

SUPERIOR COURT OF GWINNETT COUNTY
STATE OF GEORGIA

<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 5px;"></div> <p style="text-align: center;">Petitioner,</p> <p style="text-align: center;">vs.</p> <div style="border-bottom: 1px solid black; height: 1.2em; margin-top: 10px;"></div> <p style="text-align: center;">Respondent.</p>	<p>Case No.: _____</p>
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PETITION FOR MODIFICATION OF

<u>CHILD SUPPORT</u>	<u>ALIMONY</u>
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My name is _____ and I am representing myself in this modification action. In support of my case, I state the following:

1. **Subject Matter Jurisdiction and Venue:**

[Check only one of the following, either (a), (b), or (c).]

☐ (a) The Respondent is a resident of Gwinnett County, Georgia and is subject to the jurisdiction of this Court.

☐ (b) The Respondent is a resident of _____ County, Georgia, and I live in Gwinnett County. The Respondent has acknowledged service of process and consented to the jurisdiction and venue of this Court.

☐ (c) The Respondent is not a resident of Georgia, but I am a resident of Gwinnett County, Georgia, and:

[Check only one of the following, either (1) or (2).]

☐ (1) The Respondent was formerly a resident of Georgia, but currently resides in the State of _____. The Respondent is subject to the jurisdiction of the Court under Georgia's Long Arm Statute, OCGA § 9-10-91(5).

☐ (2) The Respondent has acknowledged service of process and consented to the jurisdiction and venue of this Court.

2. **Service of Process:** The Respondent shall be served as provided under OCGA § 9-11-4, in the following manner:

[Check only one of the following, either (a) or (b).]

☐ (a) The Respondent has acknowledged service of process. I am filing the *Acknowledgment of Service* (which has been signed by the Respondent) with this Petition.

☐ (b) The respondent may be served by the Sheriff's Department at the Respondent's home/ work address, which is

☐ (b-1) *[Check only if the Respondent resides outside of Gwinnett County.]* The Respondent resides outside of Gwinnett County, and shall therefore be served by second original, as provided under OCGA § 9-10-72. Service shall be made by the Sheriff's Department in the county where the Respondent resides.

2. **Prior Order for Child Support:**

Date of Order: _____

Gwinnett County Case Number: _____

Person ordered to pay child support: _____

Amount of child support: \$ _____ per _____

[Check all that apply.]

☐ (a) Since that date there has been a substantial change in the income or financial status of the _____ which ☐ increases ☐ decreases his/her ability to pay the amount of child support previously awarded.

Specifically, at the time that the order was issued the _____ was earning \$ _____ per _____ and his/her earnings have ☐ increased ☐ decreased to _____ per _____.

☐ (b) Since that date there has been a substantial change in the needs of the children as follows:

_____.

3. **Prior Order for Alimony:**

Date of Order: _____
Gwinnett County Case Number: _____
Person ordered to pay alimony: _____
Amount of alimony: \$ _____ per _____

[Check all that apply.]

☐ (a) Since that date there has been a substantial change in the income or financial status of the _____ which ☐ increases ☐ decreases his/her ability to pay the amount of alimony previously awarded. Specifically, at the time that the order was issued the _____ was earning \$ _____ per _____ and his/her earnings have

☐ increased ☐ decreased to _____ per _____.

☐ (b) The Respondent is voluntarily cohabiting with a third party of the opposite sex in a meretricious relationship.

4. **Prior modification actions.**

☐ A. I have not filed a petition for modification within two years.

☐ B. I have filed a petition for modification within the past two years however the following circumstances have changed since the last modification [*check all that apply*]:

☐ (1) The noncustodial parent has failed to exercise the court ordered visitation.

☐ (2) The noncustodial parent has exercised a greater amount of visitation than was provided in the court order.

☐ (3) This request to modify support is based upon an involuntary loss of income.

THEREFORE, I request the following relief:

[Check all that apply]

☐ (a) That the order awarding child support be ☐ increased ☐ decreased ☐ terminated;

☐ (b) That the order awarding alimony be ☐ increased ☐ decreased ☐ terminated;

- ☐ (c) That the Respondent be required to pay all costs of this action;
- ☐ (d) That a Rule Nisi be scheduled by the Court to decide on the relief I have requested;
- ☐ (e) That the Court order the parties to participate in mediation to try to resolve this matter;
and
- ☐ (f) That the Court order any and all other relief that the Court finds appropriate.

Date: _____

Petitioner, Pro Se *[Signature]*

Name: _____

Address: _____

Phone: _____

Email: _____

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<hr style="border: 0; border-top: 1px solid black; margin-bottom: 10px;"/> <div style="text-align: center;">Petitioner,</div> <div style="text-align: center;">v.</div> <div style="text-align: center;">Respondent.</div>		<div>Civil Action File No.: <hr style="border: 0; border-top: 1px solid black;"/></div>
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VERIFICATION

The Petitioner, duly sworn and affirmed, has read this document and states that the facts contained in the *Petition for Modification of Child Support/Alimony* are true and correct.

Petitioner, *Pro se* (signature)

SWORN AND AFFIRMED before me this

____ day of _____, 20____.

NOTARY PUBLIC