

# INSTRUCTIONS

## FAMILY COURT MATTER

### DEFAULT ORDER TO ESTABLISH CUSTODY, PARENTING TIME, & CHILD SUPPORT

(No answer from other parent)

Forms you will need for this process:

- *Affidavit of Default*
- *Affidavit of Non-Military Status*
- *Default Scheduling Request*
- *Findings of Fact, Conclusions of Law, & Order to Establish Custody & Parenting Time*
- *Notice of Intent to Proceed by Default*
- *Affidavit of Service by Mail (SOP104)*

#### What You Need to Do

1. Complete the court forms, following all of the steps in these instructions.
2. Obtain hearing date.
3. File the forms with the court (electronically or at the courthouse).

#### Important Notices and Resources

Print neatly using dark ink. If the court cannot read your handwriting, your requests will be denied and you will need to start all over.

If you need more space to answer a question, use an additional full sheet of paper.

The court expects every person who appears in court without a lawyer to know the law. If you act as your own lawyer, you must do what a lawyer would do.

The court has forms and instructions, for some types of cases, as a general guide to the court process. These instructions explain the steps in more detail and answer common questions, but are not a full guide to the law. Court staff may be able to give general information on court rules and procedures, but they cannot give legal advice or help you fill out the forms.

Got a question about court forms or instructions?

- Call the 10<sup>th</sup> Judicial District Self Help Center at (763) 760-6699
- Email [10CourtHelp@courts.state.mn.us](mailto:10CourtHelp@courts.state.mn.us)

Not sure what to do about a legal issue or need advice?

- Talk with a lawyer
- Visit [www.MNCourts.gov/Find-a-Lawyer.aspx](http://www.MNCourts.gov/Find-a-Lawyer.aspx)

## General Information About Proceeding by Default in Custody Matter

**The information contained in this document is a general guide. It explains the legal process of asking for a default order in a custody matter. This is not legal advice. If you do not understand any of these procedures, talk to a lawyer. Court staff, including Self-Help staff, CANNOT give legal advice.**

These forms are meant to be used when the other parent **does not respond** with an *Answer and Counterpetition* or any other writing.

Generally, the other parent has twenty-one (21) days to serve you with an *Answer and Counterpetition*. If the other parent does not respond, then you can ask the court for a default order.

If you make reasonable efforts and are unable to locate the other parent for service, you can ask the judge to approve service by alternate means. If the judge approves an *Order for Service by Alternate Means*, you must wait at least forty-two (42) days for the other parent to respond before asking for a default order.

### Who May Use these Forms?

Petitioner may ask the court for a Custody & Parenting Time Order by default only if all of these statements are true:

1. Parties are unmarried parents;
2. Respondent has not filed an *Answer and Counterpetition to Establish Custody and Parenting Time*;
3. There is no other person who is an alleged or presumed father; and
4. Parties have signed and filed a Recognition of Parentage (ROP) for each child with the Minnesota Department of Health, and Petitioner will file a certified copy of each ROP (or a *copy* of the certified copy).

### What issues are addressed in the default order?

- Legal Custody
- Physical Custody
- Parenting Time
- Child Support

**Step 1**  
**Fill Out Affidavit of Default**

The Caption:

The top part of the first page is where you will find the case caption. It looks like this:

<p><b>State of Minnesota</b></p> <p>County of: _____</p>	<p style="text-align: right;"><b>District Court</b></p> <p>Judicial District: _____</p> <p>Court File Number: _____</p> <p>Case Type: _____ Custody</p>
<p><b>In Re the Custody of:</b></p> <p>_____</p> <p>Child(ren)'s names (first, middle, last)</p> <p>_____</p> <p>Petitioner (first, middle, last) _____</p> <p style="text-align: right;"><b>Affidavit of Default</b></p> <p>and</p> <p>_____</p> <p>Respondent (first, middle, last)</p> <p>_____ says that:</p>	
<p>1. I am the Petitioner in this action.</p> <p>2. Respondent was served with the <i>Summons</i> and <i>Petition</i> in the following way: (Check all that apply)</p>	

You will find the information you need to fill out the caption on a court document from your existing custody case. If you do not have any documents from your court file, and if you do not know the information, you will need to look in your court file.

- You can view some case records online at [www.mncourts.gov/publicaccess](http://www.mncourts.gov/publicaccess).
- If you cannot view your case online, you may need to go to the courthouse in the county where your case is located to view your court file.

At the top of the page, write in the following information:

- The **county** where the case is located;
- The “**Tenth**” Judicial District; and
- Your **court file number**, if you have one (this usually starts with a two-digit number, followed by letters and numbers. For example, 89-FA-18-231).

The Affidavit:

On the first blank line, write in your name.

Check all the boxes that apply to explain how Respondent was served. List the date(s) of service.

- If Respondent was personally served, do not sign the *Affidavit of Default* until at least twenty-one (21) days have passed since the date of service.
- If Respondent signed a *Waiver of Service of Summons*, do not sign the *Affidavit of Default* until at least sixty (60) days have passed since the date of service.
- If the judge signed an *Order for Service by Alternate Means*, do not sign the *Affidavit of Default* until at least forty-two (42) days have passed since the first date of publication or mailing.

Sign and date. Fill in the County and State where you signed, your address, telephone number, and email address.

NOTE: If the Respondent served you an *Answer*, you cannot sign this form. Get legal advice from an attorney.

**Step 2**  
**Fill Out Affidavit of Non-Military Status**

Fill out the Case Caption as you did in Step 1.

On the first blank line, write in your name.

Sign and date. Fill in the County and State where you signed, your address, telephone number, and email address.

NOTE: If the Respondent is an active member of the armed forces, you cannot sign this form. Get legal advice from an attorney.

<b>State of Minnesota</b>	<b>District Court</b>
County of: _____	Judicial District: _____
	Court File Number: _____
	Case Type: Custody
<b>In Re the Custody of:</b> _____	
Child(ren)'s names _____	<b>Affidavit of Non-Military Status</b>
Petitioner (first, middle, last) and _____	
Respondent (first, middle, last) _____	
_____ says that	
I am the Petitioner in this action.	

**Step 3**  
**Fill Out Default Scheduling Request**

<b>In Re the Custody of:</b> _____	
Child(ren)'s names _____	
Petitioner (first, middle, last) and _____	<b>Default Scheduling Request</b>
Respondent (first, middle, last) _____	
The above entitled matter is submitted for default. A default hearing is required or requested as the matter includes minor child(ren).	

Fill out the Case Caption as you did before.

A hearing with the judge is required because this matter involves children. This form is your request for a default hearing.

Sign and date. Fill in the County and State where you signed, your address, telephone number, and email address.

**Step 4**  
**Fill Out *Findings of Fact, Conclusions of Law & Order to Establish Custody & Parenting Time***

The *Findings of Fact, Conclusions of Law & Order to Establish Custody & Parenting Time* is the Order you are asking the Judge to sign. Copy the information from your *Petition* into the *Findings* form. The *Petition* and *Findings* must be consistent. If information in the *Petition* is no longer accurate, such as a new address, put the new and accurate information in the *Findings*, with a note explaining the difference.

The form is divided into two parts. The first part gives the court information about you, the other parent, your children, and your finances. The second part is the court's conclusions of law and court order about custody, parenting time, and child support. You must fill out both parts. NOTE: the instructions are numbered the same as the *Findings of Fact, Conclusions of Law & Order to Establish Custody & Parenting Time*.

Fill out the Case Caption as you did before.

Paragraphs A- F

- A. Leave the first line blank since you do not have a court date yet. The court will fill it in. Fill in the courthouse's address and city.
- B. You do not check the boxes. The judge will check the boxes after the hearing.
- C. You do not check the boxes. The judge will check the boxes after the hearing.
- D. Check the appropriate box telling the court how the Respondent (other parent) was served the *Summons* and *Petition* and include the date Respondent was served. Respondent may have been personally served, Respondent signed a waiver of service, or Respondent was served by alternate means as ordered by the court.
- E. Check the box for whether Petitioner (you) was served with an *Answer*. If you were served an *Answer*, list the date you were served. **NOTE:** This process is used when the other parent has NOT filed or served you an *Answer*. If the other parent answered, get legal advice from an attorney before using these forms.
- F. Nothing needs to be done in this section.

Paragraphs #1- #23

You will be giving the court information about the parents, children, and other court cases.

- 1. Fill in the information about you (Petitioner). Add your full name, address(es), date of birth, and prior or other names (for example, a maiden name), if any.
- 2. Fill in information about the Respondent. Add the other parent's full name, address (if known), date of birth and former names (if any).
- 3. This section is about the residency requirement. Generally, Minnesota law requires that at least one of the parents has resided in Minnesota for at least six (6) months before starting a custody case. Check the box whether Petitioner and/or Respondent have been living in Minnesota for the past six (6) months.

4. This paragraph is about military status and the residency requirement. A parent may also meet the residency requirement if they are in the armed forces and stationed in Minnesota for at least six (6) months. Check the box whether Petitioner and/or Respondent is an active member of the armed forces. If yes, check the box whether the parent has been stationed in Minnesota for the past six (6) months.  
**NOTE:** There are certain protections in place for active service members. Get legal advice from an attorney if either parent is an active member of the armed forces.
5. Fill in information about the parties' joint children. For each child, provide the full name, date of birth, age, and who the child currently lives with.  
If any of the children live with someone other than a parent, provide the children's address. Check the box whether the children have lived in Minnesota for the past six (6) months. If you checked "NO", list the dates and locations of where the children have lived the last six (6) months.
6. You must provide information about the Minnesota Recognition of Parentage (ROP). Check the box whether the parents signed the ROP and whether it is filed with the Minnesota Department of Health.  
You must include a certified copy of the ROP for each child. If you checked "NO", you cannot use these forms to establish custody.  
If the ROP is from another state (not Minnesota), STOP. This process is designed for situations where the child was born in Minnesota, and the parents signed and filed a Minnesota ROP. Get legal advice from attorney before using these forms.
7. This section is about whether there is any other person who could be the children's alleged or presumed father. If the mother of the children was married when the children were born, the husband is the presumed father under Minnesota law. If there is a claim that another man is the biological father of the children, that man is considered an alleged father. Check the box whether the mother was married to another man when Petitioner and Respondent signed the ROP. If you checked "YES", check whether the husband signed the Spouse's Non-Parentage Statement for the children. If you checked "YES", you must file a certified copy of the Spouse's Non-Parentage Statement. If you checked "NO", you cannot use these forms to establish custody. Check the box whether any other man would meet the definition of an alleged or presumed father. If you checked "YES", you cannot use these forms to establish custody.
8. This paragraph asks you to let the court know whether there is an active order preventing or limiting contact between the parents and/or children. If you checked "YES", fill in the county where the order was filed, date of the order, and the court file number. Check the box whether it includes an order to pay child support. You must also file a copy of that order in this case.
9. This paragraph asks you to let the court know whether there is an open child protection case involving the joint children. If you checked "YES", fill in the county and state where the case is, the court file number, and the name of the children involved in the child protection case.
10. This paragraph asks you to let the court know whether any of the joint children have been appointed a guardian or third party custodian by a court order. If you checked "YES", fill in the court file number, the state where the case is located, and the name of the guardian or custodian. **NOTE:** You must give the guardian or custodian written notice of the proceeding.

11. You must provide information about any other court proceedings involving the joint children. If you checked “YES”, fill in the type of case it is (for example, “child support”), the county and state the case was started in, and the court file number. You must either submit a copy of the child support order from another proceeding or indicate whether the case is dismissed or pending.
12. This section asks who should be given custody of the children. **Legal custody** identifies which parent(s) have the right to make decisions about the upbringing of the children, including education, healthcare, and religious training. **Sole legal custody** means that only one parent has a right to make major decisions regarding the upbringing of the children. **Joint legal custody** means both parents share in the decision-making. **Physical custody** identifies which parent will handle the routine daily care and control of the children. Generally, the child lives with the parent who has physical custody. **Sole physical custody** means the child lives with only one parent and the other parent is given parenting time unless the court “reserves” parenting time. **Joint physical custody** means the children live with both parents based upon a schedule that best meets the needs of the children and parents, and that the parents have joint responsibility and control in the daily care of the children.
13. Parenting time is the time a parent spends with a joint child, regardless who has custody of the child. You must say if you want parenting time to be unsupervised, supervised, or reserved. If you think your children would not be safe alone with the other parent, then you can ask the court to make parenting time **supervised**. You must explain at 14 (A) and (B) why supervision is needed, and who will do the supervising and pay any costs. The court may order parenting time to take place at a visitation center, or the court may order a family member to supervise the parenting time. If you check **unsupervised** the parent can visit the children without anyone else watching. If you check **reserved**, you are asking that the court give that parent NO parenting time. If you check reserved answer part (C) describing why reserved parenting time is best for the children. If parenting time is reserved either parent can ask the court to make a new order about parenting time in the future, by filing a motion with the court.
14. This section asks about the children’s best interests. The judge must decide your request for parenting time and custody based on the children’s best interests. You must explain how your requests for custody and parenting time is in the best interests of the children. Your explanation should include any relevant factors, including the best interest factors listed in Minn. Stat. § 518.17, subd. 1.
15. This section asks about child support. **Child support** includes costs for the children for basic support for daily living expenses, health care coverage, uninsured and unreimbursed health care expenses, and child care expenses. You have three (3) options:
  - You can have the court not address child support because a child support order exists in a different case;
  - You can have the court establish or modify child support; or
  - You can have the court reserve child support. **Reserving child support** means you are asking the court to put off making a decision about child support payments right now. If you reserve child support, you must explain in detail why reserving child is in the best interests of the children.
16. This section asks about public assistance paid by the State of Minnesota. **Public assistance** means MFIP, Tribal TANF, General Assistance, MinnesotaCare, Medical Assistance, or Child Care Assistance. Answer whether you, the other parent, or your children receive

public assistance from the State of Minnesota. If “YES”, write in the name of the county paying assistance. Tell the court the type of assistance received and write in how much money is received per month.

17. This section is about Supplemental Security Income. **Supplemental Security Income** is an income supplement program based on need. To get it, you must be low income and over 65, blind, or disabled. SSI is different from Social Security retirement, Social Security Disability Insurance (SSDI), or other benefits based on qualifying years of work. Answer whether you, your spouse, or your joint children receive Supplemental Security Income (SSI) from the federal government. If “YES”, write in the amount that is received per month.
18. This section is about your financial information. Fill out this section completely. Use your gross income. **Gross income** means income before taxes or deductions. Write in “0” if you do not have any income. You must also let the court know if the children receive social security or veteran’s benefits, if you are court-ordered to pay spousal maintenance (alimony), and if you are court ordered to pay child support for any non-joint children.
19. This section is about the other parent’s financial information. You have three (3) options:
  - Check the first box if you have detailed information about the other parent’s income and provide the information requested.
  - Check the second box if you do not have detailed information about the other parent’s income, but have some information about the other parent’s income. Fill in the amount of the other parent’s income.
  - Check the third box if you have any other credible evidence about the other parent’s income or potential income. This might include evidence of past earnings, education, and other facts.
20. Answer whether you and the other parent have a joint child with special needs and extraordinary medical expenses. If “YES”, name the child with special needs and describe the special needs of the child. You must also tell the court what the living expenses are for the family.
21. This section is about health care coverage. You must tell the court who receives MinnesotaCare or Medical Assistance. MinnesotaCare and Medical Assistance are government funded health care programs that are no-cost or low-cost for low income people. These programs are different than purchasing health care coverage through MNsure. The court needs to know what coverage you, the other parent, and your joint children have now and what it costs. If the joint children do not have health coverage, the court needs to know if you or the other parent can purchase health coverage through your work.
22. This section is about child care costs. Answer whether there are child care costs for the joint children. If “YES”, tell the court how many joint children need child care, the cost of child care, and who pays the child care cost.
23. List any other facts you think the court should know.

This part is where the court makes conclusions of law and issues an order. You must fill it out. It should be consistent with your *Petition* and what you filled out earlier in the form.

1. For legal custody, list the name of each joint child who is under age 18 or is 18 or 19 and still in high school. For each child, check the box to show what you want the court to grant for legal custody.

2. For physical custody, list the name of each joint child who is under age 18 or is 18 or 19 and still in high school. For each child, check the box to show what the court grants for physical custody.
3. Write down what you want the court to order for parenting time. Check the boxes to show if parenting time should be unsupervised, supervised, or reserved. This should match what you said on #14 of the Findings section.

Describe the parenting time schedule you want ordered. It should be clear from your schedule which parent is taking care of each child at all times (24 hours a day/7 days a week). Include the time of day that the child will be exchanged. For example, a weekday schedule might be “the children are with Mother every Monday through Friday, except that Father has parenting time every Wednesday from 4pm to 8am Thursday.” What is appropriate for parenting time can depend on the age of the child.

The Minnesota Judicial Branch’s Child Focused Parenting Time Guide may help you create a parenting time schedule: <http://www.mncourts.gov/mncourtsgov/media/CourtForms/Child-Focused-Parenting-Time-Guide.pdf>

Based on the schedule you just wrote, you must list the number of overnights per year the children are with Petitioner and the number of overnights per year the children are with Respondent. You may find it helpful to review the [Calculating the Number of Overnights](#) handout (available online) at

[http://www.mncourts.gov/mncourtsgov/media/scao\\_library/SelfHelpCenters/documents/Handout-Calculating-the-Number-of-Overnights-\(002\).pdf](http://www.mncourts.gov/mncourtsgov/media/scao_library/SelfHelpCenters/documents/Handout-Calculating-the-Number-of-Overnights-(002).pdf)

4. Answer what the court should order for child support. Check the first box if you want child support to continue as ordered in another court file, write in the court file number and you can skip to page 22, #5.

Check the second box, if you want child support to be established or modified.

- You must complete and attach a Child Support Guidelines Worksheet. You can find the child support calculator at [www.mncourts.gov](http://www.mncourts.gov) under Help Topics-Child Support or at <http://childsupportcalculator.dhs.state.mn.us/>. This calculator will produce a dollar amount for support based on Minnesota law.
- Check the box whether you are asking for a monthly basic child support obligation or to reserve basic child support.
- If you want the court to order a monthly basic child support obligation, write in the amount and when payments should be made. You must check whether the amount of basic support is based on the child support guidelines worksheet. If you think the amount of support should be higher or lower than what the calculator figured out, mark the box that says the amount is a "deviation" in child support. You must explain how the deviation is in the best interest of the children. You may need to research the law or get help from a lawyer if you wish to request a deviation.
- You must also check whether the monthly basic child support obligation will be subject to automatic income withholding or paid directly between the parents. Minnesota law requires an employer or other source of funds to withhold child support from the employee’s paycheck when a party is receiving or has applied for public assistance or child support enforcement services. If you, the other parent, and child(ren) do not receive government assistance, income withholding through the public authority is not required. You may have the court order direct payments of

child support. NOTE: If you did not elect automatic income withholding and you later decide you want it, contact your local county child support office to find out how to start income withholding services.

- Answer what the court should order for medical and dental insurance for the joint children, indicating if insurance is through the parent's employer or union, private insurance, Medical Assistance/MinnesotaCare, or if insurance should be reserved. Reserving the issue means that in the future either parent can file a motion asking for an order deciding who must provide health coverage for the joint children.
  - Check the box whether you are asking the court to order uninsured and unreimbursed medical and dental expenses for the joint children or to reserve uninsured and unreimbursed medical and dental expenses. Unreimbursed costs are expenses for treatment not covered by the health plan. These costs are part of the child support obligation. The child support calculator provides a percentage of health care costs each parent should pay based on their relative incomes.
  - Minnesota law requires the parents to share work-related and school-related childcare costs. This is part of the child support obligation. You can check the box to have the judge determine the share of monthly child care expenses according to Minnesota law or you can check the box to reserve the issue. The child support calculator will calculate the share each parent should pay, based on their relative incomes.
5. Write in anything else you want the judge to order. This should be consistent with what you wrote on #22 of the Findings section.
  6. This section is about Post-Order Disputes. You should read it, but there is nothing you need to write here.
  7. This section indicates that Appendix A is attached and incorporated into the order. Read the Notice and Appendix A. There is nothing you need to write here.

**Do not date or sign this order – the judge will do that.**

<p><b>Step 5</b> <b><i>Notice of Intent to Proceed to Judgment</i></b></p>
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**Did the other parent show up at a hearing or file a document other than an *Answer and Counterpetition* in the court case?**

- If the other parent was at a hearing or filed a document other than an *Answer and Counterpetition* into the court case, you must fill out and give the *Notice of Intent to Proceed to Judgment* to the other parent.
- Generally, you do not need to fill out and give the *Notice of Intent to Proceed to Judgment* to the other parent if the other parent did NOT go to a hearing or did NOT file anything into the court case.
- However, some judges want you to give the *Notice of Intent to Proceed to Judgment* to the other parent even if the other parent never appeared at a hearing and filed nothing into the court case. If the judge requires this notice, your default hearing may be continued until the *Notice of Intent to Proceed to Judgment* is served on the other parent.

Fill out and sign the *Notice of Intent to Proceed to Judgment*. You will need to get a hearing date from Court Administration.

Make **three** copies.

Serve the other parent with a copy of the *Notice of Intent to Proceed to Judgment* at his or her last known address by first class U.S. mail.

- Papers cannot be mailed on a legal holiday.
- The form you prepared can be served by any of the following:
  - The sheriff;
  - Another adult; or
  - You.

The person who mailed the *Notice* fills out the *Affidavit of Service by Mail* and signs it under penalty of perjury. By signing the Affidavit under penalty of perjury, the server is stating that the information in the Affidavit is true to the best of his / her knowledge. Perjury is the crime of intentionally lying or misrepresenting the truth, punishable by jail or other sanctions.

Keep one copy of the *Notice* and one copy of the *Affidavit of Service* for your records. See Step 6.

You will file the original *Notice* and the *Affidavit of Service by Mail* with the Court. See Step 7.

## **Step 6** **Make Copies of Forms**

You will need one copy of the following documents for your records:

- *Affidavit of Default*
- *Affidavit of Non-Military Status*
- *Default Scheduling Request*
- *Findings of Fact, Conclusions of Law, & Order to Establish Custody & Parenting Time*
- *Notice of Intent to Proceed by Default*
- *Affidavit of Service by Mail (SOP104)*

Be sure to bring your copy of the papers with you to court when you go to the hearing.

## Step 7 File with Court Administration

You will need to file the following **original** forms with Court Administration:

- *Affidavit of Default*
- *Affidavit of Non-Military Status*
- *Default Scheduling Request*
- *Findings of Fact, Conclusions of Law, & Order to Establish Custody & Parenting Time*
- *Notice of Intent to Proceed by Default*
- *Affidavit of Service by Mail (SOP104)*

There is no fee to file default paperwork as long as the initial filing fee was paid or you have a current order waiving your filing fees.

You can file the papers by mail, electronically, or in person at the Court Administration counter where the Petition was filed.

## Step 8 Go to Your Hearing

You must go to court on the date set for the hearing. It is important to be on time. If you are even a few minutes late, the judge may not hear your case.

Bring copies of all the papers you filed with the court.

**Do not bring children to the hearing**, unless the judge requests that you to bring them.

**The hearing is formal. You are expected to know and follow the court's rules and procedures.** You should dress appropriately and be respectful to everyone in the courtroom. Do not interrupt the judge or other parent, if they are present. Answer any questions from the judge honestly. Direct all your comments to the judge.

**State of Minnesota**

County of: \_\_\_\_\_

**District Court**

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Case Type: Custody

**In Re the Custody of:**

\_\_\_\_\_

Child(ren)'s names (first, middle, last)

Petitioner (first, middle, last)

and

Respondent (first, middle, last)

**Affidavit of Default**

\_\_\_\_\_ says that:

- 1. I am the Petitioner in this action.
- 2. Respondent was served with the *Summons* and *Petition* in the following way: (Check all that apply)
  - Respondent was personally served the *Summons and Petition* on \_\_\_\_\_, 20\_\_\_\_ (date) as shown by the *Affidavit of Personal Service* on file. More than twenty-one (21) days have passed since the date service was made.
  - Waiver of Service of Summons* is filed with the court. More than sixty (60) days have passed since the date of service of the *Summons* and *Petition* or the date Respondent signed the *Waiver of Service of Summons*.
  - I have an *Order for Service by Alternate Means* that requires publication. The *Summons* was published in a legal newspaper on \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_ (list all three dates of publication) as shown by the *Affidavit of Publication* on file with the court. More than forty-two (42) days have passed since the first date of publication.
  - I have an *Order for Service by Alternate Means* that requires service by mail. The *Summons and Petition* were mailed to Respondent on \_\_\_\_\_, 20\_\_\_\_ (date) as shown by the *Affidavit of Service by Mail* on file with the court. More than forty-two (42) days have passed since the *Summons and Petition* were mailed.

3. No *Answer* has been served on Petitioner or Petitioner's attorney.

Therefore, I request this action be scheduled for hearing as a default.

I declare under penalty of perjury that everything that I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: \_\_\_\_\_

\_\_\_\_\_  
County and State where signed

\_\_\_\_\_  
Signature

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**State of Minnesota**

County of: \_\_\_\_\_

**District Court**

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Case Type: Custody

**In Re the Custody of:**

\_\_\_\_\_

Child(ren)'s names \_\_\_\_\_

Petitioner (first, middle, last) \_\_\_\_\_

and

Respondent (first, middle, last) \_\_\_\_\_

**Affidavit of  
Non-Military Status**

\_\_\_\_\_ says that

I am the Petitioner in this action.

To the best of my knowledge, Respondent is not now, nor was Respondent at the date of service of the *Summons, Petition, and Affidavit to Establish Custody and Parenting Time*, in the military or naval service of the United States.

I declare under penalty of perjury that everything that I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: \_\_\_\_\_

\_\_\_\_\_  
County and State where signed

\_\_\_\_\_  
Signature

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**State of Minnesota**

County of: \_\_\_\_\_

**District Court**

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Case Type: Custody

**In Re the Custody of:**

\_\_\_\_\_

Child(ren)'s names \_\_\_\_\_

Petitioner (first, middle, last) \_\_\_\_\_

and

Respondent (first, middle, last) \_\_\_\_\_

**Default Scheduling Request**

The above entitled matter is submitted for default. A default hearing is required or requested as the matter includes minor child(ren).

Dated: \_\_\_\_\_

County and State where signed

Signature \_\_\_\_\_

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**State of Minnesota**

County of: \_\_\_\_\_

**District Court**

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Case Type: Custody

**In Re the Custody of:**

\_\_\_\_\_

Child(ren)'s names \_\_\_\_\_

\_\_\_\_\_

Petitioner (First, Middle, Last)

and

\_\_\_\_\_

Respondent (First, Middle, Last)

**Findings of Fact, Conclusions of Law, & Order to Establish Custody, Parenting Time & Child Support**

A. This proceeding to establish custody and parenting time came on before the undersigned judicial officer of district court on \_\_\_\_\_ (date) at \_\_\_\_\_ (location) in the City of \_\_\_\_\_, State of Minnesota.

B. Petitioner  did  did not appear.  
Respondent  did  did not appear.

C. Petitioner  is NOT represented by an attorney OR  
Petitioner  is represented by the following attorney: \_\_\_\_\_.

Respondent  is NOT represented by an attorney OR  
Respondent  is represented by the following attorney: \_\_\_\_\_.

D. Service of the *Summons and Petition to Establish Custody and Parenting Time*:  
 Respondent was personally served on \_\_\_\_\_. **OR**  
 Respondent signed a *Waiver of Service of Summons* on \_\_\_\_\_. **OR**  
 Respondent was served by alternate means as ordered by the court on \_\_\_\_\_.  
 By mailing the *Summons and Petition* to Respondent at the address stated in the





5. **Children Petitioner and Respondent Have Together (Joint Children)**

“Child” means a living person under the age of 18, or under age 20 and still in high school.

Full Name of Child	Date of Birth	Age	Child Currently Lives With
			<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both parents OR _____ (write in name)
			<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both parents OR _____ (write in name)
			<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both parents OR _____ (write in name)
			<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both parents OR _____ (write in name)
			<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both parents OR _____ (write in name)

The children’s social security numbers are listed on Confidential Form 11.1 submitted along with this paperwork.

If a child is living with someone other than a parent, write the child’s address below:

Address: \_\_\_\_\_  
Street Address Apt. No.

---

City                      County                      State                      Zip Code

Has each child lived in Minnesota for the past six (6) months?     YES     NO

**If NO**, list dates and locations of where the children have been living for the last six months:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**6. Recognition of Parentage**

Petitioner and Respondent signed a Minnesota Recognition of Parentage (ROP) for each of the minor children listed above.  YES  NO  
Each ROP has been filed with the Minnesota Department of Health.

If you answered YES, a certified copy of each Minnesota ROP must be filed in this case. If you answered NO, then you are using the wrong forms.

**7. Other Alleged or Presumed Fathers**

Was the mother of any of the children listed above married to another man when Petitioner and Respondent signed the Minnesota ROP for that child?  YES  NO

**If YES**, did the husband sign a Spouse’s Non-Parentage Statement for that child?  YES  NO

If you answered YES, you must file a certified copy of the Spouse’s Non-Parentage Statement in this case. If you answered NO, then you are using the wrong forms.

Is there any other man who would meet the definition of an alleged or presumed father of any of the children listed above?  YES  NO

If you answered YES, then you are using the wrong forms.

**8. Protection, Harassment, or No Contact Order**

Is there an active Order preventing or limiting contact between the parents and/or children?  YES  NO

**If YES**, the Order protects:

Petitioner  Respondent  the children.

The Order was filed in \_\_\_\_\_ County on the date: \_\_\_\_\_, and the court file number is \_\_\_\_\_.

Does the Order include an order to pay child support?  YES  NO

You must file a copy of the Order in this case.

**9. Child Protection Case**

Is a child protection case involving the joint children open in Minnesota or another state?  YES  NO

**If YES**, the case is in \_\_\_\_\_ County in the State of \_\_\_\_\_ and the court file number is \_\_\_\_\_. The name of the children

involved in the child protection case are: \_\_\_\_\_  
\_\_\_\_\_

**10. Guardian/Custodian Appointed**

Has a guardian or custodian been appointed for one or more of the joint children?  YES  NO

If **YES**, a guardian or custodian was appointed for the children by court order in court file number \_\_\_\_\_ in the State of \_\_\_\_\_ and the name of the guardian / custodian is \_\_\_\_\_

NOTE: Minn. Stat. § 518.156, subd. 2 requires the Petitioner to give written notice of this proceeding to the guardian/custodian.

**11. Other Proceedings**

Has a separate court case for paternity, custody, or child support involving one or more of the joint children been started in Minnesota or another state?  YES  NO

If **YES**, the type of court case is \_\_\_\_\_. The case was started in \_\_\_\_\_ County in the State of \_\_\_\_\_. The court file number is \_\_\_\_\_.

A copy of the child support order is submitted with this paperwork, or the case is  Dismissed  Pending.

**12. Custody**

A. **Legal custody** means which parents have a say in the major decisions regarding the joint children's lives including education, religious upbringing and medical treatment.

It is in the *children's best interests* that legal custody be granted as follows:

Joint legal custody to both parents  
 Sole legal custody to  Petitioner  Respondent

B. **Physical custody** identifies which parents will handle the routine daily care and control of the joint children.

It is in the *children's best interests* that physical custody be granted as follows:

Joint physical custody to both parents  
 Sole physical custody to  Petitioner  Respondent

**13. Parenting Time**

A. It is in the *children's best interests* that:

Petitioner's parenting time with the joint children be: (*check one*)

unsupervised    supervised    reserved

Respondent's parenting time with the joint children be: (*check one*)

unsupervised    supervised    reserved

If parenting time is unsupervised for both parents, skip to Question 14.

B. Supervised parenting time:

Supervision is necessary because unsupervised parenting time with  Petitioner  Respondent is likely to endanger the children's physical or emotional health or impair the children's emotional development. The circumstances supporting this finding are: \_\_\_\_\_

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

State who should supervise parenting time, and if there is a cost involved, who should pay the cost, and any other important details: \_\_\_\_\_

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

C. Reserved Parenting time:

It is in the best interests of the children that  Petitioner's  Respondent's parenting time should be reserved because: \_\_\_\_\_

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

**14. Best Interests of the Children**

Minnesota law says the court must decide your request for parenting time and custody based on the children's best interests. The court considers all relevant factors, including the best interest of the child factors listed in Minn. Stat. § 518.17, subd. 1.



**If YES**, the assistance is from \_\_\_\_\_ County. (check all that apply):

- MFIP in the amount of \$ \_\_\_\_\_ per month
- Tribal TANF in the amount of \$ \_\_\_\_\_ per month
- General Assistance in the amount of \$ \_\_\_\_\_ per month
- Medical Assistance       MinnesotaCare
- Child Care Assistance

C. Do the joint children of the parties receive public assistance from the State of Minnesota?       YES    NO    UNKNOWN

**If YES**, the assistance is from \_\_\_\_\_ County. (check all that apply):

- MFIP    Medical Assistance    Tribal TANF    MinnesotaCare
- IV-E Foster Care

### 17. Supplemental Security Income (SSI).

Supplemental Security Income (SSI) is a Federal income supplement program. It is available to low-income people if they are over age 65, or blind or disabled.

A. Petitioner receives Supplemental Security Income (SSI):    YES    NO

**If YES**, in the amount of \_\_\_\_\_ per month.

B. Respondent receives Supplemental Security Income (SSI):    YES    NO    UNKNOWN

**If YES**, in the amount of \_\_\_\_\_ per month.

C. The joint children of the parties receive Supplemental Security Income (SSI):       YES    NO

**If YES**, in the amount of \_\_\_\_\_ per month. The name of the children receiving SSI are \_\_\_\_\_.

### 18. Petitioner's Financial Information

A. Petitioner is currently (*check one*)  employed    unemployed (*if employed, answer the following*):

- a. Employer: \_\_\_\_\_
- b. Address: \_\_\_\_\_
- c. Work telephone number: \_\_\_\_\_
- d. Occupation /Type of work: \_\_\_\_\_
- e. Length of employment: \_\_\_\_\_
- f. Supervisor: \_\_\_\_\_
- g. Gross Pay: \$ \_\_\_\_\_ This  does  does not include overtime pay.
- h. Paid:  Weekly    Every other week    Twice a month    Monthly
- i. Previously employed by \_\_\_\_\_  
for \_\_\_\_\_ years prior to the above employment.

B. Petitioner has the following additional sources of income:

Commissions	\$ _____	Pension Payments	\$ _____
Annuity Payments	\$ _____	Unemployment Benefits	\$ _____
Military / Naval Retirement	\$ _____	Workers' Compensation	\$ _____
Spousal Maintenance Received	\$ _____	Disability Payments	\$ _____
Self-Employment	\$ _____	Other	\$ _____

C. The children currently receive monthly social security or veteran's benefits in the amount of \$ \_\_\_\_\_ based on  my disability  the other parent's disability and is paid to  Petitioner  Respondent.

D. Petitioner is court ordered to pay monthly spousal maintenance (*check one*):

YES  NO **If YES**, how much? \_\_\_\_\_

E. Petitioner supports the following nonjoint children:

<b>Child's Name</b>	<b>Date of Birth</b>	<b>Relationship</b>	<b>Court ordered child support</b>	<b>Living in my home</b>
_____	_____	_____	\$ _____	Yes / No
_____	_____	_____	\$ _____	Yes / No
_____	_____	_____	\$ _____	Yes / No
_____	_____	_____	\$ _____	Yes / No
_____	_____	_____	\$ _____	Yes / No

(If ordered to pay child support for any child listed above, provide copies of court orders)

**19. Respondent's Financial Information**

Petitioner has detailed information about Respondent's employment:

A. Respondent is currently (*check one*)  employed  unemployed (*if employed, answer the following*):

- i. Employer: \_\_\_\_\_
- ii. Address: \_\_\_\_\_
- iii. Work telephone number: \_\_\_\_\_
- iv. Occupation /Type of work: \_\_\_\_\_
- v. Length of employment: \_\_\_\_\_
- vi. Supervisor: \_\_\_\_\_
- vii. Gross Pay: \$ \_\_\_\_\_ This  does  does not include overtime pay.
- viii. Paid:  Weekly  Every other week  Twice a month  Monthly
- ix. Previously employed by \_\_\_\_\_  
for \_\_\_\_\_ years prior to the above employment.

B. Respondent has the following additional sources of income:

Commissions	\$ _____	Pension Payments	\$ _____
Annuity Payments	\$ _____	Unemployment Benefits	\$ _____
Military / Naval Retirement	\$ _____	Workers' Compensation	\$ _____
Spousal Maintenance Received	\$ _____	Disability Payments	\$ _____
Self-Employment	\$ _____	Other	\$ _____

C. The children currently receive monthly social security or veteran's benefits in the amount of \$ \_\_\_\_\_ based on  my disability  the other parent's disability and is paid to  Petitioner  Respondent.

D. Respondent is court ordered to pay monthly spousal maintenance (*check one*):   
YES  NO  If YES, how much? \_\_\_\_\_

E. Respondent supports the following nonjoint children:

Child's Name	Date of Birth	Relationship	Court ordered child support	Living in my home
_____	_____	_____	\$ _____	Yes / No
_____	_____	_____	\$ _____	Yes / No
_____	_____	_____	\$ _____	Yes / No
_____	_____	_____	\$ _____	Yes / No
_____	_____	_____	\$ _____	Yes / No

(If ordered to pay child support for any child listed above, provide copies of court orders)

**OR**

Petitioner does not have detailed information about Respondent's income, but believes that Respondent's pay is \_\_\_\_\_ per  week  month  year, with bonuses, overtime or commissions in the additional amount of \_\_\_\_\_ per  week  month  year. This is Respondent's  Net income (after taxes and deductions) or  Gross income (before taxes and deductions).

**OR**

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

**20. Expenses for Special Needs for the Children**

Is there a child of the parties who has special needs and extraordinary medical expenses?  YES  NO

If YES, name the child with special needs \_\_\_\_\_

Describe the special needs: \_\_\_\_\_

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

Explain the living expenses for the family:

Petitioner and Respondent and their children are still living together. The month living expenses for the family total \_\_\_\_\_.

**OR**

Petitioner and Respondent are living separately. Petitioner's monthly living expenses total \_\_\_\_\_ and Respondent's living expenses total \_\_\_\_\_ or  unknown to Petitioner. Of the total current living expenses for Petitioner, what monthly dollar amount is for expenses just for the children that live with Petitioner? \_\_\_\_\_. Of the total current living expenses for Respondent, \_\_\_\_\_ is for expenses just for the children that live with Respondent, or  this is unknown.

## 21. Health Care Coverage

A. Who receives MinnesotaCare or Medical Assistance?

Petitioner  Respondent  Joint children  No one

B. Does Petitioner currently have medical insurance?  YES  NO  
(other than MinnesotaCare or Medical Assistance)

**If YES**, who is currently covered by this medical insurance?

Petitioner  Respondent  Joint children

Name joint children who are covered \_\_\_\_\_

What is the cost for dependent coverage per month? \_\_\_\_\_  
(dependent coverage can be calculated by subtracting the monthly cost of single coverage from the monthly cost of family coverage)

C. Does Petitioner have dental insurance?  YES  NO  
(other than MinnesotaCare or Medical Assistance)

**If YES**, who is currently covered by this dental insurance?

Petitioner  Respondent  Joint children

Name joint children who are covered \_\_\_\_\_

What is the cost for dependent coverage per month? \_\_\_\_\_

Dental is included in the medical insurance costs.

D. Does Respondent currently have medical insurance?  YES  NO  
(other than MinnesotaCare or Medical Assistance)  UNKNOWN

**If YES**, who is currently covered by this medical insurance?

Petitioner  Respondent  Joint children

Name joint children who are covered \_\_\_\_\_

What is the cost for dependent coverage per month? \_\_\_\_\_  
(dependent coverage can be calculated by subtracting the monthly cost of single coverage from the monthly cost of family coverage)

E. Does Respondent have dental insurance?  YES  NO  
(other than MinnesotaCare or Medical Assistance)  UNKNOWN

**If YES**, who is currently covered by this dental insurance?

Petitioner  Respondent  Joint children

Name Joint children who are covered \_\_\_\_\_

What is the cost for dependent coverage per month? \_\_\_\_\_

Dental is included in the medical insurance costs.

F. If the joint children are without health care coverage, is coverage available for purchase through Petitioner's or Respondent's employer?

YES  NO  Joint children currently have health coverage

G. Other: \_\_\_\_\_  
\_\_\_\_\_

**22. Child Care Costs**

Are there child care costs for joint children because of work or school?  YES  NO

**If YES**, describe in detail below.

A. How many of the joint children need child care?  One  Two  Three  \_\_\_\_\_

B. How much does the daycare center(s) or babysitter charge per month? \$ \_\_\_\_\_

C. Who pays the child care costs?

Petitioner pays \$ \_\_\_\_\_ per month

Respondent pays \$ \_\_\_\_\_ per month

The County pays \$ \_\_\_\_\_ per month through a subsidy or child care assistance

D. If the County pays, who applied for the child care assistance?

Petitioner  Respondent  There is no county assistance

**23. Other (Include other facts you think the Court should know.)**

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

**BASED UPON THE ABOVE INFORMATION, the Court makes the following:  
CONCLUSIONS OF LAW & ORDER**

**1. Legal Custody**

It is in the best interests of the children to grant **legal** custody of each minor joint child of the parties as follows:

Name of Child	Granting Legal Custody:
	<input type="checkbox"/> Solely to Petitioner <b>OR</b> <input type="checkbox"/> Solely to Respondent <b>OR</b> <input type="checkbox"/> Jointly to both parties.
	<input type="checkbox"/> Solely to Petitioner <b>OR</b> <input type="checkbox"/> Solely to Respondent <b>OR</b> <input type="checkbox"/> Jointly to both parties.
	<input type="checkbox"/> Solely to Petitioner <b>OR</b> <input type="checkbox"/> Solely to Respondent <b>OR</b> <input type="checkbox"/> Jointly to both parties.
	<input type="checkbox"/> Solely to Petitioner <b>OR</b> <input type="checkbox"/> Solely to Respondent <b>OR</b> <input type="checkbox"/> Jointly to both parties.
	<input type="checkbox"/> Solely to Petitioner <b>OR</b> <input type="checkbox"/> Solely to Respondent <b>OR</b> <input type="checkbox"/> Jointly to both parties.

**2. Physical Custody**

It is in the best interests of the children to grant **physical** custody of each of the minor joint children of the parties as follows:

Name of Child	Granting Physical Custody:
	<input type="checkbox"/> Solely to Petitioner <b>OR</b> <input type="checkbox"/> Solely to Respondent <b>OR</b> <input type="checkbox"/> Jointly to both parties.
	<input type="checkbox"/> Solely to Petitioner <b>OR</b> <input type="checkbox"/> Solely to Respondent <b>OR</b> <input type="checkbox"/> Jointly to both parties.
	<input type="checkbox"/> Solely to Petitioner <b>OR</b> <input type="checkbox"/> Solely to Respondent <b>OR</b> <input type="checkbox"/> Jointly to both parties.
	<input type="checkbox"/> Solely to Petitioner <b>OR</b> <input type="checkbox"/> Solely to Respondent <b>OR</b> <input type="checkbox"/> Jointly to both parties.
	<input type="checkbox"/> Solely to Petitioner <b>OR</b> <input type="checkbox"/> Solely to Respondent <b>OR</b> <input type="checkbox"/> Jointly to both parties.

**3. Parenting Time**

- A. Petitioner's parenting time shall be:  Unsupervised  Supervised  Reserved
- B. Respondent's parenting time shall be:  Unsupervised  Supervised  Reserved
- C. Parenting Time shall be scheduled as follows:

(Clearly explain the time each parent will spend with each child. Include the time (o'clock) when the children will transfer from one parent to the other. If you want the order to say who will pick up and drop off the child, include that under "Other.")

**Regular schedule:**

Monday through Friday:

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Weekends:

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Summer (if you want a different schedule in summer):

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---

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Telephone contact with the children:  Unlimited or  Only at certain times as follows  
(describe the days and times when the parent and children may have telephone contact):

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**Exceptions to the Regular Schedule:**

You can have a different schedule for holidays, school release days, and birthdays. If you do not want a different schedule, leave it blank.

School release days or breaks during the school year:

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Any school release day schedule will supersede the regular parenting schedule.

Birthdays (child's birthday, parent's birthday):

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Holidays:

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Any holiday or birthday schedule will supersede the regular and school release parenting schedule.

Vacation Time:

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---

Any vacation time will supersede the regular parenting schedule.

Other:

---

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**D. Under the above Schedule:**

What is the annual number of overnights the children will spend with each parent?

**Note:** If parenting time is equal, use 182.5 overnights for each parent. (Please be as accurate as possible. The amount of overnights each party has may affect your child support.)

Number of overnights per year with Petitioner is \_\_\_\_\_.

Number of overnights per year with Respondent is \_\_\_\_\_.

4. **Child Support**

Child support shall continue as ordered in court file number\_\_\_\_\_.

Skip to page. 21, Question 5.

**OR**

Child support shall be established or modified as described in detail below.

**A. Child Support Guidelines Worksheet**

The Minnesota Child Support Guidelines Worksheet has been completed. It is attached and incorporated into this Order. The child support guidelines calculator considers various factors, including but not limited to both parents’ gross income, the number of children, parenting time, and medical and child care expenses. The child support guidelines calculator is used to estimate the amount of child support in your case and can be found at [www.mncourts.gov](http://www.mncourts.gov) under Help Topics-Child Support or at <http://childsupportcalculator.dhs.state.mn.us/>.

**B. Basic Support for the Joint Children**

Petitioner  Respondent shall pay basic support to the other party in the amount of \$\_\_\_\_\_ per month starting on (date):\_\_\_\_\_ as the basic support obligation for the parties’ joint children. Any past due amounts of child support are still owed.

This amount is based on the calculations from the child support guidelines worksheet, which is attached and incorporated into this order. Any past due amounts pursuant to a different court order of child support are still owed.

**OR**

This amount is a deviation from the basic support obligation under Minnesota laws, which is in the best interest of the children because:

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

The monthly amount shall be:

subject to income withholding from the payor’s income, regardless of source, by his or her employer, trustee, or other payor of funds and mailed to:

Minnesota Child Support Payment Center, P.O. Box 64326, St. Paul, MN 55164-0326. If the person paying child support is self-employed, send payments to Minnesota Child Support Payment Center, P.O. Box 64306, St. Paul, MN 55164-0306. **To start income withholding, Petitioner or Respondent must apply for IV-D services or income withholding-only services at the Child Support office in the County where the children live.** Until income withholding starts, the person owing support shall pay the other parent directly.

**OR**

paid directly by the parent owing the child support to the parent receiving the child support, payable on the \_\_\_\_\_ day of each month.

**OR**

Basic child support shall be reserved because: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Medical and Dental Insurance for the Joint Children**

Ordering **Medical** insurance as follows:

Petitioner  Respondent shall provide medical insurance for the joint children through his/her **employer or union**. The other parent must pay a pro rata share of the health coverage costs by paying \$\_\_\_\_\_ OR  pay nothing toward the medical insurance costs because he/she is financially unable to contribute to the costs.

**OR**

Petitioner  Respondent shall provide medical insurance for the joint children by obtaining and paying for **private insurance**. The other parent must pay a pro rata share of the health coverage costs by paying \$\_\_\_\_\_ OR  pay nothing toward the medical insurance costs because he/she is financially unable to contribute to the costs.

**OR**

Petitioner  Respondent shall pay \$ \_\_\_\_\_ per month as reimbursement for Medical Assistance or MinnesotaCare, payable by income withholding

through the Minnesota Child Support Payment Center, provided Medical Assistance or MinnesotaCare is open for the joint children.

**OR**

Reserving the issue of medical insurance for the joint children because \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Ordering **Dental** Insurance as follows:

Petitioner  Respondent shall provide dental insurance for the joint children through his/her **employer or union**. The other parent must pay a pro rata share of the dental coverage costs by paying \$\_\_\_\_\_ OR  pay nothing toward the dental coverage costs because he/she is financially unable to contribute to the costs.

**OR**

Petitioner  Respondent shall provide dental insurance for the joint children by obtaining and paying for **private insurance**. The other parent must pay a pro rata share of the dental coverage costs by paying \$\_\_\_\_\_ OR  pay nothing toward the dental coverage costs because he/she is financially unable to contribute to the costs.

**OR**

Reserving the issue of dental insurance because \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

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

**D. Uninsured and Unreimbursed Medical and Dental Expenses for the Joint Children**

Petitioner shall pay \_\_\_\_\_ % of the uninsured and/or unreimbursed medical and dental costs for the joint children of the parties, and Respondent shall pay \_\_\_\_\_% of the uninsured and/or unreimbursed medical and dental costs for the minor children of the parties.

This amount is based on the percentage share of combined PICS (parental income for determining child support).

**OR**

This amount is a deviation from the percentage share of combined PICS (parental income for determining child support). The deviation is appropriate because:

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The parent who paid the bill must tell the other parent to pay his/her percentage share. To ask for payment, send to the other parent a) a copy of the bill, b) evidence that you have paid the bill, and c) a letter requesting payment to you of your percentage share. This request for payment should be made promptly, and no later than three (3) months after the bill is paid. If a request for payment is made after three (3) months, there must be exceptional circumstances to support the late request for payment.

The person receiving the request for payment shall make the payment within thirty (30) days. If there is a good reason to question the payment, send a letter to the other parent stating what additional information is needed, or why payment is disputed. If neither payment nor a written letter disputing payment is sent within thirty (30) days of receiving the request for payment, then the unpaid bill can be considered back due child support.

**OR**

Reserving the issue of uninsured and unreimbursed medical and dental costs because \_\_\_\_

---

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"Uninsured and unreimbursed medical and dental costs" are expenses not covered by insurance and not paid by medical assistance or MinnesotaCare. Examples include deductibles, co-pays, and procedures not covered by insurance or assistance. Usually the parent with physical custody of the child will receive and pay the bill for the unreimbursed costs.

If the parents are not able to work out payment problems, either parent can bring a motion in court asking the court to decide the dispute, or asking the court to adjust how they divide the bills, based on changes in the incomes of the parties.

**E. Child Care Support**

Petitioner shall pay \$ \_\_\_\_\_ per month for child care expenses,  
and Respondent shall pay \$ \_\_\_\_\_ per month for child care expenses.

This amount is based on the percentage share of combined PICS (parental income for determining child support).

**OR**

This amount is a deviation from the percentage share of combined PICS (parental income for determining child support). The deviation is appropriate because:

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

**OR**

Reserving the issue of child care expenses because \_\_\_\_\_

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

**5. Other:**

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

**6. Post-Order Disputes**

Any claim or controversy arising under this Stipulation and Order involving custody, parenting time, or any other issue which cannot be resolved by the parties through direct communication, shall be promptly submitted to an alternative dispute resolution process, unless precluded within the purview of Minnesota Statute § 518B.01. The parties shall agree upon the ADR neutral and shall equally share in the neutral’s fees. The parties shall cooperate in good faith to resolve the matter(s) in dispute with the assistance of the neutral. The parties must attempt an ADR process as a means of resolving any matter in dispute before either party may appear before the Court on a motion for post-order relief.

**7. NOTICE: Appendix A is incorporated and made a part of the Order**

Appendix A contains, among other things, provisions regarding payments to the Public Agency pursuant to Minnesota Statutes § 518A.50; Depriving Another of Custodial or Parental Rights - A Felony, Minnesota Statutes § 609.26; Rules of Support and Parenting Time; Parental Rights from Minnesota Statutes § 518.17, subdivision 3; Wage and Income Deduction of Child Support pursuant to Minnesota Statutes § 518A.53; Change of Address or Residence; Cost of Living Increase of Child Support pursuant to Minnesota Statutes § 518A.75; Judgments for Unpaid Child Support pursuant to Minnesota Statutes § 548.091; an Medical Insurance and Expenses pursuant to Minnesota Statutes § 518A.41.

The foregoing facts were found by me after due hearing and the Order is recommended.

BY THE COURT

\_\_\_\_\_  
District Court Referee

\_\_\_\_\_  
Judge of District Court

Dated: \_\_\_\_\_

Dated: \_\_\_\_\_

## APPENDIX A

### NOTICE IS HEREBY GIVEN TO THE PARTIES:

**I. PAYMENTS TO PUBLIC AGENCY.** According to Minnesota Statutes, section 518A.50, payments ordered for maintenance and support must be paid to the Minnesota child support payment center as long as the person entitled to receive the payments is receiving or has applied for public assistance or has applied for support and maintenance collection services. Parents mail payments to: P.O. Box 64326, St. Paul, MN 55164-0326. Employers mail payments to: P.O. Box 64306, St. Paul, MN 55164.

**II. DEPRIVING ANOTHER OF CUSTODIAL OR PARENTAL RIGHTS -- A FELONY.** A person may be charged with a felony who conceals a minor child or takes, obtains, retains, or fails to return a minor child from or to the child's parent (or person with custodial or parenting time rights), according to Minnesota Statutes, section 609.26. A copy of that section is available from any court administrator.

**III. NONSUPPORT OF A SPOUSE OR CHILD – CRIMINAL PENALTIES.** A person who fails to pay court-ordered child support or maintenance may be charged with a crime, which may include misdemeanor, gross misdemeanor, or felony charges, according to Minnesota Statutes, section 609.375. A copy of that section is available from any district court clerk.

### **IV. RULES OF SUPPORT, MAINTENANCE, PARENTING TIME.**

- A. Payment of support or spousal maintenance is to be as ordered, and the giving of gifts or making purchases of food, clothing, and the like will not fulfill the obligation.
- B. Payment of support must be made as it becomes due, and failure to secure or denial of parenting time is NOT an excuse for nonpayment, but the aggrieved party must seek relief through a proper motion filed with the court.
- C. Nonpayment of support is not grounds to deny parenting time. The party entitled to receive support may apply for support and collection services, file a contempt motion, or obtain a judgment as provided in Minnesota Statutes, section 548.091.
- D. The payment of support or spousal maintenance takes priority over payment of debts and other obligations.
- E. A party who accepts additional obligations of support does so with the full knowledge of the party's prior obligation under this proceeding.
- F. Child support or maintenance is based on annual income, and it is the responsibility of a person with seasonal employment to budget income so that payments are made throughout the year as ordered.
- G. *A Parental Guide to Making Child-Focused Parenting-Time Decisions* is available from any court administrator.
- H. The nonpayment of support may be enforced through the denial of student grants; interception of state and federal tax refunds; suspension of driver's, recreational, and occupational licenses; referral to the department of revenue or private collection agencies; seizure of assets, including bank accounts and other assets held by financial institutions; reporting to credit bureaus; interest charging, income withholding, and contempt proceedings; and other enforcement methods allowed by law.
- I. The public authority may suspend or resume collection of the amount allocated for child care expenses if the conditions of Minnesota Statutes, section 518A.40, subdivision 4, are met.
- J. The public authority may remove or resume a medical support offset if the conditions of section 518A.41, subdivision 16, are met.
- K. The public authority may suspend or resume interest charging on child support judgments if the conditions of section 548.091, subdivision 1a, are met.

**V. MODIFYING CHILD SUPPORT.** If either the obligor or obligee is laid off from employment or receives a pay reduction, child support may be modified, increased, or decreased. Any modification will only take effect when it is ordered by the court, and will only relate back to the time that a motion is filed. Either the obligor or obligee may file a motion to modify child support, and may request the public agency for help. UNTIL

A MOTION IS FILED, THE CHILD SUPPORT OBLIGATION WILL CONTINUE AT THE CURRENT LEVEL. THE COURT IS NOT PERMITTED TO REDUCE SUPPORT RETROACTIVELY.

**VI. PARENTAL RIGHTS FROM MINNESOTA STATUTES, SECTION 518.17, SUBDIVISION 3. UNLESS OTHERWISE PROVIDED BY THE COURT:**

- A. Each party has the right of access to, and to receive copies of, school, medical, dental, religious training, police reports, and other important records and information about the minor children. Each party has the right of access to information regarding health or dental insurance available to the minor children. Presentation of a copy of this order to the custodian of a record or other information about the minor children constitutes sufficient authorization for the release of the record or information to the requesting party.
- B. Each party has the right to be informed by the other party as to the name and address of the school of attendance of the minor children. Each party has the right to be informed by school officials about the children's welfare, educational progress and status, and to attend school and parent teacher conferences. The school is not required to hold a separate conference for each party.
- C. Each party has the right to be notified by the other party of an accident or serious illness of a minor child, including the name of the health care provider and the place of treatment.
- D. Each party has the right to be notified by the other party if the minor child is the victim of an alleged crime, including the name of the investigating law enforcement officer or agency. There is no duty to notify if the party to be notified is the alleged perpetrator.
- E. Each party has the right of reasonable access and telephone contact with the minor children.

**VII. WAGE AND INCOME DEDUCTION OF SUPPORT AND MAINTENANCE.** Child support and / or spousal maintenance may be withheld from income, with or without notice to the person obligated to pay, when the conditions of Minnesota Statutes, section 518A.53, have been met. A copy of that section is available from any court administrator.

**VIII. CHANGE OF ADDRESS OR RESIDENCE.** Unless otherwise ordered, each party shall notify the other party, the court, and the public authority responsible for collection, if applicable, of the following information within ten days of any change: residential and mailing address, telephone number, driver's license number, social security number, and name, address, and telephone number of the employer.

**IX. COST OF LIVING INCREASE OF SUPPORT AND MAINTENANCE.** Basic support and / or spousal maintenance may be adjusted every two years based upon a change in the cost of living (using the U.S. Department of Labor, Bureau of Labor Statistics, consumer price index Mpls. St. Paul, for all urban consumers (CPI-U), unless otherwise specified in this order) when the conditions of Minnesota Statutes, section 518A.75, are met. Cost of living increases are compounded. A copy of Minnesota Statutes, section 518A.75, and forms necessary to request or contest a cost of living increase are available from any court administrator.

**X. JUDGMENTS FOR UNPAID SUPPORT; INTEREST.** According to Minnesota Statutes, section 548.091:

- A. If a person fails to make a child support payment, the payment owed becomes a judgment against the person responsible to make the payment by operation of law on or after the date the payment is due, and the person entitled to receive the payment or the public agency may obtain entry and docketing of the judgment **without notice** to the person responsible to make the payment.
- B. Interest begins accruing on a payment or installment of child support whenever the unpaid amount due is greater than the current support due.

**XI. JUDGMENTS FOR UNPAID MAINTENANCE.** A judgment for unpaid spousal maintenance may be entered and docketed when the conditions of Minnesota Statutes, section 548.091, are met. A copy of that section is available from any court administrator.

**XII. ATTORNEY FEES AND COLLECTION COSTS FOR ENFORCEMENT OF CHILD SUPPORT.** A judgment for attorney fees and other collection costs incurred in enforcing a child support order will be entered against the person responsible to pay support when the conditions of Minnesota Statutes, section 518A.735, are met. A copy of that section and forms necessary to request or contest these attorney fees and collection costs are available from any court administrator.

**XIII. PARENTING TIME EXPEDITOR PROCESS.** On request of either party or on its own motion, the court may appoint a parenting time expeditor to resolve parenting time disputes under Minnesota Statutes, section 518.1751. A copy of that section and a description of the expeditor process is available from any court administrator.

**XIV. PARENTING TIME REMEDIES AND PENALTIES.** Remedies and penalties for wrongful denial of parenting time are available under Minnesota Statutes, section 518.175, subdivision 6. These include compensatory parenting time; civil penalties; bond requirements; contempt; and reversal of custody. A copy of that subdivision and forms for requesting relief are available from any court administrator.

**In addition to the Notices on pages 1 and 2, the following NOTICE applies to all orders addressing custody pursuant to Minn. Stat. § 518.17, subd. 3a.**

#### **NOTICE**

#### **EACH PARTY IS GRANTED THE FOLLOWING RIGHTS:**

1. Right of access to, and to receive copies of, school, medical, dental, religious training, police reports, and other important records and information about the minor children.
2. Right of access to information regarding health or dental insurance available to the minor children.
3. Right to be informed by the other party as to the name and address of the school of attendance of the minor children.
4. Right to be informed by school officials about the children's welfare, educational progress and status, and to attend school and parent-teacher conferences. The school is not required to hold a separate conference for each party, unless attending the same conference would result in violation of a court order prohibiting contact with a party.
5. Right to be notified by the other party of an accident or serious illness of a minor child, including the name of the health care provider and the place of treatment.
6. Right to be notified by the other party if the minor child is the victim of an alleged crime, including the name of the investigating law enforcement officer or agency. There is no duty to notify if the party to be notified is the alleged perpetrator.
7. Right to reasonable access and telephone or other electronic contact with the minor children.

**State of Minnesota**

County of: \_\_\_\_\_

**District Court**

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Case Type: Custody

**In Re the Custody of:**

\_\_\_\_\_

Child(ren)'s names

Petitioner (first, middle, last)

and

Respondent (first, middle, last)

**Notice of Intent to Proceed by Default**

To Respondent:

You are hereby notified that an application has been made for a final hearing to be held on \_\_\_\_\_, 20\_\_ at \_\_\_\_\_.m. (a date no sooner than fourteen (14) days from the date of this notice) at \_\_\_\_\_ (courthouse)

You are further notified that the court will be requested to grant the relief requested in the petition at the hearing. You should contact the undersigned and the District Court Administrator immediately if you have any dispute to assert to this default order for custody and parenting time. This notice is given pursuant to the General Rules of Practice for District Court, Rule 306.01(b).

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
County and State where signed

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

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**State of Minnesota**

**District Court**

County of: _____	Judicial District: _____
	Court File Number: _____
	Case Type: <u>Custody</u>

\_\_\_\_\_  
Petitioner / Plaintiff (first, middle, last)

**Affidavit of Service by Mail**

and / vs.

\_\_\_\_\_  
Respondent / Defendant (first, middle, last)

I, \_\_\_\_\_, state that I am at least 18 years of age having been born on \_\_\_\_\_ and that on \_\_, I served the following papers:

\_\_\_\_\_  
(List all papers mailed to the other party)

upon \_\_\_\_\_ by placing in an envelope a true and correct copy of each document addressed to \_\_\_\_\_ at \_\_\_\_\_ in the City of \_\_\_\_\_ State of \_\_\_\_\_ Zip Code \_\_\_\_\_ and depositing the envelope, with sufficient postage, in the United States Mail Post Office located in the City of \_\_\_\_\_ in the State of \_\_\_\_\_.

I declare under penalty of perjury that everything that I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
County and State where signed

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail address: \_\_\_\_\_