



**Child Support Questionnaire**

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Are you currently paying child support? (circle one) Yes / No

What court issued the judgment?

\_\_\_\_\_

How much in arrears? \_\_\_\_\_

How much do you earn pre-tax? \_\_\_\_\_ per month

What are you currently paying in support? \_\_\_\_\_ per month

Is paternity in question? (circle one) Yes / No

How old is the child? \_\_\_\_\_ years old

Has your income been reduced since the child support order was issued? (circle one)  
Yes / No

If yes, describe the circumstances for reduction:

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

If no, reason for modification/reduction request:

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

For office use: Case No. \_\_\_\_\_