

vs.

Plaintiff

Defendant

) Order Number:
) PACSES Case Number:
) Docket Number:
) Other State ID Number:

ORDER OF COURT - UNALLOCATED

Final Interim Modified

AND NOW, , based upon the Court's determination that the Payee's monthly net income is \$ and the Payor's monthly net income is \$, it is hereby ordered that the Payor pay to the Pennsylvania State Collection and Disbursement Unit Dollars (\$) a month payable as follows: first payment due . The effective date of the order is .

Arrears set at \$ as of are due in full IMMEDIATELY. All terms of this Order are subject to collection and/or enforcement by contempt proceedings, credit bureau reporting, tax refund offset certification, passport denial certification, driver's/professional/recreational license revocation, interception of lottery winnings, and the freeze and seize of financial assets. These enforcement/collection mechanisms will not be initiated as long as obligor does not owe overdue support. Failure to make each payment on time and in full will cause all arrears to become subject to immediate collection by all the means listed above.

For the Support of:

Name

Birth Date



The defendant owes a total of \$ _____ per month payable _____ ; \$ _____ for current support and \$ _____ for arrears. The defendant must also pay fees/costs as indicated below.

Said money to be turned over by the Pa SCDU for distribution and disbursement in accordance with Rule 1910.17(d).

Payments must be made by check or money order. All checks and money orders must be made payable to Pa SCDU and mailed to:

Pa SCDU
P.O. Box 69110
Harrisburg, Pa 17106-9110

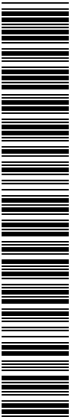
Payments must include the defendant's PACSES Member Number or Social Security Number in order to be processed. Do not send cash by mail.

The monthly support obligation includes cash medical support in the amount of \$250 annually for unreimbursed medical expenses incurred for each child and/or spouse as ordered herein. Unreimbursed medical expenses of the obligee or children that exceed \$250 annually shall be allocated between the parties. The party seeking allocation of unreimbursed medical expenses must provide documentation of expenses to the other party no later than March 31st of the year following the calendar year in which the final medical bill to be allocated was received. The unreimbursed medical expenses are to be paid as follows: _____ % by defendant and _____ % by plaintiff.

Within thirty (30) days after the entry of this order, the Plaintiff Defendant shall submit to the other party and to the Domestic Relations Section written proof that medical insurance coverage has been obtained or that application for coverage has been made. Proof of coverage shall consist, at a minimum, of : 1) the name of the health care coverage provider(s); 2) any applicable identification numbers; 3) any cards evidencing coverage; 4) the address to which claims should be made; 5) a description of any restrictions on usage, such as prior approval for hospital admissions, and the manner of obtaining approval; 6) a copy of the benefit booklet or coverage contract; 7) a description of all deductibles and co-payments; and 8) five copies of any claim forms.



Other Conditions:



Defendant shall pay the following fees:

| <u>Fee Total</u> | | <u>Fee Description</u> | <u>Payment Frequency</u> | |
|------------------|-----|------------------------|--------------------------|-----|
| \$ | for | | Payable at \$ | per |
| \$ | for | | Payable at \$ | per |
| \$ | for | | Payable at \$ | per |
| \$ | for | | Payable at \$ | per |
| \$ | for | | Payable at \$ | per |



IMPORTANT LEGAL NOTICE

PARTIES MUST WITHIN SEVEN DAYS INFORM THE DOMESTIC RELATIONS SECTION AND THE OTHER PARTIES, IN WRITING, OF ANY MATERIAL CHANGE IN CIRCUMSTANCES RELEVANT TO THE LEVEL OF SUPPORT OR THE ADMINISTRATION OF THE SUPPORT ORDER, INCLUDING, BUT NOT LIMITED TO, LOSS OR CHANGE OF INCOME OR EMPLOYMENT AND CHANGE OF PERSONAL ADDRESS OR CHANGE OF ADDRESS OF ANY CHILD RECEIVING SUPPORT. A PARTY WHO WILLFULLY FAILS TO REPORT A MATERIAL CHANGE IN CIRCUMSTANCES MAY BE ADJUDGED IN CONTEMPT OF COURT, AND MAY BE FINED OR IMPRISONED.

PENNSYLVANIA LAW PROVIDES THAT ALL SUPPORT ORDERS SHALL BE REVIEWED AT LEAST ONCE EVERY THREE (3) YEARS IF SUCH REVIEW IS REQUESTED BY ONE OF THE PARTIES. IF YOU WISH TO REQUEST A REVIEW AND ADJUSTMENT OF YOUR ORDER, YOU MUST DO THE FOLLOWING: CALL YOUR ATTORNEY. AN UNREPRESENTED PERSON WHO WANTS TO MODIFY (ADJUST) A SUPPORT ORDER SHOULD CONTACT THE DOMESTIC RELATIONS SECTION.

ALL CHARGING ORDERS FOR SPOUSAL SUPPORT AND ALIMONY PENDENTE LITE, INCLUDING UNALLOCATED ORDERS FOR CHILD AND SPOUSAL SUPPORT OR CHILD SUPPORT AND ALIMONY PENDENTE LITE, SHALL TERMINATE UPON DEATH OF THE PAYEE.

A MANDATORY INCOME ATTACHMENT WILL ISSUE UNLESS THE DEFENDANT IS NOT IN ARREARS IN PAYMENT IN AN AMOUNT EQUAL TO OR GREATER THAN ONE MONTH'S SUPPORT OBLIGATION AND (1) THE COURT FINDS THAT THERE IS GOOD CAUSE NOT TO REQUIRE IMMEDIATE INCOME WITHHOLDING; OR (2) A WRITTEN AGREEMENT IS REACHED BETWEEN THE PARTIES WHICH PROVIDES FOR AN ALTERNATE ARRANGEMENT.

UNPAID ARREARAGE BALANCES MAY BE REPORTED TO CREDIT AGENCIES. ON AND AFTER THE DATE IT IS DUE, EACH UNPAID SUPPORT PAYMENT SHALL CONSTITUTE, BY OPERATION OF LAW, A JUDGMENT AGAINST YOU, AS WELL AS A LIEN AGAINST REAL PROPERTY .

IT IS FURTHER ORDERED that, upon payor's failure to comply with this order, payor may be arrested and brought before the Court for a Contempt hearing; payor's wages, salary, commissions, and/or income may be attached in accordance with law; this Order will be increased without further hearing by _____ % a month until all arrearages are paid in full. Payor is responsible for court costs and fees.

Copies delivered to parties _____
Date

Consented:

Plaintiff

Plaintiff's Attorney

Defendant

Defendant's Attorney

BY THE COURT:

Date

Judge

