

## **Legal Parentage PIG's Proposed Forms for an Uncontested Parentage Process**

As the Task Force is aware, the Legal Parentage Permitted Interaction Group (“PIG”) has drafted proposed edits to the current draft bill under consideration which would allow for “professed parents” to utilize the Voluntary Establishment of Parentage (“VEP”) process. Those proposed edits were presented to the Task Force at its March 8, 2024 meeting.

As the Task Force indicated that it is generally in favor of both expanding eligibility for the VEP process *and* allowing parentage to be established through an Uncontested Parentage proceeding, the PIG has also been working on proposed instructions and forms for use in such a proceeding.

Attached please find the following:

- Draft *Instructions for Uncontested Determination of Parentage*
- Draft *Affidavit of Birthing Parent*
- Draft *Affidavit of Intended Parent*
- Draft *Appearance and Waiver* form
- Copies of the other documents and forms referenced in the draft instructions and affidavits, including:
  - *Petition for Paternity* (which will be the template for the *Complaint for Determination of Parentage* referenced in the instructions)
  - *Hawai'i Paternity Action Information* form (which will be the template for the *Parentage Action Information* form referenced in the instructions)
  - *Paternity Financial Information Sheet*
  - *Stipulated Order Establishing Paternity*
  - *Stipulated Order Regarding Custody, Visitation, and Support After Establishment of Paternity*
  - *Stipulated Judgment of Paternity*

Please note that any proposed forms and instructions will not need to be adopted by the legislature, but by the judiciary. However, proposed forms and instructions can be submitted to the legislature as part of the Task Force's report to demonstrate how the proposed Uncontested Parentage proceeding will work in practice.

## **INSTRUCTIONS for UNCONTESTED DETERMINATION OF PARENTAGE**

This process may only be used if there is an agreement between yourself and the other party/parent. If there is no agreement you must file the appropriate paperwork to request a hearing. This process may be used if there is an agreement to determine parentage of the child(ren) in question and/or there is an agreement as to custody, visitation, and support.

### **STEP 1: OPENING A CASE**

1. To open a parentage case, the person filing (Petitioner) will need to complete, sign and date the following documents:
  - a. *Complaint for Determination of Parentage; Summons to Answer Complaint*
  - b. *Parentage Action Information Form*
  - c. *Notice of Confidential Information*

If you do not have an attorney, it is suggested that your documents be reviewed at the Family Court Service Center located on the first floor of the Ronald T. Y. Moon Courthouse or on the first floor of Kaahumanu Hale. The Service Center staff will review your documents for completeness and make sure that all necessary documents have been submitted. Please note: the Service center does not provide legal advice.

2. The Petitioner must file these completed, signed and dated documents, plus pay the required filing fees with the Court.
  - If **filing in person** (self-represented Petitioners must file in person): bring the original, completed, signed and dated documents along with the filing fee to the Courthouse to be filed by the Court.
  - If **filing through the Judiciary Electronic Filing and Service System (JEFS)**: upload the required documents into JEFS. See Appendix 1 for directions on how to correctly file your documents into JEFS. Failure to correctly file your documents in JEFS may result in delays.
3. Upon filing, the Petitioner will receive a case number which will need to be included on all subsequent documents filed in the case. Self-represented Petitioner's will also receive details on how to register for a JEFS account.

### **STEP 2: COMPLETE AND FILE REQUIRED DOCUMENTS**

After completing Steps 1 and 2, the following documents must be completed, signed, dated and filed for an uncontested parentage case to be granted (approved) by the Court:

1. *Paternity Financial Information Sheet*
  - Required for both Petitioner and Respondent
  - The information should be current within the past six (6) months
2. *Child Support Guidelines Worksheet* (if applicable)

- The Child Support Guidelines Worksheet and instructions can be found on the Judiciary website: <https://www.courts.state.hi.us/child-support-guidelines>
- Both the Petitioner and Respondent must sign and date the worksheet.
- Child support is paid in two ways: (1) through the Child Support Enforcement Agency (CSEA) or (2) directly.
  - If **paying through the CSEA**, and *Order/Notice to Withhold Income for Support* will need to be completed.
  - If **paying directly**, a *Supplemental Affidavit RE: Direct Payment of Child Support* will need to be completed.
- The Child Support Guidelines Worksheet will not be necessary if you have an intact family (ie. both parents live together and with the children).

### 3. *Affidavit of Birthing Parent*

- The birthing parent must sign before a notary and under the penalty of perjury that one of the following applies:
  - The Petitioner and Respondent are the biological parents of the child(ren) in question; and
  - You waive your right to have a genetic test to determine parentage of the child(ren) in question.

**OR**

  - You do not know who the non-birthing biological parent of the child(ren) is(are); and
  - You are requesting that the non-birthing party be named as the parent for the child(ren) in question.

### 4. *Affidavit of Intended Parent*

- The intended parent must sign before a notary and under the penalty of perjury that one of the following applies:
  - The Respondent and Petitioner are the biological parents of the child(ren) in question; and
  - They waive their right to have a genetic test to determine parentage of the child(ren) in question.

**OR**

  - They do not know who the non-birthing biological parent of the child(ren) is(are); and
  - They are requesting to be named as the parent for the child(ren) in question.

### 5. *Appearance and Waiver*

- Complete, sign and date the *Appearance and Waiver* (signature and date from the Respondent is required).

### 6. *Proposed Stipulated Judgment of Parentage or Stipulated Order Re: Custody, Visitation and Support Orders*

- If determining parentage use the *Proposed Stipulated Judgment of Parentage*
- If parentage has already been determined use the *Proposed Stipulated Order Re: Custody, Visitation and Support Orders*

### **STEP 3: JUDGE REVIEWS DOCUMENTS FOR APPROVAL**

- Once set for hearing, a Judge will review your uncontested parentage documents.
- **If the Judge grants (approves) your Judgment/Order** and signs your *Stipulated Judgment of Parentage* or *Stipulated Order Re: Custody, Visitation and Support Orders*, certified copies will be sent to you and the Respondent.
  - **If you filed in person:** Certified copies will be mailed to you and the Respondent in the envelopes provided by you within six (6) and ten (10) weeks of the Judge's review and approval.
    - If you do not provide envelopes, certified copies are available for you and the Respondent to download on *eCourt Kokua* or to pick up from the Courthouse.
  - **If you filed through JEFS:** Certified copies will be available for you and the Respondent to download on *eCourt Kokua*.
- **If the Judge denies your Judgment/Order**, you will receive a copy of the Court's reasons for denying your paperwork with instructions from the Judge. You must follow the Judge's instructions before your proposed judgment/order can be resubmitted to the Court.

### **STEP 4: IF CHILD SUPPORT PAYMENTS ARE BEING MADE THROUGH THE CHILD SUPPORT ENFORCEMENT AGENCY**

This step is to be completed after the Judge reviews, signs, and filed the documents that you submitted.

1. Mail one (1) certified copy of the *Judgment of Parentage* or *Stipulated Order Re: Custody, Visitation and Support Orders* and *Order/Notice to Withhold Income for Child Support* to the Child Support Enforcement Agency (CSEA).
  - Send via certified mail with a return receipt requested.
2. Mail one (1) certified copy of the *Order/Notice to Withhold Income for Child Support* to the employer of the parent who will be paying child support.
  - Send via certified mail with a return receipt requested.
3. Complete the *Statement of Mailing: Exhibits "1" and "2" (Re: Order for Income Withholding)* for the employer mailout.
  - Exhibit 1: white and green receipt for Certified Mail received upon mailing.
  - Exhibit 2: green card Domestic return receipt signed by the employer.
  - Completion serves as proof that a certified copy of the *Order/Notice to Withhold Income for Child Support* was mailed to the employer.
4. File the *Statement of Mailing: Exhibits "1" and "2" (Re: Order for Income Withholding)*.
  - **If filing in person**, bring the original to the Courthouse.
  - **If filing through JEFS**, upload the required documents into JEFS.

5. Mail one (1) file-stamped copy of the *Statement of Mailing: Exhibits "1" and "2" (Re: Order for Income Withholding)* for the employer mailout to the (1) Child Support Enforcement Agency (CSEA) and (2) to the Respondent.

- If this document was **filed in person**, you will receive a file-stamped copy immediately upon filing at the courthouse.

- If this document was **filed through JEFS**, you will need to print-off through *eCourt Kokua* a copy of the *Statement of Mailing: Exhibits "1" and "2" (Re: Order for Income Withholding)* to mail.

**AFFIDAVIT OF BIRTHING PARENT**

I am the  Petitioner  Respondent in the above-entitled action, and being first duly sworn on oath, deposes and says that:

1. Full name and address is: \_\_\_\_\_

2. Legal Representation:

Birthing parent is  representing themselves  represented by attorney  
\_\_\_\_\_.

3. Appearance and Waiver: Respondent acknowledged receipt of a filed copy of the *Complaint for Parentage* and *Summons to Answer Complaint*; and signed an *Appearance and Waiver* on \_\_\_\_\_. Petitioner recognizes signature on the *Appearance and Waiver*.

4. Jurisdiction: (check all that apply)

4a.  Birthing Parent has been domiciled on the Island of Oahu, State of Hawaii, at the commencement of this action.

4b.  Sexual intercourse or assisted reproduction that lead to the conception of the subject child(ren) occurred in the State of Hawaii.

4c.  The subject child(ren) was/were born in the on the Island of Oahu, State of Hawaii.

5. I am the birthing parent of the minor child(ren) listed below:

\_\_\_\_\_ (name) \_\_\_\_\_ (sex) \_\_\_\_\_ (birth date)

6. As the birthing parent I acknowledge the following: (check all that apply)

that  Petitioner  Respondent is the genetic parent of the minor child(ren).  Petitioner  Respondent waives their right to genetic testing.

the birthing parent was not married at the time of birth or at least 300 days prior to birth of the subject child(ren).

a Voluntary Establishment of Paternity has been signed by the  Petitioner  Respondent and their name and the birthing parent's name appears on the subject child(ren)'s birth certificate.

a Voluntary Establishment of Paternity has not been signed and no one other than the birthing parent is named on the subject child(ren)'s birth certificate.

no individual other than the  Petitioner  Respondent resided in the same household with the child prior to the child reaching the age of majority, including any period of temporary absence, and openly held out the child as the individual's child.

the birthing parent is not aware of any person who was determined to be the genetic parent of the minor child(ren) following court-ordered genetic testing.

the birthing parent is not aware of the identity of the other genetic parent the minor child(ren), because

the subject child(ren) was conceived by assisted reproductive technology and the use of a gamete bank.

\_\_\_\_\_

the birthing parent requests the  Petitioner  Respondent be deemed to be the legal parent of the minor children listed above.

7.  Petitioner  Respondent has carefully reviewed the proposed  *Stipulated Judgement of Parentage*  *Stipulated Order Re: Custody, Visitation, and Support Orders* and agrees to the provisions included in the documents.

8.  Petitioner  Respondent signed the proposed *Judgment/Order*.  Petitioner  Respondent recognizes Respondent's signature on the *Judgment/Order*.

9. Language Comprehension:

Petitioner  Respondent fully understands the English language.

Although Petitioner/Respondent does not fully comprehend written English, this document has been explained to them by \_\_\_\_\_ and based on that explanation Petitioner/Respondent understands this document.

10.  Petitioner  Respondent requests that the court grant and enter this *Judgment/Order* without their appearance in court.

11.  Petitioner  Respondent has read this document and signs it voluntarily and without coercion and duress and not because he/she/they was told to sign it.

12. Prior or Pending Custody/Support Proceedings

12a.  I have not participated in any capacity in any lawsuit or proceeding in any state concerning custody of the minor child(ren) involved in this action. I have no information of any pending custody or support proceeding or of any person not a party to this proceeding who has physical custody or claims to have custody or visitation rights concerning any minor child(ren) of this action.

12b.  Prior court case involving the subject child(ren):

Case Name: \_\_\_\_\_

Case Number: \_\_\_\_\_

Location (City, State) of Court: \_\_\_\_\_

Date Filed: \_\_\_\_\_

Date Concluded: \_\_\_\_\_

Type of Case: \_\_\_\_\_

12c.  Other pending court case involving the subject child(ren):

13. Child Support (select one)

13a.  Petitioner and Respondent are an intact family, as such child support orders are not necessary.

13b.  Petitioner  Respondent believes that the information provided in the completed Child Support Guidelines Worksheet is accurate to the best of the Petitioner's knowledge and the proposed child support is consistent with the Child Support Guidelines Worksheet.

13c.  The proposed child support varies from the Child Support Guidelines Worksheet because of the following exceptional circumstance(s): \_\_\_\_\_

14. Other: \_\_\_\_\_

Petitioner  Respondent declares that they understand that their signature under oath before a notary public is their solemn statement that they read this Affidavit and knows and understands the contents and that these statements are true, correct, and completed to the best of their knowledge and belief.



**AFFIDAVIT OF INTENDED PARENT**

I am the  Petitioner  Respondent in the above-entitled action, and being first duly sworn on oath, deposes and says that:

1. Full name and address is: \_\_\_\_\_

2. Legal Representation:

Intended parent is  representing themselves  represented by attorney  
\_\_\_\_\_.

3.  Appearance and Waiver: Respondent acknowledged receipt of a filed copy of the *Complaint for Parentage* and *Summons to Answer Complaint*; and signed an *Appearance and Waiver* on \_\_\_\_\_. Petitioner recognizes signature on the *Appearance and Waiver*.

4. Jurisdiction: (check all that apply)

4a.  Intended Parent has been domiciled on the Island of Oahu, State of Hawaii, at the commencement of this action.

4b.  Sexual intercourse or assisted reproduction that lead to the conception of the subject child(ren) occurred in the State of Hawaii.

4c.  The subject child(ren) was/were born in the on the Island of Oahu, State of Hawaii.

5. I am the intended parent of the minor child(ren) listed below:

\_\_\_\_\_ (name) \_\_\_\_\_ (sex) \_\_\_\_\_ (birth date)

6. As the intended parent I acknowledge the following: (check all that apply)

that  Petitioner  Respondent is the genetic parent of the minor child(ren).  Petitioner  Respondent waives their right to genetic testing.

the birthing parent was not married at the time of birth or at least 300 days prior to birth of the subject child(ren).

a Voluntary Establishment of Paternity has been signed by the  Petitioner  Respondent and both parents' names appears on the subject child(ren)'s birth certificate.

a Voluntary Establishment of Paternity has not been signed and no one other than the birthing parent is named on the subject child(ren)'s birth certificate.

no individual other than the  Petitioner  Respondent resided in the same household with the child prior to the child reaching the age of majority, including any period of temporary absence, and openly held out the child as the individual's child.

the intended parent is not aware of any person who was determined to be the genetic parent of the minor child(ren) following court-ordered genetic testing.

the intended parent is not aware of the identity of the other genetic parent the minor child(ren), because

the subject child(ren) was conceived by assisted reproductive technology and the use of a gamete bank.

\_\_\_\_\_

the intended parent requests the  Petitioner  Respondent be deemed to be the legal parent of the minor children listed above.

7.  Petitioner  Respondent has carefully reviewed the proposed  *Stipulated Judgement of Parentage*  *Stipulated Order Re: Custody, Visitation, and Support Orders* and agrees to the provisions included in the documents.

8.  Petitioner  Respondent signed the proposed *Judgment/Order*.  Petitioner  Respondent recognizes Respondent's signature on the *Judgment/Order*.

9. Language Comprehension:

Petitioner  Respondent fully understands the English language.

Although Petitioner/Respondent does not fully comprehend written English, this document has been explained to them by \_\_\_\_\_ and based on that explanation Petitioner/Respondent understands this document.

10.  Petitioner  Respondent requests that the court grant and enter this *Judgment/Order* without their appearance in court.

11.  Petitioner  Respondent has read this document and signs it voluntarily and without coercion and duress and not because he/she/they was told to sign it.

12. Prior or Pending Custody/Support Proceedings

12a.  I have not participated in any capacity in any lawsuit or proceeding in any state concerning custody of the minor child(ren) involved in this action. I have no information of any pending custody or support proceeding or of any person not a party to this proceeding who has physical custody or claims to have custody or visitation rights concerning any minor child(ren) of this action.

12b.  Prior court case involving the subject child(ren):

Case Name: \_\_\_\_\_

Case Number: \_\_\_\_\_

Location (City, State) of Court: \_\_\_\_\_

Date Filed: \_\_\_\_\_

Date Concluded: \_\_\_\_\_

Type of Case: \_\_\_\_\_

12c.  Other pending court case involving the subject child(ren):

13. Child Support (select one)

13a.  Petitioner and Respondent are an intact family, as such child support orders are not necessary.

13b.  Petitioner  Respondent believes that the information provided in the completed Child Support Guidelines Worksheet is accurate to the best of the Petitioner's knowledge and the proposed child support is consistent with the Child Support Guidelines Worksheet.

13c.  The proposed child support varies from the Child Support Guidelines Worksheet because of the following exceptional circumstance(s): \_\_\_\_\_

14. Other: \_\_\_\_\_

Petitioner  Respondent declares that they understand that their signature under oath before a notary public is their solemn statement that they read this Affidavit and knows and understands the contents and that these statements are true, correct, and completed to the best of their knowledge and belief.

APPEARANCE AND WAIVER

I, the Defendant, acknowledge receipt of a filed copy of the *Complaint for Determination of Parentage; Summons to Answer Complaint*, in the above-entitled action, submit myself to the Court's jurisdiction and have agreed with the Plaintiff on the matters set forth in:

*Proposed Stipulated Judgment of Parentage*

*Stipulated Order Re: Custody, Visitation and Support Orders*

I consent to a hearing on the *Complaint* by a judge at any time without further notice and without my presence so long as the Judgment/Order issued incorporates the provisions I have approved. If such Judgment/Order is not entered by the Court, I request to be notified.

I understand that I am not required to sign this paper and that by doing so I am permitting the Court, without opposition from me, to proceed with the above-entitled matter at this time unless there is reason for the Court to alter our agreement.

I am not in the military service of the United states

I am in the military service of the United States, but I do not request a stay of proceedings herein, and I do waive any rights I may have under the Servicemembers Civil Relief Act, 50 U.S.C. App. §§501-597b (2003).

DATED: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_

Defendant's Signature

\_\_\_\_\_  
NAME (and Attorney No. if applicable)

\_\_\_\_\_  
STREET ADDRESS OR P. O. BOX

\_\_\_\_\_  
CITY, STATE, ZIP CODE

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
E-MAIL ADDRESS

Petitioner, Self-Represented Litigant

Attorney for Petitioner

IN THE FAMILY COURT OF THE FIRST CIRCUIT

STATE OF HAWAI'I

\_\_\_\_\_) FC-PA No. \_\_\_\_\_

\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_) \_\_\_\_\_

(Your First, Middle, and Last Name)

PETITIONER,

v.

) PETITION FOR PATERNITY or  
) FOR CUSTODY, VISITATION, and  
) SUPPORT ORDERS AFTER VOLUNTARY  
) ESTABLISHMENT OF PATERNITY

\_\_\_\_\_) Attachments:

\_\_\_\_\_)  Attachment for Information on

Additional Children

\_\_\_\_\_)  Birth Certificate(s) of Child(ren)

\_\_\_\_\_)  Paternity Financial Information Sheet

\_\_\_\_\_)  Child Support Guidelines Worksheet

\_\_\_\_\_)  Hawai'i Paternity Action Information

\_\_\_\_\_)  Sheet

\_\_\_\_\_)  Proposed Parenting Plan

\_\_\_\_\_)  Summons

\_\_\_\_\_)  Other: \_\_\_\_\_

(First, Middle, and Last Name of other parent,  
caretaker, and legal father, if any)

and

CHILD SUPPORT ENFORCEMENT AGENCY,  
STATE OF HAWAI'I,

RESPONDENT(S).

PETITION FOR PATERNITY or  
FOR CUSTODY, VISITATION, and SUPPORT ORDERS  
AFTER VOLUNTARY ESTABLISHMENT OF PATERNITY

I, \_\_\_\_\_, (hereinafter  
(Your Name)

Petitioner), a resident of the City and County of Honolulu, State of Hawai'i, seeks to establish paternity  
or obtain a custody, visitation, and support order after voluntary establishment of paternity, and request

other relief pursuant to Hawai'i Revised Statutes chapters 346, 571, 576D, and 584. Upon information and belief, Petitioner alleges the following:

1. **CHILD(REN): (NOTE: EACH CHILD NAMED IN THIS PETITION SHOULD HAVE THE SAME MOTHER AND NATURAL FATHER. IF YOU ARE SEEKING TO ESTABLISH PATERNITY FOR CHILDREN WITH DIFFERENT NATURAL FATHERS, A SEPARATE PETITION SHOULD BE FILED FOR EACH NATURAL FATHER.)**

The child(ren) involved in this case is/are alive and has/have not been adopted or emancipated. Information regarding the child(ren) is as follows:

1A. Child's Full Name: \_\_\_\_\_

Male  Female Birthdate: \_\_\_\_\_ Birth Place: \_\_\_\_\_

Child's Current Address: \_\_\_\_\_

School and Grade: \_\_\_\_\_

Is CPS Involved?  Yes  No

1B. Child's Full Name: \_\_\_\_\_

Male  Female Birthdate: \_\_\_\_\_ Birth Place: \_\_\_\_\_

Child's Current Address: \_\_\_\_\_

School and Grade: \_\_\_\_\_

Is CPS Involved?  Yes  No

1C. Child's Full Name: \_\_\_\_\_

Male  Female Birthdate: \_\_\_\_\_ Birth Place: \_\_\_\_\_

Child's Current Address: \_\_\_\_\_

School and Grade: \_\_\_\_\_

Is CPS Involved?  Yes  No

1D. Child's Full Name: \_\_\_\_\_

Male  Female Birthdate: \_\_\_\_\_ Birth Place: \_\_\_\_\_

Child's Current Address: \_\_\_\_\_

School and Grade: \_\_\_\_\_

Is CPS Involved?  Yes  No

1E. Child's Full Name: \_\_\_\_\_

Male  Female Birthdate: \_\_\_\_\_ Birth Place: \_\_\_\_\_

Child's Current Address: \_\_\_\_\_

School and Grade: \_\_\_\_\_

Is CPS Involved?  Yes  No

PLACES WHERE AND PEOPLE WITH WHOM THE CHILD(REN) HAS/HAVE LIVED WITHIN THE LAST FIVE (5) YEARS AND DATES:

ADDRESS	CHILD LIVED WITH (Mother, Father, Other)	FROM (Month/Year)	TO (Month/Year)

2. **THE PARTIES TO THIS ACTION ARE:** (Check all that apply)

2A. **MOTHER:**

Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: xxx-xx- \_\_\_\_\_

Gross Monthly Income: \$ \_\_\_\_\_ Employer: \_\_\_\_\_

Resident of: City: \_\_\_\_\_ State: \_\_\_\_\_

2B. **THE FOLLOWING PERSON'S NAME APPEARS AS FATHER ON THE CHILD(REN)'S BIRTH CERTIFICATE.**

(For children born July 1, 1999 and after.)

Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: xxx-xx- \_\_\_\_\_

Gross Monthly Income: \$ \_\_\_\_\_ Employer: \_\_\_\_\_

Resident of: City: \_\_\_\_\_ State: \_\_\_\_\_

Mother and Father signed a Voluntary Acknowledgment of Paternity at:

the Hospital where Mother gave birth.  the Hawai'i State Department of Health.

[ ] 2C. **THE FOLLOWING PERSON HAD SEXUAL RELATIONS WITH MOTHER DURING THE CHILD(REN)'S CONCEPTION PERIOD AND IS THE CHILD(REN)'S NATURAL FATHER:** (For children born prior to July 1, 1999 and/or no father listed on birth certificate.)

Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: xxx-xx- \_\_\_\_\_

Gross Monthly Income: \$ \_\_\_\_\_ Employer: \_\_\_\_\_

Resident of: City: \_\_\_\_\_ State: \_\_\_\_\_

[ ] 2D. **THE FOLLOWING PERSON IS THE LEGAL ONLY FATHER AS HE WAS MARRIED TO MOTHER AT THE TIME OF THE CHILD(REN)'S BIRTH or HE AND MOTHER ARE DIVORCED, HOWEVER, THE CHILD(REN) WAS/WERE BORN WITHIN 300 DAYS OF SAID DIVORCE. HE IS NOT THE NATURAL FATHER OF SAID CHILD(REN).**

Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: xxx-xx- \_\_\_\_\_

Gross Monthly Income: \$ \_\_\_\_\_ Employer: \_\_\_\_\_

Resident of: City: \_\_\_\_\_ State: \_\_\_\_\_

Mother and Legal Father were married on (date): \_\_\_\_\_

Mother and Legal Father were divorced on (date): \_\_\_\_\_

3. **CUSTODIAL CARETAKER:** The following agency or person, other than a parent of the child(ren) has physical custody of the child(ren):

CHILD PROTECTIVE SERVICES (CPS)

OTHER: Name: \_\_\_\_\_

Also Known As: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Resident of: City: \_\_\_\_\_ State: \_\_\_\_\_

4. **BIRTH EXPENSES:** The Department of Human Services (DHS) and/or either parent may have made payments which resulted from or were incident to the Mother's pregnancy, the birth of the child(ren), and post-natal care and treatment of the child(ren). The payments may create a debt due, pursuant to the law, to the DHS and/or either parent.

5. **PAST GOVERNMENT BENEFITS (WELFARE/QUEST/FOOD STAMPS):**

[ ] 5A. The DHS may have provided government benefits for the child(ren) and the payments create



a debt due and owing to the DHS by Father or Mother pursuant to the law.

[ ] 5B. The child(ren) has/have not received government benefits in the past.

6. **GOVERNMENT BENEFITS FOR THE CHILD(REN):** The child(ren) are currently receiving government benefits: (Check all that apply and include the monthly amounts.)

- AFDC/TANF \$ \_\_\_\_\_  SSI/SSDI \$ \_\_\_\_\_  
 Food Stamps \$ \_\_\_\_\_  Other: \_\_\_\_\_ \$ \_\_\_\_\_  
 None of the child(ren) named in this *Petition* are receiving government benefits at this time.

7. **MEDICAL HEALTH/DENTAL INSURANCE:** The child(ren) are currently covered under

- HMSA  Kaiser  Quest  Aloha Care  Other: \_\_\_\_\_  
paid by  Mother  Father  Legal Father  State of Hawai'i  \_\_\_\_\_

8. **OTHER LEGAL PROCEEDINGS:** My participation as a party in other legal proceedings involving any of the Respondent(s) and/or Child(ren) is as follows:

- See Hawai'i Paternity Action Information Sheet

[ ] 8A. Case Name: \_\_\_\_\_

Case Number: \_\_\_\_\_ Location of Court: \_\_\_\_\_

Date Filed: \_\_\_\_\_ Date Concluded: \_\_\_\_\_

Type of Case: \_\_\_\_\_

[ ] 8B. Case Name: \_\_\_\_\_

Case Number: \_\_\_\_\_ Location of Court: \_\_\_\_\_

Date Filed: \_\_\_\_\_ Date Concluded: \_\_\_\_\_

Type of Case: \_\_\_\_\_

- See attached page for additional cases.

[ ] 8C. I am not now, nor have I been in the past, a party to any other legal proceeding involving any of the Respondent(s) and/or Child(ren).

9. **OTHER CHILD SUPPORT ENFORCEMENT AGENCY PROCEEDINGS:**

[ ] 9A. There is a current child support order for the following named child(ren):

\_\_\_\_\_

Case Number: \_\_\_\_\_ The child support amount is \$ \_\_\_\_\_ per month

paid by  Mother  Father to  Mother  Father  Caretaker: \_\_\_\_\_

This child support obligation was determined on (date) \_\_\_\_\_

by  Family Court, State of Hawai'i

Hawai'i Administrative Order by:

the Office of Child Support Hearings (Kapolei)

the Office of Child Support Enforcement Agency (Kapolei)

\_\_\_\_\_

9B. There is a pending administrative child support hearing at the Office of Child Support Hearings (Kapolei) which is scheduled for (date) \_\_\_\_\_.

9C. There is/are no child support obligation/order for the child/any of the children.

10. **OTHER INFORMATION:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PETITIONER BELIEVES THAT IT IS IN THE BEST INTERESTS OF THE CHILD(REN) THAT THE COURT ENTER THE FOLLOWING ORDERS:**

1. **PATERNITY:** \_\_\_\_\_  
(Full Name of Natural Father)

be adjudged the legal and natural father of the child(ren).

2. **LEGAL CUSTODY** of the child(ren) be awarded to:

MOTHER     FATHER     MOTHER AND FATHER, JOINTLY

CARETAKER: \_\_\_\_\_

OTHER: \_\_\_\_\_

The issue of legal custody should be reserved.

3. **PHYSICAL CUSTODY** of the child(ren) be awarded to:

MOTHER     FATHER     MOTHER AND FATHER, JOINTLY

CARETAKER: \_\_\_\_\_

OTHER: \_\_\_\_\_

The issue of physical custody should be reserved.

4. **VISITATION** of the child(ren) be awarded to:

MOTHER     FATHER subject to the following schedule:

(include days and times) \_\_\_\_\_

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- reasonable visitation, as mutually agreed upon by the parties.
- to be decided upon by the Court.
- no visitation until further order of the Family Court because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- The issue of visitation should be reserved.

- [ ] 5. **CHILD SUPPORT** for the child(ren) to be paid by:  MOTHER  FATHER.  
Child support for each child should continue uninterrupted (including summers and vacations) as long as each child continues his/her education post high school on a full-time basis at an accredited college, university, vocational, or technical school, or until each child attains the age of 23 years, whichever event occurs first or as ordered by the Court.
  - [ ] 5A. Child support should be determined by the Child Support Guidelines Worksheet.
  - [ ] 5B. Child support should be \$ \_\_\_\_\_ per child per month for a total of \$ \_\_\_\_\_ per month, based upon the current Child Support Guidelines Worksheet.
  - [ ] 5C. Child support should be reserved as the parties and the child(ren) are an intact family.
  - [ ] 5D. Child support should be reserved for a court of competent jurisdiction.
- [ ] 6. **MEDICAL/HEALTH/DENTAL INSURANCE** for the child(ren) should be provided by:  
 MOTHER  FATHER
- [ ] 7. **BIRTH EXPENSES** of the child(ren) to be as follows:  
 MOTHER  FATHER be ordered to pay for all expenses resulting from or incident to the pregnancy, birth of the child(ren), and postnatal care and treatment of the child(ren), in the amounts proven to the Court.  
DHS may be entitled to reimbursement for birth expenses.

- [ ] 8. **PAST SUPPORT** of the child(ren) to be as follows:
- The non-custodial parent should be ordered to reimburse the custodial parent and DHS, if appropriate, for the past support of the child(ren).
  - The non-custodial parent should be ordered to pay for the support, maintenance, and education of the child(ren) from \_\_\_\_\_.
  - Custodial parent is requesting past child support of \$ \_\_\_\_\_ which is based on \_\_\_\_\_.

9. **OTHER RELIEF**

- The Court grant other relief as may be appropriate and equitable under the provisions of Chapters 346, 571, 576D, and 584 of the Hawai'i Revised Statutes.
- \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**CERTIFICATION:**

I hereby declare under the penalty of law that the foregoing is true and correct.

DATED: [ ] Kapolei, [ ] Honolulu, Hawai'i, \_\_\_\_\_.

\_\_\_\_\_  
 (Your Signature)

\_\_\_\_\_  
 (Print Your Name)



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as far in advance as possible to allow time to provide an accommodation: Call the ADA Coordinator of the First Circuit Family Court Office at 954-8200, fax 954-8308, or send an e-mail to [adarequest@courts.hawaii.gov](mailto:adarequest@courts.hawaii.gov). The ADA Coordinator will work to provide, but cannot guarantee your requested auxiliary aid, service, or accommodation.

*Please call the Family Court Service Center at 954-8290 if you have any questions about forms or procedures.*

STATE OF HAWAI'I FAMILY COURT FIRST CIRCUIT	CASE ID/NUMBER  _____
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**HAWAI'I PATERNITY ACTION  
INFORMATION**

Child Support Enforcement Agency (CSEA),  
State of Hawai'i and

\_\_\_\_\_

\_\_\_\_\_

Petitioner(s)

v.

\_\_\_\_\_

\_\_\_\_\_

and Child Support Enforcement Agency,  
State of Hawai'i

Respondent(s)

This document is prepared by:  
 Self-Represented     Attorney for  
 Petitioner     Respondent

\_\_\_\_\_

Name (If attorney, include attorney license number)

\_\_\_\_\_

Address

\_\_\_\_\_

City, State, and Zip Code

\_\_\_\_\_

Telephone No.                      Fax No.

\_\_\_\_\_

E-Mail Address

**INSTRUCTIONS:** This form **MUST** be completed and filed with any petition or motion filed in paternity actions. Failure to comply with completing this document will prevent the case from receiving a hearing date. **CHECK AND COMPLETE ALL THAT APPLY:**

1. **This case is**  an initial Petition for  Paternity  Custody, Visitation, and Support Orders After Voluntary Establishment of Paternity.

a Motion.

\_\_\_\_\_

**2. The prior related cases involving either the Mother, Father, Child(ren), and Caretaker (if applicable) is/are:** (include all cases, for example, divorce, paternity, guardianship, adoption, restraining order, etc.)

a. Case name: \_\_\_\_\_  
Case number: \_\_\_\_\_ Location of Court: \_\_\_\_\_  
Type of case: \_\_\_\_\_ Date of Last Court Order: \_\_\_\_\_  
Parties' Names and Child(ren) Involved: \_\_\_\_\_

b. Case name: \_\_\_\_\_  
Case number: \_\_\_\_\_ Location of Court: \_\_\_\_\_  
Type of case: \_\_\_\_\_ Date of Last Court Order: \_\_\_\_\_  
Parties' Names and Child(ren) Involved: \_\_\_\_\_

c. Case name: \_\_\_\_\_  
Case number: \_\_\_\_\_ Location of Court: \_\_\_\_\_  
Type of case: \_\_\_\_\_ Date of Last Court Order: \_\_\_\_\_  
Parties' Names and Child(ren) Involved: \_\_\_\_\_

d. Case name: \_\_\_\_\_  
Case number: \_\_\_\_\_ Location of Court: \_\_\_\_\_  
Type of case: \_\_\_\_\_ Date of Last Court Order: \_\_\_\_\_  
Parties' Names and Child(ren) Involved: \_\_\_\_\_

**3. The issue(s) on which the parties cannot agree on is/are:**

- |   |   |
|---|---|
| <input type="checkbox"/> Paternity  | <input type="checkbox"/> Establishment of Child Support   |
| <input type="checkbox"/> Genetic Tests/Costs  | <input type="checkbox"/> Child Support Modification   |
| <input type="checkbox"/> Legal Custody  | <input type="checkbox"/> Child Support Enforcement  |
| <input type="checkbox"/> Physical Custody   | <input type="checkbox"/> Past Child Support Owing to: <input type="checkbox"/> Mother <input type="checkbox"/> Father |
| <input type="checkbox"/> Visitation   | <input type="checkbox"/> Department of Human Services ("DHS")   |
| <input type="checkbox"/> Birth Related Expenses   | <input type="checkbox"/> _____  |
| <input type="checkbox"/> NONE, this case is uncontested with all issues agreed upon by the parties. |   |

## INFORMATION REQUIRED REGARDING MOTHER AND ALL FATHERS

	MOTHER			ALLEGED NATURAL FATHER			LEGAL ONLY FATHER			
<b>Full Name</b> (First, Middle, Last)										
<b>All Former Names</b>										
<b>Street Address, Apt. No.</b>										
<b>City, State, Zip Code</b>										
<b>Telephone Numbers</b>	HOME	WORK/CELL		HOME	WORK/CELL		HOME	WORK/CELL		
<b>E-mail Address</b>										
<b>Social Security No.</b>	xxx-xx-____ (last 4 digits only)			xxx-xx-____ (last 4 digits only)			xxx-xx-____ (last 4 digits only)			
<b>Date of Birth</b>										
<b>Place of Birth</b>										
<b>Race or Ethnicity</b>										
<b>No. of Marriages</b>										
<b>Primary Employer</b> (Name, Address, and Telephone Number)										
<b>Job Title</b>										
<b>Work Schedule</b>										
<b>Length of Service</b>										
<b>Gross Monthly Income</b>	Primary	Secondary	Welfare	Primary	Secondary	Welfare				
<b>Amount of Monthly Court Ordered Child Support</b>										
<b>Name(s) of Child(ren) for Whom Child Support is Paid</b>										
<b>Where Child Support Order(s) Issued</b>										

## INFORMATION REQUIRED FOR CUSTODY/VISITATION

**\*List all children for whom you are requesting custody/visitation in this paternity action.**

1. Child's Full Name: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ Sex:  Male  Female  Other Birth Place: \_\_\_\_\_  
Current Address: \_\_\_\_\_  
School and Grade: \_\_\_\_\_  
Is Child Protective Services (CPS) or the Department of Human Services currently involved?  Yes  No
  
2. Child's Full Name: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ Sex:  Male  Female  Other Birth Place: \_\_\_\_\_  
Current Address: \_\_\_\_\_  
School and Grade: \_\_\_\_\_  
Is Child Protective Services (CPS) or the Department of Human Services currently involved?  Yes  No
  
3. Child's Full Name: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ Sex:  Male  Female  Other Birth Place: \_\_\_\_\_  
Current Address: \_\_\_\_\_  
School and Grade: \_\_\_\_\_  
Is Child Protective Services (CPS) or the Department of Human Services currently involved?  Yes  No
  
4. Child's Full Name: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ Sex:  Male  Female  Other Birth Place: \_\_\_\_\_  
Current Address: \_\_\_\_\_  
School and Grade: \_\_\_\_\_  
Is Child Protective Services (CPS) or the Department of Human Services currently involved?  Yes  No



**OTHER CHILD(REN) OF EITHER PARTY**

**(after the child's name, indicate "MO" for Mother's child and "FA" for Father's child)**

1. Child's Full Name: \_\_\_\_\_  
 Birthdate: \_\_\_\_\_ Sex:  Male  Female  Other Birth Place: \_\_\_\_\_  
 Current Address: \_\_\_\_\_  
 School and Grade: \_\_\_\_\_  
 Is Child Protective Services (CPS) or the Department of Human Services currently involved?  Yes  No

2. Child's Full Name: \_\_\_\_\_  
 Birthdate: \_\_\_\_\_ Sex:  Male  Female  Other Birth Place: \_\_\_\_\_  
 Current Address: \_\_\_\_\_  
 School and Grade: \_\_\_\_\_  
 Is Child Protective Services (CPS) or the Department of Human Services currently involved?  Yes  No

3. Child's Full Name: \_\_\_\_\_  
 Birthdate: \_\_\_\_\_ Sex:  Male  Female  Other Birth Place: \_\_\_\_\_  
 Current Address: \_\_\_\_\_  
 School and Grade: \_\_\_\_\_  
 Is Child Protective Services (CPS) or the Department of Human Services currently involved?  Yes  No

**PLACES WHERE AND PEOPLE WITH WHOM THE CHILD(REN) IN THIS CASE  
 HAVE LIVED WITH WITHIN THE LAST FIVE (5) YEARS AND DATES**

ADDRESS	CARETAKERS (Mother, Father, Other)	FROM Month/Year TO Month/Year

**PLACES WHERE AND PEOPLE WITH WHOM THE CHILD(REN) IN THIS CASE  
HAVE LIVED WITH WITHIN THE LAST FIVE (5) YEARS AND DATES**

(continued from page 5)

ADDRESS	CARETAKERS (Mother, Father, Other)	FROM Month/Year TO Month/Year

**I, THE UNDERSIGNED, DO DECLARE UNDER PENALTY OF LAW THAT THE  
FOREGOING IS TRUE AND CORRECT.**

DATE	SIGNATURE  PRINT NAME:
------	------------------------------



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as far in advance as possible to allow time to provide an accommodation: Call the ADA Coordinator of the First Circuit Family Court Office at (808)954-8200, fax (808)954-8308, or send an e-mail to [adarequest@courts.hawaii.gov](mailto:adarequest@courts.hawaii.gov). The ADA Coordinator will work to provide, but cannot guarantee your requested auxiliary aid, service, or accommodation.

*Please call the Family Court Service Center at (808)954-8290 if you have any questions about forms or procedures.*

\_\_\_\_\_  
Name (and Attorney No. if applicable)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
E-Mail Address

Petitioner, Self-Represented Litigant  
 Respondent, Self-Represented Litigant  
 Attorney for  Petitioner  Respondent

IN THE FAMILY COURT OF THE FIRST CIRCUIT

STATE OF HAWAI'I

Child Support Enforcement Agency, ) FC-PA No. \_\_\_\_\_  
State of Hawai'i, and )  
)  
) PATERNITY FINANCIAL  
) INFORMATION SHEET

Mother  Father  Caretaker )  
Petitioner(s) )

v. )  
)  
)  
)

Mother  Father  Caretaker )  
)  
)

Mother  Father  Caretaker )  
)  
)

and Child Support Enforcement Agency, )  
State of Hawai'i, )  
Respondent(s). )

Paternity Financial Information Sheet

**1. INCOME: YOU MUST LIST ALL INCOME AMOUNTS AND SOURCES  
(Note: The Court may require you to file more detailed information.)**

		Gross Monthly Income
a.	NAME OF PRIMARY EMPLOYER: _____ _____	\$ _____
	Paid <input type="checkbox"/> monthly <input type="checkbox"/> 2 times per month <input type="checkbox"/> every 2 weeks <input type="checkbox"/> weekly <input type="checkbox"/> other: _____	\$ _____
b.	OTHER INCOME:	
	Name of Second Employer: _____	\$ _____
	Interest Income: (name of financial institution(s)): _____ _____	\$ _____
	Net Rental Income: (location) _____ _____	\$ _____
	Other: (i.e., Social Security, workers' compensation, etc.) _____ _____	\$ _____
c.	MONEY RECEIVED FROM WELFARE BENEFITS.....	\$ _____
<b>2.</b>	<b>EXPENSES</b>	
a.	Child care expenses paid by you, on behalf of the child(ren) involved in this case.....	\$ _____
b.	Medical and Dental Insurance paid for yourself \$ _____	\$ _____
c.	Medical and Dental Insurance paid by you for your child(ren) involved in this case.....	\$ _____
	<b>TOTAL</b>	\$ _____
<b>3.</b>	<b>ASSETS List the total amounts of the following:</b>	
a.	Credit Union/Bank Saving Accounts Balances.....	\$ _____
b.	Securities values, Stocks, Bonds, etc.....	\$ _____
c.	Real Property Values.....	\$ _____
d.	Personal Property (car, jewelry, etc.).....	\$ _____
e.	_____	\$ _____
f.	_____	\$ _____



STATE OF HAWAI'I FAMILY COURT FIRST CIRCUIT	CASE ID/NUMBER _____
---	-------------------------

**Stipulated**

## Order Establishing Paternity

Child Support Enforcement Agency (CSEA),  
 State of Hawai'i and

---

Mother     Father     Other  
 \_\_\_\_\_  
 Petitioner(s),  
 v.

---

Mother     Father     Other  
 \_\_\_\_\_

---

Mother     Father     Other  
 \_\_\_\_\_

Child Support Enforcement Agency (CSEA),  
 State of Hawai'i,  
 Respondent(s).

Court Use Only

This document is prepared by:

Self-Represented     Petitioner     Respondent  
 Attorney for     Petitioner     Respondent

---

Name (If attorney, include attorney license number)

---

Address

---

City, State, Zip Code

---

Phone Number

---

Hearing Date:

---

Presiding Judge:

---

The parties, without a hearing, stipulate to the following:

The case came on for hearing and the following parties were present:

Mother: \_\_\_\_\_     Mother's Attorney: \_\_\_\_\_  
 Father: \_\_\_\_\_     Father's Attorney: \_\_\_\_\_  
 CSEA's Attorney: \_\_\_\_\_     Other: \_\_\_\_\_

Although duly notified, \_\_\_\_\_ did not appear and the hearing proceeded by default.

Based upon the records and files, testimony, if any, and evidence adduced, the Court finds it has jurisdiction over this paternity proceeding and makes the following findings and orders:

**CHILDREN:** The following subject child(ren) are covered by this order:

	<u>Full Name</u>	Gender: Male (M)/ Female (F)/Other (O)	Date of Birth
1.	_____		
2.	_____		
3.	_____		
	_____		

**BASED UPON A PREPONDERANCE OF THE EVIDENCE, IT IS HEREBY ORDERED, ADJUDGED, AND DECREED AS FOLLOWS:**

**1. PATERNITY**

[ ] \_\_\_\_\_ IS THE FATHER OF THE ABOVE-NAMED MINOR CHILD(REN) BORN TO MOTHER AND THAT SAID CHILD(REN) IS/ARE STILL ALIVE AND HAS/HAVE NOT BEEN ADOPTED.

[ ] The presumption of paternity of \_\_\_\_\_ is rebutted by clear and convincing evidence based on the  results of genetic testing  Appearance and Waiver  testimony and he is dismissed from this action as a party defendant. Accordingly, his name shall be deleted from the caption of this case and, if applicable, from subject child(ren)'s Certificate of Live Birth naming him as the father of said child(ren), and from all reference hereinafter made to the Father.

**2. BIRTH CERTIFICATE**

2A. The Department of Health or similar agency in the jurisdiction of the child(ren)'s birth shall prepare a new Certificate of Live Birth for subject child(ren), inserting the following information:

Father's First Name: \_\_\_\_\_

Father's Middle Name: \_\_\_\_\_

Father's Last Name: \_\_\_\_\_

Ethnicity: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

[ ]2B. The subject child(ren)'s name(s) shall be changed to: (Numbers below should correspond to the number given to the child(ren) at the top of page 2.)

- (1) First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_
- (2) First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_
- (3) First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_

**3. FURTHER ORDERS:**  All other issues are reserved.

**DATED:**      **Kapolei, Hawai'i,**

\_\_\_\_\_  
**Print Judge's Name:**

**JUDGE OF THE ABOVE-ENTITLED COURT**

\_\_\_\_\_  
**Mother's Signature**

\_\_\_\_\_  
**Father's Signature**

\_\_\_\_\_  
**Signature of Attorney for Mother**

\_\_\_\_\_  
**Signature of Attorney for Father**

\_\_\_\_\_  
**Signature of Attorney for CSEA**

\_\_\_\_\_  
**Signature of (Print Name):**\_\_\_\_\_



STATE OF HAWAI'I FAMILY COURT FIRST CIRCUIT	CASE ID/NUMBER
---	----------------

Stipulated   
 Temporary   
 Final

**Order Regarding Custody, Visitation,  
and Support After Establishment of  
Paternity**

Child Support Enforcement Agency (CSEA),  
State of Hawai'i and

---

Mother   
 Father   
 Other  
Petitioner(s),

v.

---

Mother   
 Father   
 Other

---

Mother   
 Father   
 Other

Child Support Enforcement Agency (CSEA),  
State of Hawai'i,  
Respondent(s).

Court Use Only

This document is prepared by:

Self-Represented   
 Petitioner   
 Respondent  
 Attorney for   
 Petitioner   
 Respondent

---

Name (If attorney, include attorney license number)

---

Address

---

City, State, Zip Code

---

Phone Number

---

Hearing Date:

---

Presiding Judge:

The parties, without a hearing, stipulate to the following:  
 The case came on for hearing and the following parties were present:

Mother: \_\_\_\_\_   
 Mother's Attorney: \_\_\_\_\_  
 Father: \_\_\_\_\_   
 Father's Attorney: \_\_\_\_\_  
 CSEA's Attorney: \_\_\_\_\_   
 Other: \_\_\_\_\_

Although duly notified, \_\_\_\_\_ did not appear and the hearing proceeded by default.

Based upon the records and files, testimony, if any, and evidence adduced, the Court finds it has jurisdiction over this paternity proceeding and makes the following findings and orders:

**CHILDREN:** The following subject child(ren) are covered by this order:

	<u>Full Name</u>	Gender: Male (M)/ Female (F)/Other (O)	Date of Birth
1.	_____		
2.	_____		
3.	_____		
4.	_____		

**BASED UPON A PREPONDERANCE OF THE EVIDENCE, IT IS HEREBY ORDERED, ADJUDGED, AND DECREED AS FOLLOWS:**

Paternity for the subject child(ren) has/have been established by a Voluntary Establishment of paternity or previously entered order establishing paternity or judgment of paternity.

**1. CUSTODY AND VISITATION**

(A) LEGAL CUSTODY: The legal custody of the subject child(ren) is/are awarded to:

- Mother
- Father
- Mother and Father, jointly
- Caretaker: \_\_\_\_\_
- This is a temporary order.
- The issue of legal custody is reserved.

(B) PHYSICAL CUSTODY: The physical custody of the subject child(ren) is/are awarded to:

- Mother
- Father
- Mother and Father, jointly
- For joint physical custody the time sharing arrangement shall be as follows:
- Caretaker: \_\_\_\_\_
- This is a temporary order.
- The issue of physical custody is reserved.

2. **VISITATION:** Whenever possible, the parent who has the child(ren) will take the child(ren) to his/her/their weekend activities that are important to the child(ren), such as sports, birthday parties, etc.

[ 2A. VISITATION SCHEDULE:  ATHER  OTHER shall be entitled to visitation, which will begin on (date) \_\_\_\_\_ as follows:

[ ] (1) Reasonable visitation as agreed to by the parties.

[ ] (2) Every other weekend from \_\_\_\_\_ at \_\_\_\_\_ to \_\_\_\_\_ at \_\_\_\_\_.  
(day of week) (time) (day of week) (time)

Midweek dinner visits on \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_.  
(day(s) of the week) (time) (time)

Midweek overnight visits on \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
(day of week) (time) (time)

\_\_\_\_\_ at \_\_\_\_\_.  
(day of week) (time)

[ ] (3) Other visitation as set forth on page 4 (Detailed Visitation Schedule).

[ ] (4) Visitation shall be as follows:

[ ] (5) Out-of-State visitation shall be as follows:

## DETAILED VISITATION SCHEDULE

### 1. VACATIONS/INTERSESSIONS:

#### a. Summer Vacation:

- Shall be split as agreed to by the parties
- One-half of summer vacation with alternate weekends to the other parent. The child(ren) will be returned to the custodial parent at least one week prior to the start of school.
- 

#### b. Christmas and New Year's vacation:

- Shall be split as agreed to by the parties.
- Christmas vacation shall be divided equally.  Mother  Father shall have visitation with the child(ren) for one-half of the Christmas vacation.
- In odd-numbered years,  Mother's  Father's visitation shall occur in the first half of the Christmas vacation, including Christmas eve and Christmas day.
- In even-numbered years,  Mother's  Father's visitation shall occur in the second half of the Christmas vacation, including New Year's eve and New Year's Day.
- 

#### c. Spring Break:

- Shall be split as agreed to by the parties.
- Each parent shall have one-half of Spring vacation. The parent who has the child(ren) on the weekend following the last day of school shall have the extra day, if any.
- Mother shall have the child(ren) in  odd-numbered years  even-numbered years. Father shall have the child(ren) in the other years.

#### d. School Intersessions (for Year-Round School)

- Each intersession shall be split as agreed to by the parties.
- Intersessions shall be alternated between the parties.
- 

### 2. HOLIDAYS/SPECIAL DAYS

- Monday and Friday holidays shall be spent with the parent who has the child(ren) for the weekend attached to the holiday.
- Father's Day and Father's birthday shall be spent with Father
- Mother's Day and Mother's birthday shall be spent with Mother.
- Mother shall have the child(ren) on Easter, Thanksgiving, and Halloween in  odd-numbered years  even-numbered years. Father shall have the child(ren) for these holidays in the other alternating years.
- Other holidays/special days (child's birthday, etc.) shall be as follows: \_\_\_\_\_

### 3. TELEPHONE/ELECTRONIC CONTACTS:

- Unlimited telephone contact at reasonable hours.
- Every \_\_\_\_\_ between the hours of \_\_\_\_\_ to \_\_\_\_\_ (Hawai'i time).
- 

### 4. MODIFICATIONS TO THE ABOVE SCHEDULE:

- Any additional visitation or changes to the above detailed visitation schedule may be made as agreed to between the parties with at least 24-hours notice.

[ ] **5B. SUPERVISED VISITATION**

[ ] (1)  FATHER  MOTHER shall have supervised visitation at the PACT Center subject to the availability of the Center. The telephone number for the Family Visitation Center of the PACT Center is (808) 847-0015. It is the visiting parent's responsibility to contact the PACT Center to arrange for visitation and to pay for the costs of the PACT Center's services. Both parents shall call the Center within one (1) week from the date of this Order to register for visitation.

[ ] (2)  FATHER  MOTHER shall have supervised visitation with \_\_\_\_\_  
\_\_\_\_\_ providing the supervision. Visitation shall be as follows:  
\_\_\_\_\_ at \_\_\_\_\_ to \_\_\_\_\_  
(Day(s) of the Week) (Time) (Time)  
\_\_\_\_\_ at \_\_\_\_\_ to \_\_\_\_\_  
(Day(s) of the Week) (Time) (Time)

[ ] (3) Other supervised visits shall be as follows:

[ ] **5C. OTHER VISITATION PROVISIONS:**

[ ] **5D.** The issue of visitation shall be reserved.

**6. CURRENT CHILD SUPPORT:**

**6A.** Child support is  established  modified  suspended  terminated as follows:

(1) CURRENT CHILD SUPPORT:  Father  Mother shall pay for child support the sum of \$\_\_\_\_\_ per child per month for a total of \$\_\_\_\_\_ per month, each and every month, commencing \_\_\_\_\_.

Payments for child support for each child until the child attains the age of eighteen (18) years graduates from high school or discontinues high school, whichever occurs last. Child support shall further continue uninterrupted (including during regular school vacation periods) until age 23 years so long as said child continues his or her education post-high school on a full-time basis at an accredited college or university or in a vocational or trade school or until the further order of the Court.

The parent making child support payments is referred to as the "Payor Parent."

(2) SUSPENSION/TERMINATION OF CHILD SUPPORT:  Father's  Mother's child support shall be  suspended  terminated effective \_\_\_\_\_.

**6B.** The issue regarding child support shall be reserved pending further determination by a competent tribunal or court.

**6C.** Current child support orders are temporary, pending resolution of the child support issue which may result in modification retroactive to the commencement date of this Order.

**6D.** OTHER CHILD SUPPORT PROVISIONS:

**7. PAST CHILD SUPPORT**  The issue is reserved.

**7A. OWED TO THE DEPARTMENT OF HUMAN SERVICES ("DHS"):**

(1) Judgment shall enter against Father for the sum of \$\_\_\_\_\_ for past child support owing to DHS for the period(s) from \_\_\_\_\_ through \_\_\_\_\_. Father shall pay \$\_\_\_\_\_ each and every month commencing \_\_\_\_\_ until the judgment is fully paid.

(2) Judgment shall enter against Mother for the sum of \$\_\_\_\_\_ for past child support owing to DHS for the period(s) from \_\_\_\_\_ through \_\_\_\_\_. Mother shall pay \$\_\_\_\_\_ each and every month commencing \_\_\_\_\_ until the judgment is fully paid.

[ ] **7B. OWED TO MOTHER/FATHER:**

[ ] (1) Judgment shall enter against Father for the sum of \$ \_\_\_\_\_ for past child support owing to Mother for the period from \_\_\_\_\_ through \_\_\_\_\_.  
Father shall pay \$ \_\_\_\_\_ each and every month commencing \_\_\_\_\_ until the judgment is fully paid.

[ ] (2) Judgment shall enter against Mother for the sum of \$ \_\_\_\_\_ for past child support owing to Father for the period from \_\_\_\_\_ through \_\_\_\_\_.  
Mother shall pay \$ \_\_\_\_\_ each and every month commencing \_\_\_\_\_ until the judgment is fully paid.

8. **METHOD OF PAYMENT:** All payments for child support in accordance with the laws of the State of Hawai'i. All payments ordered above shall be made payable to and mailed to:

**CHILD SUPPORT ENFORCEMENT AGENCY, Lock Box  
P.O. Box 1860  
Honolulu, Hawai'i 96805-1860**

**INCOME WITHHOLDING:** All payments for child support shall be payable by way of an Order/Notice to Withhold Income for Child Support served on Payor Parent's current as well as successor employers.

**PAYMENT:** Payor Parent shall make payments to the Child Support Enforcement Agency (CSEA) as ordered above until the income withholding is effected, or at any time said income withholding ends and the support obligation continues. All payments made by Payor Parent not made by way of income withholding shall be made by money order, cashier's check, or certified check payable to the "Child Support Enforcement Agency" and mailed to the address listed above.

9. **COLLECTION OF SUPPORT, ARREARS, OR DEBTS:** In addition to any payment plan to liquidate the amounts owed as ordered in the above-entitled action or related administrative proceeding, CSEA is authorized to collect support and/or the full amount of any support arrears or support debt through State and Federal tax refund interception, seizure of property, withholding of income, unemployment insurance benefits, worker's compensation, and retirement benefits, or any other lawful means of collection. CSEA's collection efforts will continue until the support, arrears, or debt is paid in full, and information relating to the support, arrears, or debt may be disclosed to consumer credit reporting agencies.

10. **NOTIFICATION TO CSEA:** Parties shall notify CSEA in writing at the above address of any change in employment and/or residence address **within 10 days** of such change.

**11. MEDICAL INSURANCE:**

- 11A.  Father  Mother shall provide medical health insurance coverage for the subject child(ren) and shall provide the other parent proof of coverage within 30 days of the date of this hearing, if not already provided.
- 11B.  Father  Mother does not have the present financial capacity of providing medical health insurance coverage for subject child(ren) and is hereby ordered to provide such coverage for said child(ren) when it becomes available through that parent's employer or union.
- 11C. The issue regarding medical insurance coverage shall be reserved.

**12. OTHER PROVISIONS:**

- 12A. For as long as there is a child support order and any of the children of the parties is a minor, Mother and Father shall keep each other informed of their current residence address and telephone number unless another court order provides otherwise.
- 12B. Mother and Father shall have equal access to the child(ren)'s school and medical reports. Mother and Father shall share the medical and school reports of the child(ren) on a regular basis.
- 12C. The child(ren) shall be provided with all available military dependent's benefits.
- 12D. Except as amended herein, all existing orders of this Court shall remain in full force and effect.

**13. TRIAL/HEARING:**

- Father  Mother shall appear before this Court on \_\_\_\_\_ at \_\_\_\_\_ for
- further hearing  pretrial conference  trial  at which time the parties shall submit at least the following document(s):
- Income and Expense and Asset and Debt Statements
  - Pay statements for the last three months worked
  - Tax returns filed since the year of the subject child(ren)'s birth
  - \_\_\_\_\_

**14. FURTHER ORDERS:**



14. **FURTHER ORDERS:** (continued)

DATED: Kapolei, Hawai'i, \_\_\_\_\_.

Print Judge's Name: \_\_\_\_\_  
JUDGE OF THE ABOVE-ENTITLED COURT

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Father's Signature

\_\_\_\_\_  
Mother's Address

\_\_\_\_\_  
Father's Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
XXX-XX-  
Mother's Social Security Number      Date of Birth

\_\_\_\_\_  
XXX-XX-  
Father's Social Security Number      Date of Birth

\_\_\_\_\_  
Mother's Employer's Name

\_\_\_\_\_  
Father's Employer's Name

\_\_\_\_\_  
Mother's Employer's Address

\_\_\_\_\_  
Father's Employer's Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Signature of Attorney for Mother

\_\_\_\_\_  
Signature of Attorney for Father

\_\_\_\_\_  
Signature of Attorney for CSEA

\_\_\_\_\_  
Signature of (Print Name: \_\_\_\_\_)



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as far in advance as possible to allow time to provide an accommodation: Call the ADA Coordinator of the First Circuit Family Court Office at 954-8200, fax 954-8308, or send an e-mail to [adarequest@courts.hawaii.gov](mailto:adarequest@courts.hawaii.gov). The ADA Coordinator will work to provide, but cannot guarantee your requested auxiliary aid, service, or accommodation.

*Please call the Family Court Service Center at 954-8290 if you have any questions about forms or procedures.*

STATE OF HAWAI'I FAMILY COURT FIRST CIRCUIT	CASE ID/NUMBER
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**Stipulated**

**Judgment of Paternity**

Child Support Enforcement Agency (CSEA),  
State of Hawai'i and

---

Mother     Father     Other  
Petitioner(s),

v.

---

Mother     Father     Other

---

Mother     Father     Other

Child Support Enforcement Agency (CSEA),  
State of Hawai'i,  
Respondent(s).

Court Use Only

This document is prepared by:

Self-Represented     Petitioner     Respondent  
 Attorney for     Petitioner     Respondent

---

Name (If attorney, include attorney license number)

---

Address

---

City, State, Zip Code

---

Phone Number

---

Hearing Date:

---

Presiding Judge:

The parties, without a hearing, stipulate to the following:

The case came on for hearing and the following parties were present:

Mother: \_\_\_\_\_  Mother's Attorney: \_\_\_\_\_

Father: \_\_\_\_\_  Father's Attorney: \_\_\_\_\_

CSEA's Attorney: \_\_\_\_\_  Other: \_\_\_\_\_

Although duly notified, \_\_\_\_\_ did not appear and the hearing proceeded by default.

Based upon the records and files, testimony, if any, and evidence adduced, the Court finds it has jurisdiction over this paternity proceeding and makes the following findings and orders:

**CHILDREN:** The following subject child(ren) are covered by this order:

	<u>Full Name</u>	Gender: Male (M)/ Female (F)/Other (O)	Date of Birth
1.	_____		
2.	_____		
3.	_____		
4.	_____		

**BASED UPON A PREPONDERANCE OF THE EVIDENCE, IT IS HEREBY ORDERED, ADJUDGED, AND DECREED AS FOLLOWS:**

1.  Father's  Mother's  CSEA's Motion filed on \_\_\_\_\_ is hereby  granted  denied  granted in part and denied in part as set forth in the terms of this Order.

**2. PATERNITY**

\_\_\_\_\_ IS THE FATHER OF THE ABOVE-NAMED MINOR CHILD(REN) BORN TO MOTHER AND THAT SAID CHILD(REN) IS/ARE STILL ALIVE AND HAS/HAVE NOT BEEN ADOPTED.

The presumption of paternity of \_\_\_\_\_ is rebutted by clear and convincing evidence based on the  results of genetic testing  Appearance and Waiver  testimony and he is dismissed from this action as a party defendant. Accordingly, his name shall be deleted from the caption of this case and, if applicable, from subject child(ren)'s Certificate of Live Birth naming him as the father of said child(ren), and from all reference hereinafter made to the Father.

Paternity for the subject child(ren) has/have been established by previously entered order or judgment of paternity.

**3. BIRTH CERTIFICATE**

3A. The Department of Health or similar agency in the jurisdiction of the child(ren)'s birth shall prepare a new Certificate of Live Birth for subject child(ren), inserting the following information:

Father's First Name: \_\_\_\_\_

Father's Middle Name: \_\_\_\_\_

Father's Last Name: \_\_\_\_\_

Ethnicity: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

[ ] 3B. The subject child(ren)'s name(s) shall be changed to: (Numbers below should correspond to the number given to the child(ren) at the top of page 2.)

- (1) First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_
- (2) First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_
- (3) First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_
- (4) First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_

**4. CUSTODY AND VISITATION**

**Custody and visitation orders issued in Domestic Abuse Protective Orders (HRS Ch. 586) or Child Protective Act (HRS Ch. 587A) proceedings filed after this Judgment/Order shall supersede custody rights established in this Order.**

**4A. CUSTODY**

[ ] (1) LEGAL CUSTODY: The legal custody of the subject child(ren) is/are awarded to:

- |   |  |
|---|--|
| <input type="checkbox"/> Mother                     | <input type="checkbox"/> Caretaker: _____                        |
| <input type="checkbox"/> Father                     | <input type="checkbox"/> This is a temporary order.              |
| <input type="checkbox"/> Mother and Father, Jointly | <input type="checkbox"/> The issue of legal custody is reserved. |

[ ] (2) PHYSICAL CUSTODY: The physical custody of the subject child(ren) is/are awarded to:

- |  |   |
|--|---|
| <input type="checkbox"/> Mother  | <input type="checkbox"/> Caretaker: _____                           |
| <input type="checkbox"/> Father  | <input type="checkbox"/> This is a temporary order.                 |
| <input type="checkbox"/> Mother and Father, Jointly  | <input type="checkbox"/> The issue of physical custody is reserved. |
| <input type="checkbox"/> For joint physical custody, the time sharing arrangement shall be as follows: |   |

5. **VISITATION:** Whenever possible, the parent who has the child(ren) will take the child(ren) to his/her/their weekend activities that are important to the child(ren), such as sports, birthday parties, etc.

[ ] 5A. VISITATION SCHEDULE:  FATHER  MOTHER shall be entitled to visitation, which will begin on (date) \_\_\_\_\_ as follows:

[ ] (1) Reasonable visitation as agreed to by the parties.

[ ] (2) Every other weekend from \_\_\_\_\_ at \_\_\_\_\_ to \_\_\_\_\_ at \_\_\_\_\_.  
(day of week) (time) (day of week) (time)

Midweek dinner visits on \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_.  
(day(s) of the week) (time) (time)

Midweek overnight visits on \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_  
(day of week) (time) (time)  
\_\_\_\_\_ at \_\_\_\_\_.  
(day of week) (time)

[ ] (3) Other visitation as set forth on page 4A (Detailed Visitation Schedule).

[ ] (4) Visitation shall be as follows:

[ ] (5) Out-of-State visitation shall be as follows:

## DETAILED VISITATION SCHEDULE

### 1. VACATIONS/INTERSESSIONS:

#### a. Summer Vacation:

- Shall be split as agreed to by the parties
- One-half of summer vacation with alternate weekends to the other parent. The child(ren) will be returned to the custodial parent at least one week prior to the start of school.
- 

#### b. Christmas and New Year's vacation:

- Shall be split as agreed to by the parties.
- Christmas vacation shall be divided equally.  Mother  Father shall have visitation with the child(ren) for one-half of the Christmas vacation.
- In odd-numbered years,  Mother's  Father's visitation shall occur in the first half of the Christmas vacation, including Christmas eve and Christmas day.
- In even-numbered years,  Mother's  Father's visitation shall occur in the second half of the Christmas vacation, including New Year's eve and New Year's Day.
- 

#### c. Spring Break:

- Shall be split as agreed to by the parties.
- Each parent shall have one-half of Spring vacation. The parent who has the child(ren) on the weekend following the last day of school shall have the extra day, if any.
- Mother shall have the child(ren) in  odd-numbered years  even-numbered years. Father shall have the child(ren) in the other years.

#### d. School Intersessions (for Year-Round School)

- Each intersession shall be split as agreed to by the parties.
- Intersessions shall be alternated between the parties.
- 

### 2. HOLIDAYS/SPECIAL DAYS

- Monday and Friday holidays shall be spent with the parent who has the child(ren) for the weekend attached to the holiday.
- Father's Day and Father's birthday shall be spent with Father
- Mother's Day and Mother's birthday shall be spent with Mother.
- Mother shall have the child(ren) on Easter, Thanksgiving, and Halloween in  odd-numbered years  even-numbered years. Father shall have the child(ren) for these holidays in the other alternating years.
- Other holidays/special days (child's birthday, etc.) shall be as follows: \_\_\_\_\_

### 3. TELEPHONE/ELECTRONIC CONTACTS:

- Unlimited telephone contact at reasonable hours.
- Every \_\_\_\_\_ between the hours of \_\_\_\_\_ to \_\_\_\_\_ (Hawai'i time).
- 

### 4. MODIFICATIONS TO THE ABOVE SCHEDULE:

- Any additional visitation or changes to the above detailed visitation schedule may be made as agreed to between the parties with at least 24-hours notice.

[ ] **5B. SUPERVISED VISITATION**

[ ] (1)  FATHER  MOTHER shall have supervised visitation at the PACT Center subject to the availability of the Center. The telephone number for the Family Visitation Center of the PACT Center is (808) 847-0015. It is the visiting parent's responsibility to contact the PACT Center to arrange for visitation and to pay for the costs of the PACT Center's services. Both parents shall call the Center within one (1) week from the date of this Order to register for visitation.

[ ] (2)  FATHER  MOTHER shall have supervised visitation with \_\_\_\_\_  
\_\_\_\_\_ providing the supervision. Visitation shall be as follows:  
\_\_\_\_\_ at \_\_\_\_\_ to \_\_\_\_\_  
(Day(s) of the Week) (Time) (Time)  
\_\_\_\_\_ at \_\_\_\_\_ to \_\_\_\_\_  
(Day(s) of the Week) (Time) (Time)

[ ] (3) Other supervised visits shall be as follows:

[ ] **5C. OTHER VISITATION PROVISIONS:**

[ ] **5D.** The issue of visitation shall be reserved.

**6. CURRENT CHILD SUPPORT:**

**6A.** Child support is  established  modified  suspended  terminated as follows:

(1) CURRENT CHILD SUPPORT:  Father  Mother shall pay for child support the sum of \$\_\_\_\_\_ per child per month for a total of \$\_\_\_\_\_ per month, each and every month, commencing \_\_\_\_\_.

Payments for child support for each child until the child attains the age of eighteen (18) years graduates from high school or discontinues high school, whichever occurs last. Child support shall further continue uninterrupted (including during regular school vacation periods) until age 23 years so long as said child continues his or her education post-high school on a full-time basis at an accredited college or university or in a vocational or trade school or until the further order of the Court.

The parent making child support payments is referred to as the "Payor Parent."

(2) SUSPENSION/TERMINATION OF CHILD SUPPORT:  Father's  Mother's child support shall be  suspended  terminated effective \_\_\_\_\_.

**6B.** The issue regarding child support shall be reserved pending further determination by a competent tribunal or court.

**6C.** Current child support orders are temporary, pending resolution of the child support issue which may result in modification retroactive to the commencement date of this Order.

**6D.** OTHER CHILD SUPPORT PROVISIONS:

**7. PAST CHILD SUPPORT  This issue is reserved.**

**7A. OWED TO THE DEPARTMENT OF HUMAN SERVICES ("DHS"):**

(1) Judgment shall enter against Father for the sum of \$\_\_\_\_\_ for past child support owing to DHS for the period(s) from \_\_\_\_\_ through \_\_\_\_\_. Father shall pay \$\_\_\_\_\_ each and every month commencing \_\_\_\_\_ until the judgment is fully paid.

(2) Judgment shall enter against Mother for the sum of \$\_\_\_\_\_ for past child support owing to DHS for the period(s) from \_\_\_\_\_ through \_\_\_\_\_. Mother shall pay \$\_\_\_\_\_ each and every month commencing \_\_\_\_\_ until the judgment is fully paid.



[ ] **7B. OWED TO MOTHER/FATHER:**

[ ] (1) Judgment shall enter against Father for the sum of \$ \_\_\_\_\_ for past child support owing to Mother for the period from \_\_\_\_\_ through \_\_\_\_\_.  
Father shall pay \$ \_\_\_\_\_ each and every month commencing \_\_\_\_\_ until the judgment is fully paid.

[ ] (2) Judgment shall enter against Mother for the sum of \$ \_\_\_\_\_ for past child support owing to Father for the period from \_\_\_\_\_ through \_\_\_\_\_.  
Mother shall pay \$ \_\_\_\_\_ each and every month commencing \_\_\_\_\_ until the judgment is fully paid.

8. **METHOD OF PAYMENT:** All payments for child support in accordance with the laws of the State of Hawai'i. All payments ordered above shall be made payable to and mailed to:

**CHILD SUPPORT ENFORCEMENT AGENCY, Lock Box  
P.O. Box 1860  
Honolulu, Hawai'i 96805-1860**

**INCOME WITHHOLDING:** All payments for child support shall be payable by way of an Order/Notice to Withhold Income for Child Support served on Payor Parent's current as well as successor employers.

**PAYMENT:** Payor Parent shall make payments to the Child Support Enforcement Agency (CSEA) as ordered above until the income withholding is effected, or at any time said income withholding ends and the support obligation continues. All payments made by Payor Parent not made by way of income withholding shall be made by money order, cashier's check, or certified check payable to the "Child Support Enforcement Agency" and mailed to the address listed above.

9. **COLLECTION OF SUPPORT, ARREARS, OR DEBTS:** In addition to any payment plan to liquidate the amounts owed as ordered in the above-entitled action or related administrative proceeding, CSEA is authorized to collect support and/or the full amount of any support arrears or support debt through State and Federal tax refund interception, seizure of property, withholding of income, unemployment insurance benefits, worker's compensation, and retirement benefits, or any other lawful means of collection. CSEA's collection efforts will continue until the support, arrears, or debt is paid in full, and information relating to the support, arrears, or debt may be disclosed to consumer credit reporting agencies.
10. **NOTIFICATION TO CSEA:** Parties shall notify CSEA in writing at the above address of any change in employment and/or residence address **within 10 days** of such change.

**11. MEDICAL INSURANCE:**

- 11A.  Father  Mother shall provide medical health insurance coverage for the subject child(ren) and shall provide the other parent proof of coverage within 30 days of the date of this hearing, if not already provided.
- 11B.  Father  Mother does not have the present financial capacity of providing medical health insurance coverage for subject child(ren) and is hereby ordered to provide such coverage for said child(ren) when it becomes available through that parent's employer or union.
- 11C. The issue regarding medical insurance coverage shall be reserved.

**12. OTHER PROVISIONS:**

- 12A. For as long as there is a child support order and any of the children of the parties is a minor, Mother and Father shall keep each other informed of their current residence address and telephone number unless another court order provides otherwise.
- 12B. Mother and Father shall have equal access to the child(ren)'s school and medical reports. Mother and Father shall share the medical and school reports of the child(ren) on a regular basis.
- 12C. The child(ren) shall be provided with all available military dependent's benefits.
- 12D. Except as amended herein, all existing orders of this Court shall remain in full force and effect.

**13. TRIAL/HEARING:**

- Father  Mother shall appear before this Court on \_\_\_\_\_ at \_\_\_\_\_ for
- further hearing  pretrial conference  trial  at which time the parties shall submit at least the following document(s):
- Income and Expense and Asset and Debt Statements
  - Pay statements for the last three months worked
  - Tax returns filed since the year of the subject child(ren)'s birth
  - \_\_\_\_\_

**14. FURTHER ORDERS:**

14. **FURTHER ORDERS:** (continued)

DATED: Kapolei, Hawai‘i, \_\_\_\_\_.

Print Judge’s Name: \_\_\_\_\_  
JUDGE OF THE ABOVE-ENTITLED COURT

\_\_\_\_\_  
Mother’s Signature

\_\_\_\_\_  
Father’s Signature

\_\_\_\_\_  
Mother’s Address

\_\_\_\_\_  
Father’s Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
XXX-XX-  
Mother’s Social Security Number      Date of Birth

\_\_\_\_\_  
XXX-XX-  
Father’s Social Security Number      Date of Birth

\_\_\_\_\_  
Mother’s Employer’s Name

\_\_\_\_\_  
Father’s Employer’s Name

\_\_\_\_\_  
Mother’s Employer’s Address

\_\_\_\_\_  
Father’s Employer’s Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Signature of Attorney for Mother

\_\_\_\_\_  
Signature of Attorney for Father

\_\_\_\_\_  
Signature of Attorney for CSEA

\_\_\_\_\_  
Signature of (Print Name: \_\_\_\_\_)



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