

UNIFORM SUPPORT PETITION

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Personal Information Form for UIFSA § 311 must be attached.

Petitioner: Legal Name (First, Middle, Last, Suffix)

Obligee **Obligor**

Tribal Affiliation (if applicable)

Respondent: Legal Name (First, Middle, Last, Suffix)

Obligee **Obligor**

Tribal Affiliation (if applicable)

Note:

Nondisclosure Finding/Affidavit attached

This form sent through EDE

IV-D Case: TANF

IV-E Foster Care

Medicaid Only

Former Assistance

Never Assistance

Non-IV-D Case:

Responding IV-D Case Identifier: _____

Responding Tribunal Number: _____

Initiating IV-D Case Identifier: _____

Initiating Tribunal Number: _____

File Stamp

The Respondent in this action and/or the respondent's property is subject to the jurisdiction of the responding tribunal.

The legal name(s) of the child(ren) (First, Middle, Last, Suffix) involved in this action is (are):

I. Action:

The Petitioner in this action files this petition to request (check all that apply):

- Establishment of Parentage
- Establishment of an Order for:
 - Current Child Support, including Medical Support
 - Retroactive Child Support since _____ (date)
 - Medical Support Only
 - Spousal Support (Non-IV-D only)
 - Costs and Fees
- Modification of a Support Order
- Other Remedy Sought: _____

II. Grounds Supporting the Remedy Sought in Section I:

- Parentage of the child(ren) named in this petition has not been established (attach a Declaration in Support of Establishing Parentage for each child).
- The parents have a duty to support the child(ren) named in this petition (if retroactive support is sought, check the applicable box below).
 - Respondent has not provided support since: _____ (date)
 - Petitioner has not provided support since: _____ (date)
- It has been 3 years (or the time frame permitted by the laws of the responding jurisdiction) since the last review or modification.
- There has been a change in circumstances since the order was entered. (Explain):

- Additional Grounds:



Service Type

OMB 0970-0085 Expiration Date: 2/28/2026

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Worker ID

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III. Servicemembers Civil Relief Act:

As of the current date: (Check one of the following)

- The respondent is in military service.
- The respondent is not in military service.
- I am unable to determine whether the respondent is in military service.

The following facts support the statement regarding whether or not the respondent is in military service: (Be specific)

Did you use the [Servicemembers Civil Relief Act](#) website to determine the respondent's military status?

- Yes No (If yes, attach the results)

IV. Other Pertinent Information:

The following documents are attached to and incorporated in this Petition:

- Petitioner's General Testimony
- Declaration in Support of Establishing Parentage
- Acknowledgment of Parentage
- Birth Certificate/Record of the Child
- Documentation Regarding Military Service
- Other: _____

V. Declaration:

Under penalty of perjury, all information and facts stated in this Uniform Support Petition are true to the best of my knowledge, information, and belief.

Date	Printed Name	<input type="checkbox"/> Signature of Petitioner <input type="checkbox"/> Signature of IV-D Representative/Title
Date	Printed Name of Petitioner's Private Attorney and Attorney/Bar Number (if applicable)	Signature of Petitioner's Private Attorney

Encryption Requirements:

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

