

IN THE COURT OF COMMON PLEAS OF ALLEGHENY COUNTY, PENNSYLVANIA
FAMILY DIVISION

Petitioner

vs

Case Number FD: _____

PACSES Case ID _____

Respondent

**PETITION FOR MODIFICATION
OF SUPPORT**

Filed on Behalf of:

Name: _____

Address: _____

Phone: _____

NOTICE OF PRESENTATION AND CERTIFICATE OF SERVICE

TO:

PLEASE TAKE NOTICE that the within Petition shall be presented to Pro Se Motions Judge _____, Adult Section, Family Division, Court of Common Pleas, Allegheny County,

Family Law Facility, 440 Ross Street, Courtroom _____

Pittsburgh, PA on the _____ day of _____, 20__ at _____ .M.

I hereby certify that a true and correct copy of the within Petition and Notice of Presentation was served upon Respondent at the address below by depositing the same in the U.S. Mail, First Class, postage prepaid and the Title IV -D Legal Services Unit of the Allegheny County Law Department, 300 Ft. Pitt Commons Building, 445 Ft. Pitt Boulevard, Pittsburgh, PA 15219 by Interoffice mail on the _____ day of _____, 2008 to the address listed below.

I verify that the address provided by me and set forth below is the last known address of the Respondent herein.

**Title IV-D Legal Services Unit
Allegheny County Law Department
445 Ft. Pitt Boulevard
Pittsburgh, PA 15219**

Petitioner

YOU HAVE THE RIGHT TO A LAWYER, WHO MAY ATTEND THE CONFERENCE AND REPRESENT YOU. IF YOU DO NOT HAVE A LAWYER, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW. THIS OFFICE CAN PROVIDE YOU WITH INFORMATION ABOUT HIRING A LAWYER. IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED FEE OR NO FEE.

**LAWYER REFERRAL SERVICE
11TH FLOOR KOPPERS BUILDING
436 SEVENTH AVENUE
PITTSBURGH, PA 15219
(412) 261-5555**

AMERICANS WITH DISABILITIES ACT OF 1990

The Allegheny County Court of Common Pleas Family Division is required, by law, to comply with the Americans with Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business before the court, please contact our office. All arrangements must be made at least 72 hours prior to any hearing or business before the Family Division. You must attend the scheduled hearing.

IN THE COURT OF COMMON PLEAS OF ALLEGHENY COUNTY, PENNSYLVANIA
FAMILY DIVISION

Petitioner

vs

Docket Number: _____

PACSES Case ID: _____

Respondent

PETITION FOR MODIFICATION OF AN EXISTING SUPPORT ORDER

1. The petition of _____ respectfully represents that on the day of _____, 20__ an Order of Court was entered for the support of _____. A true and correct copy of the order is attached to this petition.

2. Petitioner is entitled to _____ of this Order because of the following material and substantial changes(s) in circumstance:

WHEREFORE, Petitioner requests that the Court modify the existing order for support.

(Attorney for Petitioner)

I verify that the statements made in this complaint are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities.

Date

Petitioner

INFORMATION FOR MODIFICATION PETITION

FD # _____

PACSES # _____

SUPPORT PAYEE/PLAINTIFF INFORMATION

Name _____

Address: _____

Telephone No.: _____ Date of Birth: _____

Employer Name: _____

Employer Address: _____

SUPPORT PAYOR/DEFENDANT INFORMATION

Name _____

Address: _____

Telephone No.: _____ Date of Birth _____

Employer Name: _____

Employer Address: _____

IN THE COURT OF COMMON PLEAS OF ALLEGHENY COUNTY, PENNSYLVANIA
FAMILY DIVISION

Petitioner

vs

Docket Number: _____

Case Number FD _____

Respondent

ORDER OF COURT

You, _____, Respondent, have been sued in Court to modify an existing support order. You are ordered to appear in person in Room 4020, Family Court Facility, 440 Ross Street, Pittsburgh, PA 15219, Family Court Facility, 440 Ross Street, Pittsburgh, PA 15219 on _____ at _____
____m. for a conference/hearing and to remain until dismissed by the Court. If you fail to appear as provided in this Order, an Order for Modification may be entered against you.

You are further ordered to bring to the conference:

1. A true copy of you most recent Federal Income Tax Return, including W-2s as filed;
2. Your pay stubs for the preceding six months;
3. Verification of child care expenses; and
4. Proof of medical coverage that you may have, or may have available to you.

**THE HEARING OFFICER MAY MODIFY OR TERMINATE THE EXISTING ORDER
IN ANY APPROPRIATE MANNER BASED UPON THE EVIDENCE PRESENTED.**

Date of Order

Judge