

UNCONTESTED DIVORCE PACKET

***All the below documents are needed for the Court to properly dispose of your divorce case. Please read them carefully and return all applicable documents to the Clerk.

WITHOUT CHILDREN

- Complaint
- Plaintiff's Testimony (Notarized)
- Affidavit of Residence
- Acceptance of Service of Process, Answer and Waiver of Defendant
- Certificate Regarding Document Preparation
- Agreement of the Parties
- CS-47
- Certificate of Divorce

WITH CHILDREN – documents needed in addition to those listed above

- Agreement Regarding Custody, Child Support and Visitation
- CS-41 for Husband
- CS-41 for Wife
- CS-42
- CS-43

*** THE CLERK'S OFFICE IS NOT ALLOWED TO GIVE LEGAL ADVICE AND CANNOT HELP YOU COMPLETE THESE FORMS. Should you need assistance with any of the paperwork, you should contact an attorney or Legal Services @ 256-536-9645.

PS-08

Divorce Complaint

Case Number (the clerk fills this in):

8/08

(No minor children, no assets or debts for the Court to divide)

In the Circuit Court of (county): _____ County, Alabama

In re the marriage of:

_____ v. _____
 (You are the Plaintiff – the person filing for divorce) (Your spouse is the Defendant)

Plaintiff's Information

Mailing address: _____
 City, state, zip: _____
 Date of birth (mm/dd/yyyy): _____
 Phone #: () _____

Defendant's Information

Home address: _____
 City, state, zip: _____
 Date of birth (mm/dd/yyyy): _____
 Phone #: () _____

① I am the Plaintiff in this case. I agree that the Court can make decisions in this case.

② I declare that the following information is true:

- The Defendant is age 19, or older.
- I have resided in Alabama for the last 6 months.
- The Defendant and I were legally married on (date): _____
(city and state): _____
- The Defendant and I no longer live together. We separated on (date): _____
- We last lived together in (county and state): _____
- The Defendant and I have no children from this marriage under the age of 19, and the Wife is not pregnant.
- The Defendant and I have already divided our personal property (automobiles, furniture, clothing, bank accounts, etc.) and do not need a court order to divide our property.
- The Defendant and I do not own any real estate together, such as a house or land.
- The Defendant and I do not have any joint debts that need to be divided by the court.
- The Defendant and I can no longer get along nor live together. We argue and cannot get along.
- The marriage is broken down and cannot be fixed. It is not in our best interests to keep trying to fix it.

③ I ask the Court to (check all that apply):

- a. Approve this *Divorce Complaint*, which would end my marriage forever.
- b. Order the Defendant to pay all court costs.
- c. Give me back my former name (list former name here): _____

I also ask the Court to make any other orders I may be entitled to.

④ I swear that all of the information I provided above is complete and accurate. I understand that if I lie on this form, I can be fined and sent to jail.

Sign below in front of a notary:

▶ _____ Date: _____

Notary fills out below—

Sworn to and subscribed before me, the undersigned authority,

By (Print name of notary): _____

(Notary's seal here)

On this date: _____ / / _____

Notary signs here

Date notary's commission expires

In the Circuit Court of Lawrence County

Verified Divorce Complaint

Your first and last name (Plaintiff) v. _____
Your spouse's first and last name (Defendant)

Your Information:

Mailing Address: _____
City, State, Zip: _____
Date of birth: _____
Phone #: _____

Your Spouse's Information:

Mailing Address: _____
City, State, Zip: _____
Date of birth: _____
Phone #: _____

- I. I am the Plaintiff in this case (the person filing for divorce). My spouse is the Defendant.
- II. I declare that **all of** the following information is **true**: *(fill in the blanks)*
- a. I am over 19 years old, or older.
 - b. The Defendant is 19 years old, or older.
 - c. The Defendant and I were legally married on *(date)*: _____
We were married in *(city and state)*: _____
 - d. We last lived together in *(county and state)*: _____
 - e. I have lived in Alabama for the last 6 months.
 - f. Our marriage has broken down and cannot be fixed. It is not in our best interests to keep trying to fix it. We argue and do not get along.
 - g. I am asking the Court to approve my divorce Complaint and end my marriage forever.
 - h. I am asking the Court to make any other orders that I may be entitled to, even if not requested in this Complaint.
 - i. The wife is not currently pregnant.
- III. Our current living situation: *(Select which applies. Select only one.)*
- The Defendant and I currently live together.
 - The Defendant and I no longer live together. We separated on *(date)*: _____
- IV. Our children: *(Select which applies. Select only one.)*
- We do not have any children.
 - We have children and their names and dates of birth are as follows:
 - (1) _____
 - (2) _____
 - (3) _____

V. Personal Property: (Select which applies. Select only one.)

Personal property is property such as vehicles, clothing, bank accounts, and home furnishings.

- We do not have any personal property that the Court needs to divide. We have divided our property already.
- We have personal property that I am asking the Court to divide.

VI. Real Estate: (Select which applies. Select only one.)

Real estate includes a house or land.

- We do not have any real estate that we jointly own. There is no real estate for the Court to divide.
- We have real estate and I am asking the Court to divide it.

VII. Joint Debts: (Select which applies. Select only one.)

- We do not have any joint debts. I request that each of us pay the debts that are in our own individual name and hold the other party harmless.
- We have debts that I am asking the Court to divide.

VIII. Maiden Name: (Select which applies. Select only one.)

- I request to be restored to my maiden name, which is (list full name to be restored): _____.
- I do not request a name change.

IX. Court Costs: (Select which applies. Select only one.)

- I paid the Court costs and am asking the Court to tax costs as paid.
- I paid the Court costs and am asking the Court to order the Defendant to pay all court costs.
- I was granted a hardship and am asking the Court to order the Defendant to pay all court costs.

Sign below in front of a notary:

I swear that all of the information I provided above is complete and accurate. I understand that if I lie on this form, I can be fined and sent to jail.

Your name

Date

Notary fills out below –

Sworn to and subscribed before me, the undersigned authority.

By (print name of notary): _____

On this date: _____

Notary signs here

Date Notary's Commission Expires

PS-09

8/08

Plaintiff's Testimony

(No minor children, no assets or debts for the Court to divide)

Case Number:

In the Circuit Court of (county): _____ County, Alabama

In re the marriage of:

_____ v. _____
 (You are the Plaintiff - the person filing for divorce) (Your spouse is the Defendant)

Plaintiff's Information

Mailing address: _____
 City, state, zip: _____
 Date of birth (mm/dd/yyyy): _____
 Phone #: () _____

Defendant's Information

Home address: _____
 City, state, zip: _____
 Date of birth (mm/dd/yyyy): _____
 Phone #: () _____

- ① I am the Plaintiff in this case. I agree that the Court can make decisions in this case.
- ② I declare that the following information is true:
 - The Defendant is age 19 or older.
 - I have resided in Alabama for the last 6 months.
 - The Defendant and I were married on (date): _____
 (city and state): _____
 - The Defendant and I no longer live together. We separated on (date): _____
 - We last lived together in (county and state): _____
 - The Defendant and I have no children under the age of 19 from this marriage, and the Wife is not pregnant.
 - The Defendant is not now on active duty in the military.
 - The Defendant and I can no longer get along nor live together. We argue and cannot get along.
 - There has been an irreparable breakdown of the marriage and further attempts at reconciliation are impractical or futile and not in our best interests. The Defendant and I are no longer able to communicate with one another and are pursuing separate lives.
- ③ I swear that all of the information I provided above is complete and accurate. I understand that if I lie on this form, I can be fined and sent to jail.

Do not sign until you ask the court clerk about your Court's procedures. If your Court says you must testify in court, you can use this form as an outline of what you will say.

▶ _____ Date: _____

Notary fills out below—

Sworn to and subscribed before me, the undersigned authority,

By (Print name of notary/clerk): _____

On this date: _____

Notary's seal here

▶ _____
Notary signs here

_____/_____/_____
Date notary's commission expires

IN THE CIRCUIT COURT OF LAWRENCE COUNTY, ALABAMA

_____)	
PLAINTIFF,)	
)	
VS.)	CASE NO.: _____
)	
_____)	
DEFENDANT.)	

**ACCEPTANCE OF SERVICE OF PROCESS,
ANSWER, AND WAIVER OF DEFENDANT**

Acceptance of Service

COMES NOW the unrepresented Defendant, in his/her own person, and accepts the service of the Complaint for Divorce of the Plaintiff in the above-styled cause, the same as if regularly served in the manner permitted by law, and submits to the jurisdiction of this Honorable Court. The Defendant submits to the jurisdiction of this Court as if he had been served personally.

Answer

COMES NOW the unrepresented Defendant, in his/her own person, and for answer to the Complaint for Divorce, the defendant:

1. Admits all allegations as to age, residence, and marriage.
2. The Defendant neither admits nor denies the allegations contained in the Complaint, but demands strict proof.
3. My spouse and I have entered into an agreement and I ask that it be included in any decree of divorce.

Waiver and Agreement for Taking Testimony

COMES NOW the unrepresented Defendant, in his/her own person, and further waives notice as to the filing of interrogatories and the right to cross-examine the same. The Defendant further consents for depositions or testimony to be taken by affidavit or affidavits before any Notary Public or other officer authorized by law to administer oaths. The Defendant also hereby consents for this cause to proceed to judgment and final decree without further or other notice to the Defendant.

Respectfully Submitted,

Defendant

STATE OF ALABAMA)
LAWRENCE COUNTY)

The Defendant being first duly sworn, deposes and says on oath as follows:

1. That I have read the foregoing document, and that I fully understand the same.
2. That I have no reservations about signing the foregoing document.
3. That I have signed the foregoing document voluntarily and freely without being influenced by duress, coercion, or undue influence from any person or source whatsoever.

Further affiant said not.

Defendant

STATE OF ALABAMA)
LAWRENCE COUNTY)

I, the undersigned authority, a notary public in and for said county and state, hereby certify that _____, who is known to me, signed the forgoing Acceptance of Service, Answer, and Waiver and acknowledged before me on this day that, being informed of the contents of the same, did execute the same voluntarily on the ____ day of _____, 2019.

Notary Public
My commission expires: _____

AGREEMENT OF THE PARTIES

This agreement is made between _____ (name of Plaintiff) and _____ (name of Defendant), Husband and Wife, to determine all property rights, including property and debt distribution, between them.

We have agreed to the following:

1. Marriage:

We were married on _____ (date) in _____ (city and state).

2. Separation: (check one below)

____ We are now living separate and apart.

____ We desire immediate separation and intend to separate.

3. Grounds for divorce:

We agree to be divorced on the grounds of incompatibility and irretrievable breakdown of our marriage. Irreconcilable differences have arisen between us.

4. Children: (minor children are any children under the age of 19)

____ We do not have any children together or our children are no longer minors.

____ We have a child/children together. The names and dates of birth of the child(ren) is/are as follows:

Name:

Date of Birth:

_____	_____
_____	_____
_____	_____
_____	_____

5. Custody, Visitation, and Child Support:

_____ We do not have children together, so there is no need for a custody, visitation, or child support order.

_____ We have a child/children together. We have reached an agreement about custody, visitation, and child support. It is set out on the attached "Agreement Regarding Custody, Child Support, and Visitation."

6. We agree that neither of us will pay alimony to the other.

7. Complete Settlement: We intend this agreement to be a full and complete settlement of our rights, one to another, as to the duty of support to one another now or in the future, any rights of inheritance from one another, and any rights to any interest in or to any property of the other, whether that property was acquired before, during, or after marriage, or other rights or benefits that may arise from our marital relationship.

8. We agree not to harass or annoy one another.

9. SPOUSAL SUPPORT: (*choose one, and both parties must initial beside the selected choice*)

_____ Neither party shall pay to the other any amount, either in installments or in a lump sum, for spousal support. This provision may not be modified.

_____ The _____ husband or _____ wife (*check one*) shall pay to the other party the sum of \$ _____ on a _____ weekly or _____ monthly (*check one*) basis for spousal support. This obligation will terminate on the death, remarriage, or cohabitation of the non-paying party.

_____ Our agreement on spousal support is as follows: _____

10. REAL ESTATE: (*choose one, and both parties must initial beside the selected choice*)

_____ We do not jointly own any real estate. There is no real estate to divide.

_____ We jointly own real estate located at (*address*) _____

_____. The parties agree as follows regarding the real estate (*include whether it will be sold or whether one party will keep it; if to be sold, what will happen to any proceeds; if one party is keeping it, state the agreement regarding whether refinancing is required; whether any payment is due to the other for equity in the house; whether one party has to sign a deed over to the other; who will make payments on the mortgage, etc.*):

11. DIVISION OF PERSONAL PROPERTY (*choose one, and both parties must initial beside the selected choice*)

_____ Each party shall keep any household goods, furnishings, and personal property now in that party's possession, free of any claim of the other.

_____ Except as listed here, each party shall keep the household goods, furnishings, and personal property that is in that party's current possession. The following items need to be delivered to the party not now in possession (*list items and who will deliver to whom and when the delivery will occur*):

12. BANK ACCOUNTS AND EMPLOYEE BENEFITS: (*choose one, and both parties must initial beside the selected choice*)

_____ Each party shall retain any bank or investment accounts in that party's name, as well as any employee benefits, including pension, retirement, stock ownership, 401(k) or other employer plans, free and clear of any claim of the other party. There are no joint accounts to be closed and no accounts to be divided.

_____ The parties agree to divide their bank accounts and employee benefits as follows (*include details of how the accounts, and which accounts, will be divided*).

13. DIVISION OF DEBT (*choose one, and both parties must initial beside the selected choice*)

_____ Each party shall pay the debts in that party's own name and neither party shall incur any debt in the name of or on the credit of the other party. There are no joint debts to be divided.

_____ The parties have joint debts (debts owed in both names) and we have the following agreement (*include the name of the lender, the account number, and who will pay the debt*):

14. MOTOR VEHICLES (*choose one, and both parties must initial beside the selected choice*)

_____ Each party shall retain title to and possession of all motor vehicles, boats, campers and other titled or registered conveyances, now titled or registered in that party's name. The party retaining the vehicle shall be solely responsible for any debt on or expenses regarding that vehicle and shall hold the other harmless from liability.

_____ Except as listed here, each party shall retain title to and possession of all motor vehicles, boats, campers and other titled or registered conveyances. The party retaining the vehicle shall be solely responsible for any debt on or expenses regarding that vehicle and shall hold the other harmless from liability. The following agreement is made regarding vehicles (*identify any vehicle that needs to be transferred and who is responsible for any debt*):

The _____ (*year, make model*) shall be the property of the _____ (*husband or wife*) and the _____ (*husband or wife*) shall be responsible for payment of the debt on that vehicle.

The _____ (*year, make model*) shall be the property of the _____ (*husband or wife*) and the _____ (*husband or wife*) shall be responsible for payment of the debt on that vehicle.

Other agreement regarding vehicles:

15. We have made the following other agreements: *(if none, write "none")*

Signature page for Agreement of the Parties

Signatures must be notarized.

I AGREE TO THE SETTLEMENT AGREEMENT ON THE PREVIOUS PAGE(S).

HUSBAND

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF
_____, _____.

NOTARY PUBLIC SIGNATURE

NOTARY PUBLIC NAME (PRINTED)

.....
I AGREE TO THE SETTLEMENT AGREEMENT ON THE PREVIOUS PAGE(S).

WIFE

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF
_____, _____.

NOTARY PUBLIC SIGNATURE

NOTARY PUBLIC NAME (PRINTED)

Appendix to Rule 32.1
DOMESTIC RELATIONS/CHILD SUPPORT INFORMATION
SHEET

Case Number

IN THE _____ COURT OF _____, ALABAMA
(Circuit or District) (Name of County)

Plaintiff

v.

Defendant

Information Concerning the Parties:

Plaintiff (Mother, Father, Other _____) or
Other party (Specify) (_____)

Defendant (Mother, Father, Other _____) or
Other party (Specify) (_____)

Address (including city, state, and zip code):

Address (including city, state, and zip code):

Email Address: _____

Email Address: _____

Cell Phone #: _____

Cell Phone #: _____

Cell Phone Service Provider: _____

Cell Phone Service Provider: _____

Last four numbers of Social Security No.: _____ Date of Birth: _____

Last four numbers of Social Security No.: _____ Date of Birth: _____

***_**_

***_**_

Sex: _____

Sex: _____

Place of Employment (if applicable) and Address of
Employer (including city, state, and zip code):

Place of Employment (if applicable) and Address of
Employer (including city, state, and zip code):

Work Telephone No: _____

Work Telephone No: _____

Are there minor children under the age of 19 who are subject to this action? Yes No

If you marked yes, you must complete the following information.

Information Concerning the Minor Child(ren):

Name(s)	Address(es)	Sex(es)	Date(s) of Birth	Last four numbers of Social Security Number(s)
_____	_____	_____	_____	***_**_
_____	_____	_____	_____	***_**_
_____	_____	_____	_____	***_**_
_____	_____	_____	_____	***_**_

THE CHILD SUPPORT REFORM ACT OF 1997, CODIFIED AT § 30-3-190 ET SEQ., ALA. CODE 1975, REQUIRES THAT THE DEPARTMENT OF HUMAN RESOURCES MAINTAIN THE ABOVE INFORMATION IN THE RECORD FOR ALL PARTIES IN DOMESTIC RELATIONS, SUPPORT, OR PATERNITY ACTIONS. THIS INCLUDES GRANDPARENTS OR OTHERS WHO MAY EITHER INITIATE AN ACTION OR INTERVENE IN AN EXISTING ACTION.

Completed By _____ Date Completed: _____

(Print Name)

Daytime Phone No.: _____

ALABAMA

CERTIFICATE OF DIVORCE

TYPE IN PERMANENT
DARK INK

State File Number **101**

Petitioner's Representative must file this form with the Circuit Court at the time the petition is filed.						1. COUNTY OF DECREE
SPOUSE 1	2. SPOUSE 1 NAME First Middle Last (Print last name all capitals) Suffix (Sr, Jr, etc.)		3. LAST NAME PRIOR TO FIRST MARRIAGE			
	4. DATE OF BIRTH (Month, Day, Year)		5. SEX (Male or Female)		6. RACE (Specify American Indian, Black, White, etc.)	
	7. USUAL RESIDENCE - STATE		8. COUNTY		9. CITY - TOWN OR LOCATION	
	10. ADDRESS - Street and Number or RFD Number			Zip Code		11. NUMBER OF THIS MARRIAGE (First, Second, etc.)
SPOUSE 2	12. SPOUSE 2 NAME First Middle Last (Print last name all capitals) Suffix (Sr, Jr, etc.)		13. LAST NAME PRIOR TO FIRST MARRIAGE			
	14. DATE OF BIRTH (Month, Day, Year)		15. SEX (Male or Female)		16. RACE (Specify American Indian, Black, White, etc.)	
	17. USUAL RESIDENCE - STATE		18. COUNTY		19. CITY - TOWN OR LOCATION	
	20. ADDRESS - Street and Number or RFD Number			Zip Code		21. NUMBER OF THIS MARRIAGE (First, Second, etc.)
MARRIAGE	22. Give the total number of children for whom custody was determined and indicate the number awarded to each party. Enter a "0" for the total if the custody of <u>no children under 18</u> was subject to this action.				23. NUMBER OF CHILDREN UNDER 18 IN THIS HOUSEHOLD AS OF THE DATE IN ITEM 24 (Enter "0" if no children)	
	____ Spouse 1 ____ Joint ____ Spouse 2 ____ Other ____ Total Children/Custody was Determined		24. DATE COUPLE SEPARATED (Month, Day, Year)			
	25. PLACE OF THIS MARRIAGE (City, County, State)		26. DATE OF THIS MARRIAGE (Month, Day, Year)		27. PETITIONER <input type="checkbox"/> Spouse 1 <input type="checkbox"/> Spouse 2 <input type="checkbox"/> Both <input type="checkbox"/> Other, Specify _____	
	28. PETITIONER'S ATTORNEY OR REPRESENTATIVE (Type)			29. ADDRESS (Street and Number or RFD Number, City, State, Zip Code)		
DECREE	30. TYPE OF DECREE (Specify Divorce, Annulment, etc.)		31. DATE OF FINAL DECREE (Month, Day, Year)		32. DECREE AWARDED TO <input type="checkbox"/> Spouse 1 <input type="checkbox"/> Spouse 2 <input type="checkbox"/> Both	
					CIRCUIT	
OFFICIAL	35. SIGNATURE OF OFFICIAL			36. TITLE OF OFFICIAL		37. TRIAL DOCKET NUMBER

CIRCUIT CLERK MUST MAIL THIS REPORT BY THE FIFTH (5TH) OF EACH MONTH TO: CENTER FOR HEALTH STATISTICS, P.O. BOX 5618, MONTGOMERY, AL 36103 - 5618

ADPH- HS-18 / Rev. 04-06-20

INFORMATION BELOW WILL NOT APPEAR ON CERTIFIED COPIES

38. SPOUSE 1 SOCIAL SECURITY NUMBER -----	39. EDUCATION (Specify ONLY highest grade completed) Elementary or High School (0 - 12) College (1 - 4 or 5+)
--	---

40. SPOUSE 2 SOCIAL SECURITY NUMBER -----	41. EDUCATION (Specify ONLY highest grade completed) Elementary or High School (0 - 12) College (1 - 4 or 5+)
--	---

AGREEMENT REGARDING CUSTODY, CHILD SUPPORT, AND VISITATION

This agreement is made between _____ (name of Plaintiff) and _____ (name of Defendant), about the custody of our child(ren).

We have agreed to the following:

(1) We have a child/children together. The names and dates of birth of the child(ren) is/are as follows:

Name:

Date of Birth:

_____	_____
_____	_____
_____	_____
_____	_____

(2) Which party will have legal custody of the child?

- Husband
- Wife
- Joint

(3) Which party will have physical custody of the child?

- Husband
- Wife
- Joint

(4) What is the agreement for a visitation schedule?

We want the Standard Visitation Schedule for Lawrence County to be entered

Our agreement is: _____

(5) What have you agreed upon about child support?

- The _____ will pay child support as directed by *Rule 32* Guidelines.
 - That amount is \$ _____ per month.
 - I need the Court to figure out the amount and I have provided a Form CS-41 for each of us.

- We have decided on a different amount of child support. The _____ will pay \$ _____ dollars per month for child support. We are not going by the *Rule 32* Guidelines because:

- No child support will be paid by _____ because (*list the reasons*):

NOTE: *** You MUST attach the following forms to this agreement. Your agreement will not be approved without these forms. Check that you have completed and attached them:

- CS-41 Income Statement for the father
- CS-41 Income Statement for the mother
- CS-42 Child Support Guidelines worksheet
- CS-43 Child Support Notice of Compliance form
- CS-47 Child Support Information Sheet

Signature page for

AGREEMENT REGARDING CUSTODY, CHILD SUPPORT, AND VISITATION

Signatures must be notarized.

I AGREE TO THE SETTLEMENT AGREEMENT ON THE PREVIOUS PAGE(S).

HUSBAND

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____,
_____.

NOTARY PUBLIC SIGNATURE

NOTARY PUBLIC NAME (PRINTED)

.....
I AGREE TO THE SETTLEMENT AGREEMENT ON THE PREVIOUS PAGE(S).

WIFE

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____,
_____.

NOTARY PUBLIC SIGNATURE

NOTARY PUBLIC NAME (PRINTED)

CHILD-SUPPORT-OBLIGATION INCOME STATEMENT/AFFIDAVIT

Case Number _____

IN THE _____ COURT OF _____ COUNTY, ALABAMA
(Circuit or District) (Name of County)

Plaintiff _____ v. Defendant _____

AFFIDAVIT

I, _____, being duly sworn upon my oath, state as follows :
(Name of Affiant)

1. I am the Plaintiff Defendant Other (please specify): _____ in the above matter.
My Social Security number is: XXX-XX-X _____ LAST THREE (3) DIGITS ONLY

2. I am currently employed. My employer's name and address are:

not currently employed.
My last employer's name and address are: _____

Last position title: _____

Average monthly salary in the last year of employment: \$ _____

3. My monthly gross income includes:

(For example of income that must be included, see back of this form. If income varies by month, enter the estimated average monthly gross income.)

Employment income	\$ _____
Self-employment income	\$ _____
Other employment-related income	\$ _____
Other non-employment-related income	\$ _____
Total	\$ _____

4. I incur the following amount monthly for work-related child-care: \$ _____
(if none, write "None")

5. The child(ren) of the parties is/are

- not covered by health-care coverage from me and/or my employer. Health-care coverage is available at a cost of \$ _____ per month.
- covered by Medicaid or other public health-care coverage at no cost to me.
- covered by health-care coverage, and (1) I pay \$ _____ each month, or that amount is paid on my behalf each month by my _____, for the family policy coverage under which the child(ren) is/are covered; and (2) the total number of persons covered under that policy is _____.

The pro rata portion of the health-care coverage cost attributable to the child or children who are the subject of the support order (which shall be calculated by dividing the total health-care coverage cost actually paid by, or on behalf of, the parent ordered to provide the coverage by the total number of persons (adult and/or children) covered and then multiplying the result by the number of children who are the subject of the support order) is the sum of \$ _____.

The health-care-coverage company's name and address are: _____

6. I pay the following total amount for child support alimony in [a] prior case(s) as follows:
[List case number(s) and county(ies) and state(s) here]:

_____ \$ _____
(if none, write "None")

I understand that I will be required to maintain all income documentation used in preparing this Income Statement/Affidavit (including my most recent income-tax return) and that such documentation shall be made available as directed by the court. I also understand that any intentional falsification of the information presented in this Income Statement/Affidavit may subject me to the penalties of perjury.

Sworn to and subscribed before me this _____ day of _____, _____ Affiant

Notary/Clerk

CHILD-SUPPORT-OBLIGATION INCOME STATEMENT/AFFIDAVIT

Case Number _____

IN THE _____ COURT OF _____ COUNTY, ALABAMA
(Circuit or District) (Name of County)

Plaintiff _____ v. Defendant _____

AFFIDAVIT

I, _____, being duly sworn upon my oath, state as follows:
(Name of Affiant)

1. I am the Plaintiff Defendant Other (please specify): _____ in the above matter.
My Social Security number is: XXX-XX-X _____ LAST THREE (3) DIGITS ONLY

2. I am currently employed. My employer's name and address are:

not currently employed.

My last employer's name and address are: _____

Last position title: _____

Average monthly salary in the last year of employment: \$ _____

3. My monthly gross income includes:

(For example of income that must be included, see back of this form. If income varies by month, enter the estimated average monthly gross income.)

Employment income	\$ _____
Self-employment income	\$ _____
Other employment-related income	\$ _____
Other non-employment-related income	\$ _____
Total	\$ _____

4. I incur the following amount monthly for work-related child-care: \$ _____
(if none, write "None")

5. The child(ren) of the parties is/are

- not covered by health-care coverage from me and/or my employer. Health-care coverage is available at a cost of \$ _____ per month.
- covered by Medicaid or other public health-care coverage at no cost to me.
- covered by health-care coverage, and (1) I pay \$ _____ each month, or that amount is paid on my behalf each month by my _____, for the family policy coverage under which the child(ren) is/are covered; and (2) the total number of persons covered under that policy is _____.

The pro rata portion of the health-care coverage cost attributable to the child or children who are the subject of the support order (which shall be calculated by dividing the total health-care coverage cost actually paid by, or on behalf of, the parent ordered to provide the coverage by the total number of persons (adult and/or children) covered and then multiplying the result by the number of children who are the subject of the support order) is the sum of \$ _____.

The health-care-coverage company's name and address are: _____

6. I pay the following total amount for child support alimony in [a] prior case(s) as follows:

[List case number(s) and county(ies) and state(s) here]:
_____ \$ _____
(if none, write "None")

I understand that I will be required to maintain all income documentation used in preparing this Income Statement/Affidavit (including my most recent income-tax return) and that such documentation shall be made available as directed by the court. I also understand that any intentional falsification of the information presented in this Income Statement/Affidavit may subject me to the penalties of perjury.

Sworn to and subscribed before me this _____ day of _____, _____ Affiant

Notary/Clerk

EXAMPLES OF INCOME THAT MUST BE INCLUDED IN YOUR GROSS MONTHLY INCOME

1. Employment Income – shall include, but not be limited to, salary, wages, bonuses, commissions, severance pay, worker's compensation, pension income, unemployment insurance, disability insurance, and Social Security benefits.
2. Self-Employment Income – shall include, but not be limited to, income from self-employment, rent, royalties, proprietorship of a business, or joint ownership of a partnership or closely held corporation. "Gross income" means gross receipts minus ordinary and necessary expenses required to produce this income.
3. Other Employment-Related Income – shall include, but not be limited to, the average monthly value of any expense reimbursements or in-kind payments received in the course of employment that are significant and reduce personal living expenses, such as a furnished automobile, a clothing allowance, and a housing allowance.
4. Other Non-Employment-Related Income – shall include, but not be limited to, dividends, interest, annuities, capital gains, gifts, prizes, and preexisting periodic alimony.

RULE 32, ALABAMA RULES OF JUDICIAL ADMINISTRATION, PROVIDES THE FOLLOWING DEFINITIONS:

Income. For purposes of the guidelines specified in this Rule, "income" means the actual gross income of a parent, if the parent is employed to full capacity, or if the parent is unemployed or underemployed, then it means the actual gross income the parent has the ability to earn.

Gross Income.

"Gross income" includes income from any source, and includes, but is not limited to, income from salaries, wages, commissions, bonuses, dividends, severance pay, pensions, interest, trust income, annuities, capital gains, Social Security benefits, Veteran's benefits, workers' compensation benefits, unemployment-insurance benefits, disability-insurance benefits, gifts, prizes, and preexisting periodic alimony.

"Gross income" does not include child support received for other children or benefits received from means-tested public-assistance programs, including, but not limited to, Temporary Assistance for Needy Families, Supplemental Security Income, food stamps, and general assistance.

Self-employment Income.

For income from self-employment, rent, royalties, proprietorship of business, or joint ownership of a partnership or closely held corporation, "gross income" means gross receipts minus ordinary and necessary expenses required to produce such income, as allowed by the Internal Revenue Service, with the exceptions noted in Rule 32 (B)(3)(b).

Under those exceptions, "ordinary and necessary expenses" does not include amounts allowable by the Internal Revenue Service for the accelerated component of depreciation expenses, investment tax credits, or any other business expenses determined by the court to be inappropriate for determining gross income for purposes of calculating child support.

Other Income. Expense reimbursements or in-kind payments received by a parent in the course of employment of self-employment or operation of a business shall be counted as income if they are significant and reduce personal living expenses.

CHILD SUPPORT GUIDELINES

Case Number

IN THE _____ COURT OF _____ COUNTY, ALABAMA
 (Circuit or District) (Name of County)

_____ v. _____
 Plaintiff Defendant

Children	Date of Birth	Children	Date of Birth

Number of Children

Line	Item	Number of Children		
		Plaintiff	Defendant	Combined
1	MONTHLY GROSS INCOME	\$	\$	\$ 0
1a	Minus Preexisting Child Support Payments	-	-	- 0
1b	Minus Preexisting Periodic Alimony Payments	-	-	- 0
2	MONTHLY ADJUSTED GROSS INCOME (Line 1 - Line 1a - Line 1b)	\$	\$	\$
3	PERCENTAGE SHARE OF INCOME (Income on Line 2 divided by Combined Income)	0%	0%	100%
4	BASIC CHILD SUPPORT OBLIGATION (Apply Line 2 Combined to Schedule of Basic Child Support Obligations)			\$ 0
5	WORK-RELATED CHILD-CARE COSTS (Paid by Either Parent)	\$	\$	+ 0
6	HEALTH-CARE-COVERAGE COSTS (Paid by Either Parent)	\$	\$	+ 0
7	TOTAL CHILD-SUPPORT OBLIGATION (Combined Line 4 + Line 5 + Line 6)	0	0	\$ 0
8	EACH PARENT'S CHILD SUPPORT OBLIGATION (Line 3 x Line 7)	\$	\$	
9	TOTAL COSTS PAID BY EACH PARENT (Line 5 + Line 6)	-	-	
10	EACH PARENT'S ADJUSTED CHILD-SUPPORT OBLIGATION (Line 8 - Line 9. If less than \$0, enter \$0.)	\$	\$	
	Self-Support Reserve (SSR)			
11	INCOME AVAILABLE AFTER SSR (Line 2 - SSR of \$981. If less than \$0, enter \$0.)	\$	\$	
12	INCOME AVAILABLE FOR SUPPORT (85% of Line 11. If less than \$50, enter \$50 minimum obligation.)	\$	\$	
	Recommended Child Support Order			
13	RECOMMENDED CHILD-SUPPORT ORDER (Lesser of Lines 10 and 12)	\$	\$	

Comments, Calculations, or Rebuttals to Guidelines:

Prepared By:

Date:

**CHILD-SUPPORT GUIDELINES
NOTICE OF COMPLIANCE**

Case Number

Form CS-43 Rev. 7/2019

IN THE _____ COURT OF _____ COUNTY, ALABAMA
(Circuit or District) (Name of County)

Plaintiff _____ v. _____ Defendant

Based upon the income and expenditures supplied by parties in Form CS-41, "Child-Support Obligation Income Statement/Affidavit," the child-support guidelines, as set out in Rule 32, Alabama Rules of Judicial Administration, have been followed and applied.

The child-support guidelines, as set out in Rule 32, Alabama Rules of Judicial Administration, have not been followed and applied as they would be unjust or inappropriate because of the following reasons:

The amount of support required under the child support guidelines would be \$ _____.

Date: _____

Date: _____

Signature of Plaintiff

Signature of Defendant

Signature of Plaintiff's Attorney

Signature of Defendant's Attorney

Address of Plaintiff or Plaintiff's Attorney

Address of Defendant or Defendant's Attorney

Telephone No. of Plaintiff or Plaintiff's Attorney

Telephone No. of Defendant or Defendant's Attorney