the State of Kansas that the foregoing is true, correct and complete.

Executed on the _____ day of _____, 20____.

Name (Print): _____

Signature _____

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS

In the Matter of

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Write your full legal name above)

and

Case Number _____

(First Name) (Middle Name) (Last Name) (Jr./Sr./III)
(Write your spouse's full legal name above)

PARENTING PLAN

1. This Parenting Plan is temporary permanent. (Check one of the two boxes)

2. This Parenting Plan is: (check one of the three boxes)

Proposed by _____.
(Print your name)

Agreed to by both parties.

Developed by the Court.

Section 1. General Information

1.1 For the purposes of this parenting plan, the following definitions apply:

Parent A is _____, and
(Write the name of one parent.)

Parent B is _____.
(Write the name of the other parent.)

Parent A is _____ Parent B is _____

1.2 This parenting plan applies to the following children: *(Fill out the chart.)*

Child's Initials	Year of Birth

Section 2. Legal Custody (Decision-Making)

2.1 *(Check either box A or B, NOT both. If box B is checked, fill out the boxes and blanks in B.1. and B.2. as needed.)*

A. Joint Legal Custody. Parents shall have joint legal custody of their minor child(ren).

"Joint legal custody" means that both parents have equal rights to participate in, contribute to, and have responsibility for matters of health and education in their child(ren)'s best interests. Neither parent's rights are superior to the other parent's rights, and they should cooperate to determine what is in their children's best interests.

OR

B. Sole Legal Custody. Joint legal custody is not in the child(ren)'s best interests.

"Sole legal custody" means that the parent given sole legal custody has the primary right to decide matters of health and education in the child(ren)'s best interests.

The parent not given sole legal custody may make emergency decisions affecting the child(ren)'s health or safety when the child(ren) is in that parent's physical care and control. Even if one parent has sole legal custody the other parent can still access information regarding the child(ren) unless the court specifically orders a restriction in B.2. below and states the reasons for that determination.

Parent A is _____ **Parent B is** _____

B.1. Sole legal custody is granted to Parent A Parent B for the following reasons:

a. Agreement of the parents.

b. The other parent is unable or should not be allowed to exercise decision-making because:

c. There is a danger to the child(ren) because:

d. Other:

B.2. Restriction of Information Regarding the Child(ren) to Non-Legal Custodian.

Parent A Parent B is restrained from accessing the child(ren)'s health, educational and other personal information because of the following specific reasons:

Parent A is _____ Parent B is _____

Section 3. Parenting Time Schedule. (Physical Custody)

3.1 Parent A Parenting Time

Parent A shall have parenting time beginning at _____ am pm ending at _____ am
 pm as follows:

Parent A's Weekday Schedule:

Parent A's Weekend Schedule:

Parent A's Other Times:

3.2 Parent B Parenting Time

Parent B shall have parenting time beginning at _____ am pm ending at _____ am
 pm as follows:

Parent B's Weekday Schedule:

Parent A is _____ Parent B is _____

Parent B's Weekend Schedule:

Parent B's Other Times:

3.3 Holiday & Special Occasion Parenting Schedule

(Check either box A or B, not both.)

- A.** The holiday schedule as set out in the _____ (name county) Family Law Guidelines controls holiday parenting time. The holiday schedule will take priority over the regular weekday and weekend schedule. A copy of the holiday schedule from the _____ (name county) are attached. If a particular holiday is not included in the guidelines, then the regular schedule controls.

(Print and attach a copy of the holiday schedule to this Parenting Plan. Do not complete the Holiday Parenting Schedule chart below.)

OR

- B.** The holiday schedule is as follows:
The holiday schedule will take priority over the regular weekday and weekend schedule. If a particular holiday is not specified below, then the regular schedule controls.

(If you selected Option B, fill in the chart. You may want to look at your child(ren)'s school calendar to check for other holidays or school breaks to include in the "other" sections below.)

Parent A is _____

Parent B is _____

<u>HOLIDAY PARENTING SCHEDULE</u>	<u>Parent A</u>	<u>Parent B</u>
New Year's Day (January 1): From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Martin Luther King, Jr. Day (3rd Monday of January): From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
President's Day (3rd Monday in February): From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Spring Break: From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Spring Break: From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Memorial Day/Weekend (last Monday in May): From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Mother's Day/Weekend (2nd Sunday in May): From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Father's Day/Weekend (3rd Sunday in June): From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Independence Day (July 4): From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year

Parent A is _____ Parent B is _____

<u>HOLIDAY PARENTING SCHEDULE</u>	<u>Parent A</u>	<u>Parent B</u>
Labor Day/Weekend (1st Monday in September): From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Halloween (October 31): From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Thanksgiving Day/Weekend (4th Thursday in November): From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Winter Break: From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Winter Break: From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Parent A's Birthday: From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Parent B's Birthday: From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Child's Birthday: Child's name _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Child's Birthday: Child's name _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year

Parent A is _____ Parent B is _____

<u>HOLIDAY PARENTING SCHEDULE</u>	<u>Parent A</u>	<u>Parent B</u>
Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year
Other: _____ From _____ (day) at _____ (time) until _____ (day) at _____ (time)	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year	<input type="checkbox"/> Even years <input type="checkbox"/> Odd years <input type="checkbox"/> Every year

Parent A is _____ Parent B is _____

3.4 Vacation Schedule *(Check all boxes that apply.)*

- No specific weeks will be set aside for vacations.
- Each parent may designate _____ *(number)* of week(s) each year during which they will have exclusive parenting time of the child(ren) and the regular schedules do not apply. However, during this period, the Holiday Schedule still applies. Parent A will have first choice of weeks in odd-numbered years. Parent B will have first choice of weeks in even-numbered years. The parent with the first choice of weeks must designate the vacation weeks by March 31st of each year. The parent with the second choice of weeks must designate the weeks by April 15 of each year.
- Other:

3.5 Child(ren) Exchange

If a specific location for an exchange is not stated in the parenting time schedule above, then the exchange will happen at the following location: *(Check the box that applies.)*

- All exchanges will happen at the child(ren)'s school or childcare provider when school or childcare is in session. If, or when, school or childcare is not in session, all exchanges will happen at the locations as follows:

- All exchanges will happen at the residence of Parent A or Parent B.

- Exchanges will happen as set out below:

Parent A is _____ Parent B is _____

3.6 Transportation Costs for Parenting Time *(Check the boxes that apply.)*

- Each parent will pay the expenses associated with his or her own transportation to and from the exchange location unless otherwise indicated in this parenting plan.
- Transportation costs shall be split equally between both parents.
- Transportation costs shall be split proportionally as shown on Line D.2 of the current child support worksheet.
- All transportation costs shall be paid by Parent A or Parent B.
- Other:

3.7 Communication Between Parents

All communication regarding the child(ren) shall be between the parents. The parents shall not use the child(ren) as a messenger to convey information, ask questions, or set up schedule changes.

Parents shall communicate with each other: *(Check all boxes that apply.)*

- in person
- by telephone
- by text
- by email
- other: _____

3.8 Changes to the Parenting Time Schedule

The plan may be changed by mutual, written agreement of the parents. Both parents understand that any permanent changes must be approved by the court to be binding and enforceable.

Parent A is _____ Parent B is _____

Section 4. Dispute Resolution Process

4.1 Disputes between the parents, other than about child support, shall be submitted to:
(Check one of the two boxes)

Mediation by:

(name of mediator)

The following dispute resolution method:

Section 5. Military Deployment, Mobilization, or Unaccompanied Tour

5.1 Parent A Parent B is a military servicemember and the following shall apply upon notice of deployment, mobilization, temporary duty, or unaccompanied tour:

- A. A parent receiving deployment, mobilization, temporary duty or unaccompanied tour orders from the military shall be considered a “deployed parent.”
- B. The absence, relocation or failure to comply with a parenting order by a “deployed parent,” shall not by itself constitute a material change in circumstances to make any permanent change to the parenting plan.
- C. Any court order limiting previously ordered parenting rights due to the parent's deployment, mobilization, temporary duty, or unaccompanied tour shall state that event as its basis and shall constitute only a “temporary order.”
- D. The nondeploying parent shall give the court and deployed parent at least 30 days advance written notice of any change of address or telephone number.
- E. The nondeploying parent shall reasonably accommodate the deployed parent's leave schedule.

Parent A is _____ **Parent B is** _____

- F. The nondeploying parent shall assist with telephone and electronic communication between the child(ren) and the deployed parent.
- G. The deployed parent shall give the nondeployed parent timely information about the deployed parent's anticipated deployment, leave during deployment, and release from deployment.
- H. During deployment, mobilization, temporary duty, or unaccompanied tour, the parents shall make decisions about the child(ren) by the following methods:
- I. During deployment, mobilization, temporary duty, or unaccompanied tour, the child(ren) shall live with:
 - Parent A Parent B Other _____ and the deployed parent shall have the following parenting time with the child(ren) when available:

Section 6. Address Change

- 6.1** Each parent shall tell the other parent of any address change in writing at least 30 days before changing address by sending written notice to the other parent by certified mail – restricted delivery, return receipt requested, at that other parent's last known address.
- 6.2** Each parent shall tell the other parent of any plan to remove any child(ren) from the State of Kansas for more than 90 days by sending written notice to the other parent by certified mail – restricted delivery, return receipt requested, at that other parent's last known address.
- 6.3** A parent is not required to give written notice of removal to the other parent under either (A) or (B) if the other parent has been convicted of a crime specified in Article 34 (crimes against

Parent A is _____ **Parent B is** _____

persons), Article 35 (sex offenses), or Article 36 (crimes affecting family relationships and children) of Chapter 21 (Crimes and Punishments) of the Kansas Statutes Annotated to which the child(ren) was the victim.

Section 7. Other Requirements

7.1 Other requirements for this parenting plan:

Section 8. Signatures: Required if agreed upon by the parties.

Parent A

Signature:

Name:

Address:

Phone Number:

Email:

Date Signed:

Attorney's Signature (if any):

Attorney's Name (if any):

Parent B

Signature:

Name:

Address:

Phone Number:

Email:

Date Signed:

Attorney's Signature (if any):

Attorney's Name (if any):



CHILD SUPPORT ORDER INFORMATION SHEET

As per Supreme Court Administrative Order No. 168 (amended), all new or modified non-IVD support orders filed in the Kansas district courts must be accompanied by this child support order information sheet.

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

Who submits this information sheet: The payee's attorney shall submit a child support order information sheet with any new or modified non-IVD support orders filed with the Clerk of the District Court.

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

Date: _____ **Trustee Fee:** Active or Inactive (please check one)

Case Number: _____

Payer's Name: _____ **Date of Birth:** _____

Gender: Male Female **SSN:** _____ ***If SSN or**

DOB not known, give reason for unavailability:

Address, City, State, Zip _____

E-mail Address: _____

Phone Numbers (mark primary): Home (____) _____

Work (____) _____

Cell (____) _____

Payee's Name: _____ **Date of Birth:** _____

Gender: Male Female SSN: _____ *If SSN or
DOB not known, give reason for unavailability:

Address, City, State, Zip _____

E-mail Address: _____

Phone Numbers (mark primary): Home (____) _____

Work (____) _____

Cell (____) _____

Debt Type:	Amount	Start Date	Obligation Frequency:
<input type="checkbox"/> CS	_____	_____	<input type="checkbox"/> Weekly
<input type="checkbox"/> MN	_____	_____	<input type="checkbox"/> Bi-weekly
<input type="checkbox"/> OT	_____	_____	<input type="checkbox"/> Semi-Monthly
			<input type="checkbox"/> Monthly

Child #1: Name: _____ Date of Birth: _____

Gender: Male Female

SSN: _____

Child #2: Name: _____ Date of Birth: _____

Gender: Male Female

SSN: _____

Child #3: Name: _____ Date of Birth: _____

Gender: Male Female

SSN: _____

Child #4: Name: _____ Date of Birth: _____

Gender: Male Female

SSN: _____

Child #5: Name: _____ Date of Birth: _____

Gender: Male Female

SSN: _____

Child #6: Name: _____ Date of Birth: _____

Gender: Male Female

SSN: _____

List additional children on a separate sheet.

Third Party Payee: _____

Provide the following if payee is an individual:

Gender: Male Female **Date of Birth:** _____

SSN: _____ (*If SSN or DOB not known, give reason for unavailability)

Address, City, State, Zip: _____

***Absent extenuating circumstances as determined by the Kansas Payment Center, Payers' and Payees' Social Security Numbers and Dates of Birth must be provided on this form.**

Form Completed By: _____

Child Support Worksheet

IN THE 29th JUDICIAL DISTRICT
WYANDOTTE COUNTY, KANSAS

IN THE MATTER OF:

and

CASE NO. _____

CHILD SUPPORT WORKSHEET OF (name) _____

A. INCOME COMPUTATION – WAGE EARNER

	Party Name	Party Name
1. Domestic Gross Income (Insert on Line C.1. below)*	\$ _____	\$ _____

B. INCOME COMPUTATION – SELF-EMPLOYED

1. Self-Employment Gross Income		
2. Reasonable Business Expenses	(-)	
3. Domestic Gross Income (Insert on Line C.1. below)*		

C. ADJUSTMENTS TO DOMESTIC GROSS INCOME

1. Domestic Gross Income		
2. Court-Ordered Child Support Paid	(-)	
3. Court-Ordered Maintenance Paid _____ %	(-)	
4. Court-Ordered Maintenance Received _____ %	(+)	
5. Child Support Income (Insert on Line D.1. below)		

D. COMPUTATION OF CHILD SUPPORT

1. Child Support Income		
	+ _____	
	= _____	
2. Proportionate Shares of Combined Income (Each parent's income divided by combined income)	_____ %	_____ %
3. Gross Child Support Obligation** (Using the combined income from Line D.1., find the amount for each child and enter total for all children)		

Age of Children	0-5	6-11	12-18	
Number Per Age Category	_____	_____	_____	
Total Amount	_____ +	_____ +	_____ =	_____ Total

* Cost of Living Differential Adjustment?	_____	Yes	No	
** Multiple Family Application?	_____	Yes	No	
Parenting Time Adjustment	_____	Yes	No	_____ %
Income Beyond the Child Support Schedule calculation used	_____	Yes	No	

Case No. _____

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

E. CHILD SUPPORT ADJUSTMENTS

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

F. DEVIATION(S) FROM REBUTTABLE PRESUMPTION AMOUNT

AMOUNT ALLOWED

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

**Parent paying support.

Prepared By (Signature)

Judge/Hearing Officer Signature

Prepared By (Print Name)

Date Submitted

Date Approved

IN THE DISTRICT COURT OF WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT

_____,
minor child(ren), by and through his her
next friend,
_____, Plaintiff
vs.
_____, Defendant

Case No. _____
Division _____

JOURNAL ENTRY OF PATERNITY

On _____, 20____ this matter was heard by the court. The Plaintiff and the child(ren),
by _____ next friend, appear in person. Defendant appears in person appears not.
Defendant was personally served on _____, 20____.

1. The Court has personal jurisdiction over the parties to this action and subject matter jurisdiction of the action.
2. _____ is the father of
 _____ is the mother of:

_____ Child's Name	_____ DOB	_____ Age
_____ Child's Name	_____ DOB	_____ Age
_____ Child's Name	_____ DOB	_____ Age

and owes a duty to support said children.

3. The court adopts the parenting plan filed with this journal entry finding it serves the best interests of the child(ren).
4. A new birth certificate shall be issued to reflect that the defendant is the father of the child(ren).

5. Plaintiff Defendant shall pay Plaintiff Defendant \$_____ for one half the Support enforcement fee per month as child support payable on the first of each month Beginning _____, 20___. The Court adopts the child support worksheet filed with this journal entry.
6. Plaintiff Defendant is granted a judgment of \$_____ for expenses of support and education of the child from _____, 20__ to _____, 20_____
7. All support and maintenance payments shall be made payable to the order of the Kansas Payment Center P. O. Box 758599, Topeka, Kansas 66675-8599. Each payment must include in the memo section, or some other place "WY" followed by the case number.
8. The District Court Trustee Maximus (State of Kansas) shall enforce the orders of support entered herein. Both parties must inform the District Court Trustee / Maximus in writing of any change of name, residence, and employer (with business address) within 7 days after the change.
9. Unless the court makes findings in conformity with K.S.A. 23-3103(j), income withholding shall take effect immediately to enforce the order of child support or child support and maintenance granted herein.
10. _____ shall maintain health insurance for the child and provide the other parent with the name and address of the insurance company, the policy identification number, and a card or other indicia of insurance sufficient for her to use on behalf of the child. Any uninsured medical expenses for the child(ren) will be paid by the parties in the percentages found on line D2 of the Child Support Worksheet.
11. The parties agree:
- to share the income tax exemption for the child with plaintiff claiming in even years and defendant claiming in odd years.
 - to share the income tax exemption for the child with plaintiff claiming in odd years and defendant claiming in even years.
 - Plaintiff will claim the child for income tax purposes in all years.
 - Defendant will claim the child for income tax purposes in all years.

IT IS SO ORDERED.

Judge

Signatures:

Mother's Signature

Please print:

Name

Address

City, State, Zip

Phone

Email

Father's Signature

Please print:

Name

Address

City, State, Zip

Phone

Email