

DATE _____

Dear PBPB Child Support Services,

RE: Request for Review of Child Support

Case Number:

REVIEW AND MODIFICATION REQUEST

I, _____, understand that I am entitled to a review of my child support case every thirty-three (33) months, or when there has been a substantial change in circumstances. I understand that a review may result in a possible modification to my child support order and an adjustment to the amount of child support I receive.

I wish to have my child support order reviewed, based on the information below.

Custodial Parent Information:

Name: <<CP Name>>

Address:

Phone Number:

Name of Employer:

Employer Address & Phone Number:

Child(ren) Name(s):

Date of Last Child Support Order:

Non-Custodial Parent Information:

Name: <<NCP Name>>

Address:

Phone Number:

Name of Employer:

Employer Address & Phone Number:

Date(s) of Birth:

Describe the change in circumstances which you believe qualifies the case for a review:

Signature:

Date:

Print Name

(NOTARY USE ONLY)	
STATE OF: _____	
COUNTY OF: _____	
I verify that the above named person signed this affidavit before me on this day of _____, 20_____.	
Notary public: _____	My commission expires: _____