

# Agenda

## Committee on Resources for Self-represented Parties

August 8, 2008  
12:00 to 1:30 p.m.

Administrative Office of the Courts  
Scott M. Matheson Courthouse  
450 South State Street  
Judicial Council Room, Suite N31

Approval of minutes	Tab 1	Judge John Baxter
Motion for Temporary Order	Tab 2	Tim Shea
Delegation of Powers by a Parent	Tab 3	Mary Jane Ciccarello
Voluntary Relinquishment of Parental Rights	Tab 4	Mary Jane Ciccarello

**Committee Web Page:** <http://www.utcourts.gov/committees/ProSe/>

**Meeting Schedule:** Matheson Courthouse, 12:00 to 1:30, Judicial Council Room

October 10, 2008  
December 12, 2008  
February 13, 2009  
April 10, 2009  
June 12, 2009  
August 14, 2009  
October 9, 2009  
December 11, 2009

# Tab 1

**STANDING COMMITTEE ON  
RESOURCES FOR SELF-REPRESENTED PARTIES  
Meeting Minutes**

**June 13, 2008  
Matheson Courthouse  
Salt Lake City, Utah**

**Members Present:** Hon. John L. Baxter, Chair; Fred Anderson; Prof. James H. Backman; Pat Bartholomew; Mary Jane Ciccarello; Hon. Christine S. Decker; Rep. Neil Hansen; Christine James; Robert Jeffs; Jay Kessler; Jose Lazaro; Christina Micken; Hon. Rodney Page; Stewart Ralphs; Hon. James Shumate; Prof. Linda Smith; Jessica Van Buren.

**Members Excused:** Prof. James Backman; Joe Derring.

**Staff Present:** Marianne O'Brien; Tim Shea; Carolyn Carpenter

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**Welcome and Review of Minutes**

Judge Baxter welcomed all present. The minutes of 4/11/08 were approved as prepared by acclamation.

**Introduction of Christina Micken**

Judge Baxter introduced Christina Micken. Ms. Micken is a family law representative on this committee, and a new member. The committee members introduced themselves to Ms. Micken.

**Report on Self Help Conference**

Mary Jane Ciccarello attended the ABA-NLADA Equal Justice Conference and preconference session on self-represented litigants in Minneapolis. Ms. Ciccarello gave an overview of what she learned about three court-based self-help programs in Wisconsin, Minnesota, and New York City.

Ms. Ciccarello indicated that Minnesota's program is similar to Utah's, and their metropolitan area is similar in size to Salt Lake City, so their program was of special interest. Minnesota is one of the leaders in the nation in access to justice. Minneapolis has an extensive self-help program for Hennepin County that will soon be going statewide. Their self-help call center has 3 attorneys answering phone calls and conducting support work. Their entire program has 7 attorneys and regular volunteers. Almost everything is provided in English, Spanish, French, Somali and Hmong. They have discovered that their computer work stations and direct phone lines are not an essential part of what they are trying to do. It is more important that people have the ability to call in, have access to the forms, and access to a live person. The program is run by a coalition and is part of the state plan.

**Self Help Center budget request**

Tim Shea indicated Judge Baxter will be presenting to the Judicial Council on June 30 on the self-help center. The budget piece of the self-help center will be reviewed today and the committee's recommendation will be presented to the Judicial Council in August, and then ultimately to the state legislature.

Mr. Shea reviewed the results of a survey from those who call the self-help center and were willing to take a survey about their experience. The survey is a sample of people who were able to access the self-help center – nothing is known about those who were unable to get through. It has been estimated that 75% of missed calls eventually get through. Ninety percent are able to get through within 3 days. Most calls fall predominantly in the family law area.

Two-thirds of Ms. Ciccarello's time is spent answering phone calls and the balance in follow up work. A recommendation will be made that rather than the two-thirds to one-third, that she spend half her time for calls and half her time on follow-up work. There are about 10 calls received per day; 40 calls per week, with calls coming in steadily throughout the day. The average time per call is about 15 minutes.

It is estimated that it takes about 845 hours on the phone in the pilot districts, which does not include any time for follow-up work. Ms. Ciccarello is probably spending 24 hours per week on the phone with incoming calls. It is being recommended that she spend 20 hours on phone time and the balance of the time spent on follow-up work.

Mr. Shea indicated that based on the survey results, it is recommended that 4 people be hired to have the self-help center extend statewide. He asked the committee if they should be lawyers or paralegals.

Discussion points:

- The self-help center employees should all be attorneys with experience.
- Getting a para-professional up to speed would require training by a lawyer and supervision by a lawyer.
- Ms. Ciccarello can handle any call that comes in so those hired need to be essentially 4 other Mary Jane Ciccarellos.
- The attorneys in the self-help center in Minnesota do not have support staff and feel the center runs better without support staff because it is not a walk-in center.
- One of the 4 attorneys could also have some managerial duties.

Following discussion, Judge Shumate made a motion that the budget proposal to the Judicial Council ask for four, full time, experienced lawyers for the self-help center. The motion was seconded and carried unanimously.

### **Motion for Temporary Order Forms; Garnishment Forms**

Motion for temporary order forms:

Mr. Shea indicated that he has received some comments, and one of them is regarding the names of children. The motion includes only the initials, and year and month of birth of juveniles. Mr. Shea is developing, along a separate track, a rule of the Judicial Council that states the names and date of birth of minors is private information, so in a public document that requires that private data, there is truncated or redacted data that should be provided instead. The rule is not yet approved.

Linda Smith observed that the motion looks like a motion that works for the person who wants custody and who wants to receive support, but not so well for the person who wants to pay support. The moving party may not be the petitioner. Stewart Ralphs noted that the motion must be party neutral throughout.

Mr. Shea indicated he will review the forms for those things.

Judge Shumate expressed there is not a lot of room in the motion for fine tuning small things that can settle a case.

Ms. Smith observed that inviting gamesmanship into a temporary order situation would not be good. If people have gone to a mediator, have had things written up, let the chips fall where they may because they have taken ownership, but most kids are going to be living with one primary custodian and that person should not be cheated out of the support they need just to be nice.

Mr. Ralphs noted that Legal Services has moved away from sole physical custody unless there are restrictions. By default, there is joint legal custody in most cases. Parties need to discuss major decisions, but do not need to agree on all of them.

Statement supporting a motion - This is in the nature of the memorandum of points and authority, anticipating that a pro se party is not going to make legal arguments but can make statements and reasoned arguments. It is intended that for the 10 or 15 paragraphs on the motion itself, there would be 10 or 15 paragraphs supporting those requests.

Ms. Smith expressed concern that people may come up with reasons why health insurance should be split when the real reason is simply because that is what the law says. Mr. Shea will modify the form.

Financial declaration – There were no changes.

Garnishment forms - The forms are based on forms that have been in use for awhile. There has been some success in simplifying them, but Mr. Shea has not reviewed them since the end of May when the Rules of Civil Procedure Committee met with some legislators who have taken an interest on behalf of garnishees. Garnishees are the employers that are making the withholding, and 95% of the work falls to them. Mr. Shea indicated there are some things that can be done, and there are policy questions and he has not had a chance to review the forms with that in mind. What is approved today is subject to change.

Judge Shumate noted that legislation passed this session on the garnishment issue and he expects the issue will carry forward next year. There is a perception on the part of the legislature that there is a burden being borne by the wrong people.

Following discussion, Stewart Ralphs made a motion to provisionally approve the motion and garnishment forms. The motion was seconded and carried unanimously.

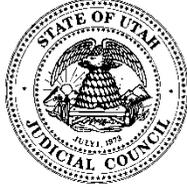
Mr. Shea noted the forms are on the website for review. He will make changes on them based on today's discussion, and further comments from the committee are welcomed.

### **Other Business**

Linda Smith announced that Lowry Snow submitted a request to the Ethics Advisory Opinion Committee about brief advice for pro se litigants and ghost writing. That opinion has been issued but is not on the Bar's website. It is available at CCH and on WestLaw. It is a lengthy opinion with a dissent that approves ghost writing.

The meeting was adjourned.

# Tab 2



## Administrative Office of the Courts

Chief Justice Christine M. Durham  
Utah Supreme Court  
Chair, Utah Judicial Council

### MEMORANDUM

Daniel J. Becker  
State Court Administrator  
Myron K. March  
Deputy Court Administrator

**To:** Committee on Resources for Self-represented Parties  
**From:** Tim Shea *TS*  
**Date:** August 4, 2008  
**Re:** Forms

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We have been busy and have all kinds of forms for you to consider. I have made the changes to the Temporary Order forms that you discussed at the last meeting, and I have added a response, reply and order based on that discussion. There are also a few ancillary documents that will be included in the packet.

For your consideration for the first time are forms for Delegation of Powers by a Parent and Voluntary Relinquishment. Mary Jane reports that in her work at the Self-help Center she has seen a need for these two sets.

I hope that considering so many forms at once is not too tedious.

Encl. Draft Forms

My Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

I am the  Petitioner  
 Respondent  
 Attorney for the  Petitioner  Respondent and my Utah Bar number is \_\_\_\_\_.

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

\_\_\_\_\_  
Petitioner

v.

\_\_\_\_\_  
Respondent

**Motion for Temporary Order**

**Hearing Requested**

Case Number \_\_\_\_\_

Judge \_\_\_\_\_

Commissioner \_\_\_\_\_

**Instructions:** You must attach the following records and forms if they are not already filed with the court.

- Continuation Pages (If any, completing paragraphs that don't have enough space. Write the paragraph number on the continuation page.)
- Statement Supporting Motion for Temporary Order
- Documents supporting any of your claims or arguments
- Parenting Plan (If requesting joint legal custody and/or joint physical custody.)
- Parent Location Form (If child support is requested.)
- Child Support Obligation Worksheet (If child support is requested.)
- Financial Declaration Form (If *any* money payment (child support, alimony, attorney fees, etc.) from the other party is requested, attach the Financial Declaration form and its supporting documents.)
- Order on Motion for Temporary Order

(1) I request that the court enter the temporary orders in the Paragraphs I have marked.

(2)  **Child custody.** Order custody as we agree in the parenting plan. If there is no parenting plan or if we cannot agree on a parenting plan, order the following custody: (Complete (a) or (b).)

(A)  Order that my proposed parenting plan be approved.

OR

(B)  Order sole physical and legal custody of the children as follows:

Child's Initials	Year and Month of Birth	Order custody to:
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

(3)  **Parent-time.** Order parent-time as we agree in the parenting plan. If there is no parenting plan or if we cannot agree on a parenting plan, order the following parent-time: (Complete (a), (b), or (c).)

(A)  Order that my proposed parenting plan be approved

OR

(B)  **Statutory parent-time schedule** (In addition to the records and forms listed at the beginning of this form, attach Utah Code Section 30-3-35 or Section 30-3-35.5.)

OR

(C)  **Other** (Describe the parent-time schedule you want.)

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**(4)  How to exchange children for parent-time.** Order exchange of the children for parent-time as we agree in the parenting plan. If there is no parenting plan or if we cannot agree on a parenting plan, order the following exchange procedure: (Complete (a) or (b).)

(A)  Curbside pick-up and drop-off by  Petitioner  Respondent at the following address:

OR

(B)  Other (Describe the procedure you want to exchange the children.)

**(5)  Child support.** The sole custody worksheet was used to calculate child support.

(A) Order  Petitioner  Respondent to pay \$\_\_\_\_\_ per month for our children. This amount conforms to the Uniform Child Support Guidelines, and it is reasonable and proper under Utah Code Title 78B, Chapter 12, Part 2. (Attach Child Support Obligation Worksheet.)

(B) Petitioner's base child support is \$\_\_\_\_\_ per month. Respondent's base child support is \$\_\_\_\_\_ per month. Except during parent-time, if the living arrangements of a child change from residing with the custodial parent to residing with the non-custodial parent, then the parent the child is not residing with must pay that parent's "base child support" to the parent the child is residing with without the need to modify the child support order.

(C) If approved by court order or written agreement signed by the parties, the base child support should be reduced on a monthly basis  
(i) by 50% for each child who resides with the non-custodial parent for at least 25 of any 30 consecutive days; and  
(ii) by 25% for each child who resides with the non-custodial parent for at least 12 of any 30 consecutive days.

Parent-time with the custodial parent should not be considered an interruption of the consecutive-day requirement for the non-custodial parent.

(D) The obligation should be effective immediately upon entry of the order and last until a final order is entered or until;

(i) a child becomes 18 years of age, or has graduated from high school during the child's normal year of graduation, whichever occurs later; or

(ii) a child dies, marries, becomes a member of the armed forces of the United States, or is emancipated under Utah law.

(E)  (Check only if you are asking for child support for more than one child.) When a child no longer qualifies to receive child support, the base child support for the remaining children shall be automatically adjusted to the base child support in the table for that number of children using the appropriate calculation and worksheet under Utah Code Title 78B, Chapter 12, Part 2.

(Check (F) or (G), whichever is being requested. If requesting direct payments under (G) check the box that qualifies you for direct payments and attach evidence of your claim.)

(F)  I request mandatory income withholding from the salary and wages of the non-custodial parent. Income withholding should apply to existing and future payors. Unless the Office of Recovery Services gives notice that payments should be sent elsewhere, all child support payments should be made to the Office of Recovery Services, P.O. Box 45011, Salt Lake City, UT 84145-011. All administrative fees and costs of income withholding assessed by the Office of Recovery Services should be paid by the non-custodial parent. Child support should be due on or before the first day of each month and delinquent on the first day of the following month.

OR

(G)  I request that child support should be paid directly to the custodial parent. The non-custodial parent has paid other court ordered support on time. (attach evidence of timely payments) Income withholding for this child support would not be in the children's best interest because:

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In addition, the non-custodial parent: (Check the box or boxes that qualify you for direct payments and attach evidence of your claim.)

and the custodial parent have signed the attached written agreement, which provides for a different payment arrangement;

has obtained a bond, deposited money in trust for the children, or made other arrangements to guarantee child support payments for at least 2 months;

has arranged to deposit all child support payments into an account belonging to me; (I will provide the information necessary for the other party to set up direct deposit through his or her employer. Upon receipt of the information, the other party should have his or her employer establish direct deposit to an account of my choice.)

has made arrangements insuring that a reliable and independent record of the date and place of child support payments will be maintained; or

has arranged for electronic transfer of funds on a regular basis.

Child support not paid on or before the due date should be delinquent on the day after the due date. Child support should be due:

one-half on or before the 5th day of each month, and one-half on or before the 20th day of each month.

other (describe)

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(H)  The children are recipients of cash assistance from the state of Utah through the Temporary Aid to Needy Families (TANF) program or Family Employment Program (FEP). If a child receives cash assistance from the state of Utah through the TANF or FEP programs, any agreement by the parties to reduce child support under (5)(B) or (5)(C) should be approved by the Office of Recovery Services.

(I) Each party should notify the other within 10 days of any change in income.

(J) Child support arrearages should be determined by further judicial or administrative process. Any federal or state tax refund or rebate due to the non-custodial parent should be intercepted by the state of Utah and applied to child support arrearages.

**(6)  Child care expenses.** Order both parties to share equally the reasonable child care expenses related to the custodial parent's work or training. The parent who incurs child care expenses should provide to the other parent written verification of the child care provider's expense and identity:

- (A) upon initial engagement of the provider;
- (B) within 30 calendar days after a change in the provider or the expense; and
- (C) upon the request of the other parent.

If the parent incurring the expenses fails to comply with these provisions, the parent should be denied the right to receive credit for the expenses or to recover the other parent's share of the expenses. Immediately after receiving written verification, the other parent should, on a monthly basis, reimburse the parent who incurred the child care expenses one-half of the amount.

(7)  **Health insurance.** Order the  Petitioner  Respondent to maintain health insurance for our minor children. Both parties should share equally:

- (A) the cost of the premium paid by a parent for the children's portion of the insurance; and
- (B) all reasonable and necessary uninsured medical expenses incurred for the children and paid by a parent, including deductibles and co-payments.

The children's portion of the premium should be calculated by dividing the premium amount by the number of people covered by the policy and multiplying the result by the number of minor children of the parties. The parent ordered to maintain insurance should provide written verification of coverage to the other parent and the Office of Recovery Services:

- (D) upon initial enrollment of the children;
- (E) on or before January 2, of each calendar year; and
- (F) upon any change of insurance carrier, premium, or benefits within 30 calendar days after the date that parent knew or should have known of the change.

If the parent ordered to maintain insurance fails to provide written verification of coverage to the other parent or to the Office of Recovery Services, or if the parent incurring medical expenses fails to provide written verification of the cost and payment of the expenses to the other parent within 30 days of payment, that parent may be denied the right to receive credit for the expenses or to recover the other parent's share of the expenses. The parent receiving written verification should reimburse the parent who incurred the medical expenses one-half of the amount within 30 days after receiving the written verification.

(8)  **Alimony.** (Complete only if you are or were married to the other party.) I am or was married to the other party, and I request that the court order the

<input type="checkbox"/> Petitioner	to pay \$ _____ each month for alimony to	<input type="checkbox"/> Respondent
<input type="checkbox"/> Respondent		<input type="checkbox"/> Petitioner

(9)  **Attorney fees.** Order the other party to pay \$ \_\_\_\_\_ to the lawyer retained by me.

(10)  **Payment of bills and debts.** (Such as, mortgage or rent, credit cards, utilities, household expenses, tuition, medical expenses, car payments, etc.)

Order me to pay the following bills and debts:

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Order the other party to pay the following bills and debts:

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(11)  **Possession of property.** Award each party possession of his or her essential personal belongings, and divide the following property needed for daily living as indicated. (List only major items, such as house, car, appliances, equipment, etc.)

I should have

The following essential personal belongings:

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The following property needed for daily living:

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The other party should have

The following essential personal belongings:

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\_\_\_\_\_  
The following property needed for daily living:  
\_\_\_\_\_

Describe when, where and how each party should take possession of the property.

Petitioner:  
\_\_\_\_\_  
\_\_\_\_\_

Respondent:  
\_\_\_\_\_  
\_\_\_\_\_

I request that neither party be permitted to sell, transfer or dispose of any property without a court order or written agreement signed by both parties.

(12)  **Other.** I request that the court enter the following orders:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**(13) Hearing.**

- I request a hearing on this motion.
- I do not request a hearing on this motion.

(14)  **Expedited Hearing.** I request a hearing on this motion as soon as possible because:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I declare under criminal penalty of Utah Code Section 78B-5-705 that this Motion for Temporary Order is true and correct.

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_  
 Typed or printed name \_\_\_\_\_

<b>Certificate of Service</b>			
I certify that I served a copy of this Motion for Temporary Order on the following people.			
Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_  
 Typed or printed name \_\_\_\_\_

My Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

I am the  Petitioner  
 Respondent  
 Attorney for the  Petitioner  Respondent and my Utah Bar number  
is \_\_\_\_\_

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

\_\_\_\_\_  
Petitioner

v.

\_\_\_\_\_  
Respondent

**Statement Supporting Motion for  
Temporary Order**

Case Number \_\_\_\_\_

Judge \_\_\_\_\_

Commissioner \_\_\_\_\_

(1)  **I declare** under criminal penalty of Utah Code Section 78B-5-705 that this  
Statement Supporting my Motion for Temporary Order is true and correct.

(2)  **Child custody.** It is in the children’s best interest that the custody order I have  
requested in Paragraph (2) of the Motion be granted because:

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

(3)  **Parent-time.** It is in the children’s best interest that the parent-time requested in Paragraph (3) of the Motion be granted because:

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(4)  **How to exchange children for parent-time.** It is in the children’s best interest that the exchange for parent-time requested in Paragraph (4) of the Motion be granted because:

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(5)  **Child support.** The child support requested in Paragraph (5) of the Motion is based on our income or is imputed based on our work history. It agrees with the Child Support Obligation Worksheet attached to the Motion for Temporary Order.

(6)  **Child care expenses.** I request that the court order that day-care expenses be paid as described in Paragraph (6) of the Motion because:

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(7)  **Health insurance.** I request that the court order that medical and dental insurance be provided as described in Paragraph (7) of the Motion because the law requires that the parents share equally the cost of the premium paid by a parent for the children's portion of the insurance, and all reasonable and necessary uninsured medical expenses incurred for the children and paid by a parent, including deductibles and co-payments. And because:

- the insurance is available to  Petitioner  Respondent;
- the cost of the insurance is reasonable; and
- the custodial parent prefers this arrangement.

(8)  **Alimony.** I request that the court order that alimony be paid as described in Paragraph (8) of the Motion because: (Complete only if you are or were married to the other party.)

My ability to support myself each month is \$\_\_\_\_\_ based on (specify what information is used to calculate this figure and attach verification).

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My monthly needs are \$\_\_\_\_\_ (refer to budget statement in attached financial declaration).

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The other party's monthly needs are \$\_\_\_\_\_ (refer to budget statement in attached financial declaration).

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The other party's ability to pay alimony is \$\_\_\_\_\_ based on (specify what information is used to calculated this figure and attach verification).

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Provide any additional information that will help the court decide whether and how much alimony should be paid:

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**(9)**  **Attorney fees.** I request that the court order that attorney fees be paid as described in Paragraph (9) of the Motion because:

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**(10)**  **Payment of bills and debts.** I request that the other party and I pay the bills and debts described in Paragraph (10) because:

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(11)  **Possession of Property.** I request that the possession of property described in Paragraph (11) of the Motion be granted because:

(a) It is fair that each party have his or her essential personal belongings.

(b) Reasons for requesting the division of property shared during the marriage:

(12)  **Other.** I request that the court include the other orders described in Paragraph (12) of the Motion because:

I declare under criminal penalty of Utah Code Section 78B-5-705 that this Statement Supporting Motion for Temporary Order is true and correct.

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

Certificate of Service			
I certify that I served a copy of this Statement Supporting Motion for Temporary Order on the following people.			
Person's Name	Method of Service	Served at this Address	Served on this Date

<b>Certificate of Service</b>			
I certify that I served a copy of this Statement Supporting Motion for Temporary Order on the following people.			
Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_  
 Typed or printed name \_\_\_\_\_

My Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

I am the  Petitioner  
 Respondent  
 Attorney for the  Petitioner  Respondent and my Utah Bar number  
is \_\_\_\_\_

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

Petitioner	<b>Financial Declaration</b>
v.	Case Number _____
Respondent	Judge _____
	Commissioner _____

**Instructions:** You must attach the following records and forms.

- Continuation pages (If any, completing paragraphs that don't have enough space. Write the paragraph number on the continuation page.)
- Records supporting every item listed (Suggested records are listed with each paragraph. You should delete all but the last 4 digits of account numbers.)

**(1) I declare** under criminal penalty of Utah Code Section 78B-5-705 that:

- the information in this Financial Declaration about myself is true and correct;
- the information about the other party is true and correct or is an estimate to the best of my information and belief, and
- I have omitted nothing that is relevant to my financial status.

**(2) Social Security Number.**

The last 4 digits of my Social Security Number are: \_\_\_\_\_.

**(3) Employment Status.**

(A)  I am employed by:

Name of Employer	Doing Business As (DBA)	Address

(B)  I am self employed by:

Name of Employer	Doing Business As (DBA)	Address

(C)  I am unemployed.

**(4) Monthly Income.** (If only one party receives income in a category, enter the amount in that party's column and enter \$0 in the other party's column. Attach evidence of items listed, such as most recent pay stubs, tax returns, W-2 forms, or a work history report from the Department of Workforce Services.)

Petitioner's Income	Source of Income	Respondent's Income
\$	Work (Including self employment, wages, salaries, commissions, bonuses, and tips)	\$
\$	Rental Income	\$
\$	Business Income	\$
\$	Interest and Dividends	\$
\$	Retirement Income (Including pensions, 401(k), IRA, etc.)	\$
\$	Worker's Compensation	\$
\$	Social Security Disability (SSDI and SSI)	\$
\$	Private Disability Insurance	\$
\$	Social Security (Do not include SSDI or SSI)	\$
\$	Unemployment Benefits	\$

Petitioner's Income	Source of Income	Respondent's Income
\$	Education Benefits	\$
\$	Veteran's Benefits	\$
\$	Alimony	\$
\$	Child Support	\$
\$	Payments from Civil Litigation	\$
\$	Victim Restitution	\$
\$	Public Assistance (Including AFDC, welfare, etc.)	\$
\$	Support from household members	\$
\$	Support from non-household members	\$
\$	Other (Describe)	\$
\$	Other (Describe)	\$
\$	Total	\$

I have no income because:

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**(5) Monthly Deductions.** (If only one party has a deduction in a category, enter the amount in that party's column and enter \$0 in the other party's column. Attach evidence of claims, such as most recent pay stubs, tax returns, W-2 forms, or a work history report from the Department of Workforce Services.)

Petitioner's Deductions	Type of Deduction	Respondent's Deductions
\$	Federal Income Tax	\$
\$	State Income Tax	\$
\$	FICA	\$
\$	Health Insurance Premiums	\$
\$	Life Insurance Premiums	\$
\$	Union and other dues	\$
\$	Garnishment or Income Withholding Order	\$
\$	Retirement Deposits (Including pensions, 401(k), IRA, etc.)	\$
\$	Other (Describe)	\$

Petitioner's Deductions	Type of Deduction	Respondent's Deductions
\$	Other (Describe)	\$
\$	Total	\$

**(6) Net Income.**

Petitioner		Respondent
\$	Income (from (4)) minus Deductions (from (5))	\$

**(7) Real Property.** (Attach evidence of items listed, such as mortgage statements, loan documents, etc.)

Property	Mortgage or Lien Holder (Name & Address)	In Whose Name?	Current Value	Amount Owed	Monthly Payments
Home (Address)		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$	\$
Other Real Property (Address)		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$	\$

**(8) Personal Property.** (Attach evidence of items listed, such as receipts, loan documents, etc)

Property (Such as vehicles, boats, trailers, major equipment, etc.)	Lien Holder (Name & Address)	In Whose Name?	Current Value	Amount Owed	Monthly Payments
Vehicle (Year, Make, Model)		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$	\$
Vehicle (Year, Make, Model)		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$	\$

Property (Such as vehicles, boats, trailers, major equipment, etc.)	Lien Holder (Name & Address)	In Whose Name?	Current Value	Amount Owed	Monthly Payments
Other (Describe)		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$	\$
Other (Describe)		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$	\$

**(9) Business interests.**

Business Name	Address & Phone	Nature of Business	Percent Owned By	Current Value	Monthly Payments
			___% Petitioner ___% Respondent	\$	\$
			___% Petitioner ___% Respondent	\$	\$

**(10) Financial Assets.** (Attach evidence of items listed, such as bank statements, contracts, etc.)

Asset	Holder (Name & Address)	In Whose Name?	Current Value
Bank or Credit Union Account Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$
Bank or Credit Union Account Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$
Stocks, Bonds, Securities, Money Market Fund Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$
Stocks, Bonds, Securities, Money Market Fund Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$

Asset	Holder (Name & Address)	In Whose Name?	Current Value
Retirement Account (Pension, 401(k), IRA, etc.) Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$ _____
Retirement Account (Pension, 401(k), IRA, etc.) Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$ _____
Profit Sharing Plan Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$ _____
Profit Sharing Plan Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$ _____
Annuity Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$ _____
Annuity Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$ _____
Money Owed to Parties		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$ _____
Cash		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$ _____
Other (Describe)		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$ _____
Life Insurance Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	Face Value \$ _____ Cash Value \$ _____
Life Insurance Last 4 digits of acct number: _____		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	Face Value \$ _____ Cash Value \$ _____

**(11) Debts.** (Do not include amount owed on property reported in Paragraphs (7) and (8). (Attach evidence of items listed, such as credit card statements, loan documents, leases, bills, etc.)

Debt Owed To (Name & Address)	Purpose of Debt (Such as credit card, cash loan, installment payment, etc.)	In Whose Name?	Amount Owed	Monthly Payments
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Debt Owed To (Name & Address)	Purpose of Debt (Such as credit card, cash loan, installment payment, etc.)	In Whose Name?	Amount Owed	Monthly Payments
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both	\$	\$

**(12) Monthly Expenses.** (If only one party has an expense, enter the amount in that party's column and enter \$0 in the other party's column. Attach evidence of items listed, such as credit card statements, loan documents, leases, bills, receipts, etc.)

Petitioner's Expenses	Monthly Expense	Respondent's Expenses
\$	Rent or mortgage	\$
\$	Food and Household Supplies	\$
\$	Clothing	\$
\$	Transportation (Such as public transportation, automobile payments, insurance, gas, maintenance)	\$
\$	Utilities (Such as electricity, gas, water, sewer, garbage)	\$
\$	Telephone	\$
\$	Credit Card Payments	\$
\$	Alimony	\$
\$	Child Support	\$
\$	Child Care	\$
\$	Education	\$
\$	Health Care Insurance (Excluding premium deductions listed in Paragraph (5))	\$
\$	Health Care Expenses (Excluding insurance listed above or in Paragraph (5))	\$

Petitioner's Expenses	Monthly Expense	Respondent's Expenses
\$	Real Property Taxes	\$
\$	Real Property Insurance	\$
\$	Real Property Maintenance	\$
\$	Other Insurance (Describe)	\$
\$	Entertainment	\$
\$	Laundry and Dry Cleaning	\$
\$	Donations	\$
\$	Gifts	\$
\$	Other (Describe)	\$
\$	Other (Describe)	\$
\$	Total	\$

**(13) Dependents.** Dependents claimed on income tax return. (Attach tax return.)

Name (If person is under 18, use only initials)	Age	Relationship to		Claimed By
		Petitioner	Respondent	
				<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both
				<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both
				<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both
				<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Both

I declare under criminal penalty of Utah Code Section 78B-5-705 that this Financial Declaration is true and correct, to the best of my information and belief, and that I have omitted nothing that is relevant to my financial status.

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_  
 Typed or printed name \_\_\_\_\_

<b>Certificate of Service</b>			
I certify that I served a copy of this Financial Declaration on the following people.			
Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

My Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

I am the  Petitioner  
 Respondent  
 Attorney for the  Petitioner  Respondent and my Utah Bar number is \_\_\_\_\_

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

\_\_\_\_\_  
Petitioner

v.

\_\_\_\_\_  
Respondent

**Statement Opposing Motion for Temporary Order**

**Hearing Requested**

Case Number \_\_\_\_\_

Judge \_\_\_\_\_

Commissioner \_\_\_\_\_

**Instructions:** If you want a temporary order you must file a Motion for Temporary Order. Opposing the other party's motion is not enough. You must attach the following records and forms.

- Continuation pages (If any, completing paragraphs that don't have enough space. Write the paragraph number on the continuation page.)
- Documents supporting any of your claims or arguments

(1)  **I declare** under criminal penalty of Utah Code Section 78B-5-705 that this Statement Supporting my Motion for Temporary Order is true and correct.

(2)  **Child custody.**

I do not oppose Paragraph (2) of the Motion.

I oppose Paragraph (2) of the Motion because:

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**(3)  Parent-time.**

I do not oppose Paragraph (3) of the Motion.

I oppose Paragraph (3) of the Motion because:

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**(4)  How to exchange children for parent-time.**

I do not oppose Paragraph (4) of the Motion.

I oppose Paragraph (4) of the Motion because:

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**(5)  Child support.**

I do not oppose Paragraph (5) of the Motion.

I oppose Paragraph (5) of the Motion because:

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**(6)  Child care expenses.**

I do not oppose Paragraph (6) of the Motion.

I oppose Paragraph (6) of the Motion because:

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**(7)  Health insurance.**

I do not oppose Paragraph (7) of the Motion.

I oppose Paragraph (7) of the Motion because:

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**(8)  Alimony.**

I do not oppose Paragraph (8) of the Motion.

I oppose Paragraph (8) of the Motion because:

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**(9)  Attorney fees.**

I do not oppose Paragraph (9) of the Motion.

I oppose Paragraph (9) of the Motion because:

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**(10)  Payment of bills and debts.**

I do not oppose Paragraph (10) of the Motion.

I oppose Paragraph (10) of the Motion because:

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(11)  **Possession of Property.**

I do not oppose Paragraph (11) of the Motion.

I oppose Paragraph (11) of the Motion because:

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(12)  **Other.**

I do not oppose Paragraph (12) of the Motion.

I oppose Paragraph (12) of the Motion because:

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(13) **Hearing.**

I request a hearing on this motion.

I do not request a hearing on this motion.

(14)  **Expedited Hearing.** I request a hearing on this motion as soon as possible because:

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I declare under criminal penalty of Utah Code Section 78B-5-705 that this Statement Opposing Motion for Temporary Order is true and correct.

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

**Certificate of Service**

I certify that I served a copy of this Statement Opposing Motion for Temporary Order on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

My Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

I am the  Plaintiff/Petitioner  
 Defendant/Respondent  
 Attorney for the  Plaintiff/Petitioner  Defendant/Respondent and my  
Utah Bar number is \_\_\_\_\_

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

_____ Plaintiff/Petitioner  v.  _____ Defendant/Respondent	<p style="text-align: center;"><b>Reply to Statement Opposing Motion for Temporary Order</b></p> Case Number _____  Judge _____  Commissioner _____
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**Instructions:** You may file a Reply to a Statement Opposing Motion for Temporary Order only to disagree with anything new raised in the opposing statement. Attach Continuation pages if needed to complete paragraphs that don't have enough space. Write the paragraph number on the continuation page.

(1) (A) Paragraph number in the Statement Opposing Motion for Temporary Order that you disagree with. \_\_\_\_\_

(B) Statement made by the other party that you disagree with.

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

(C) Explain why you disagree.

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(2) (A) Paragraph number in the Statement Opposing Motion for Temporary Order that you disagree with. \_\_\_\_\_

(B) Statement made by the other party that you disagree with.

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(C) Explain why you disagree.

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I declare under criminal penalty of Utah Code Section 78B-5-705 that this Reply to Statement Opposing Motion for Temporary Order is true and correct.

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_  
Typed or printed name \_\_\_\_\_

**Certificate of Service**

I certify that I served a copy of this Reply to Statement Opposing Motion for Temporary Order on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

My Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
E-mail \_\_\_\_\_

I am the  Plaintiff/Petitioner  
 Defendant/Respondent  
 Attorney for the  Plaintiff/Petitioner  Defendant/Respondent and my  
Utah Bar number is \_\_\_\_\_

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

\_\_\_\_\_  
Plaintiff/Petitioner

v.

\_\_\_\_\_  
Defendant/Respondent

**Request to Submit for Decision**

**Hearing Requested**

Case Number \_\_\_\_\_

Judge \_\_\_\_\_

Commissioner \_\_\_\_\_

- (1) Petitioner's Motion for Temporary Order was served on \_\_\_\_\_ (date).
- (2) A statement in opposition (if any) was served on \_\_\_\_\_ (date).
- (3) A reply to the statement in opposition (if any) was served on \_\_\_\_\_ (date).
- (4) A hearing  has  has not been requested.
- (5)  I request a hearing.  
 I do not request a hearing.
- (6) The motion is now ready for the court to review and issue a decision.

I declare under criminal penalty of Utah Code Section 78B-5-705 that this Request to Submit for Decision is true and correct.

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

<b>Certificate of Service</b>			
I certify that I served a copy of this Request to Submit for Decision on the following people.			
Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

<p>_____ Petitioner</p> <p>v.</p> <p>_____ Respondent</p>	<p><b>Notice of Hearing</b></p> <p>Case Number _____</p> <p>Judge _____</p> <p>Commissioner _____</p>
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To Petitioner and Respondent.

The court has scheduled a hearing on the Motion for Temporary Order at the above court at the following date and time. You should appear and bring with you all relevant evidence and witnesses. You may be represented by a lawyer. **If you fail to appear, an order may be entered against you.**

Date \_\_\_\_\_ Time \_\_\_\_ : \_\_\_\_  a.m.  p.m.

Room \_\_\_\_\_ Judicial Officer \_\_\_\_\_

**Disability Accommodation.** If you need accommodation of a disability, contact the clerk's office at least 5 days before the hearing.

Date \_\_\_\_\_

Sign here ► \_\_\_\_\_

Court Clerk \_\_\_\_\_

<b>Certificate of Service</b>			
I certify that I served a copy of this Notice of Hearing on the following people.			
Person's Name	Method of Service	Served at this Address	Served on this Date
(Petitioner or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Respondent or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_

Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

In the District Court of Utah  
\_\_\_\_\_ Judicial District \_\_\_\_\_ County  
Court Address \_\_\_\_\_

_____ Petitioner  v.  _____ Respondent	<b>Order on Motion for Temporary Order</b>  Case Number _____  Judge _____  Commissioner _____
--	--

**(1) Hearing.**

- There was no hearing on this matter.
- A hearing on this matter was held on \_\_\_\_\_ (date).

Petitioner  was  was not present and  
 was represented by \_\_\_\_\_  was not represented.

Respondent  was  was not present and  
 was represented by \_\_\_\_\_  was not represented.

Having considered the documents filed with the court, the evidence and the arguments, and now being fully informed,

**THE COURT ORDERS:**

**(2)  Custody.** (Check one)

- (A)  The agreed-upon parenting plan is approved.
- (B)  The  Petitioner's  Respondent's parenting plan is approved.
- (C)  Sole physical and legal custody of the children is as follows:

Child's Initials	Year and Month of Birth	Custody to:
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
		<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

**(3)  Parent-time.** (Check one)

- (A)  The agreed-upon parenting plan is approved.
- (B)  The  Petitioner's  Respondent's parenting plan is approved.
- (C)  Utah standard parent-time will apply.
- (D)  Other (Describe the parent-time schedule.)

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**(4)  How to exchange children for parent-time.** (Check one)

- (A)  Curbside pick-up and drop-off by  Petitioner  Respondent at the following address:

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- (B)  Other (Describe the procedure to exchange the children.)

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**(5)  Child support.**

- (A)  Petitioner  Respondent shall pay \$\_\_\_\_\_ per month for the children.

- (B) Petitioner's base child support is \$\_\_\_\_\_ per month. Respondent's base child support is \$\_\_\_\_\_ per month. Except during parent-time, if the living arrangements of a child change from residing with the custodial parent to residing with the non-custodial parent, then the parent the child is not residing with

must pay that parent's "base child support" to the parent the child is residing with without the need to modify the child support order.

(C) If approved by court order or written agreement signed by the parties, the base child support shall be reduced

(i) by 50% for each child who resides with the non-custodial parent for at least 25 of any 30 consecutive days; and

(ii) by 25% for each child who resides with the non-custodial parent for at least 12 of any 30 consecutive days.

Parent-time with the custodial parent shall not be considered an interruption of the consecutive-day requirement for the non-custodial parent.

(D) The obligation shall be effective immediately upon entry of the order and last until a final order is entered or until;

(i) a child becomes 18 years of age, or has graduated from high school during the child's normal year of graduation, whichever occurs later; or

(ii) a child dies, marries, becomes a member of the armed forces of the United States, or is emancipated under Utah law.

(E)  When a child no longer qualifies to receive child support, the base child support for the remaining children shall be automatically adjusted to the base child support in the table for that number of children using the appropriate calculation and worksheet under Utah Code Title 78B, Chapter 12, Part 2.

(Check (F) or (G), whichever is ordered.)

(F)  Income shall be withheld from the salary and wages of the non-custodial parent. Income withholding shall apply to existing and future payors. Unless the Office of Recovery Services gives notice that payments should be sent elsewhere, all child support payments shall be made to the Office of Recovery Services, P.O. Box 45011, Salt Lake City, UT 84145-011. All administrative fees and costs of income withholding assessed by the Office of Recovery Services shall be paid by the non-custodial parent. Child support shall be due on or before the first day of each month and delinquent on the first day of the following month.

OR

(G)  Child support shall be paid directly to the custodial parent. The non-custodial parent has paid other court ordered support on time. Income withholding for this child support would not be in the children's best interest because:

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In addition, the non-custodial parent: (Check the box or boxes that qualify for direct payments.)

- and the custodial parent have signed the attached written agreement, which provides for a different payment arrangement;
- has obtained a bond, deposited money in trust for the children, or made other arrangements to guarantee child support payments for at least 2 months;
- has arranged to deposit all child support payments into an account belonging to me; (I will provide the information necessary for the other party to set up direct deposit through his or her employer. Upon receipt of the information, the other party should have his or her employer establish direct deposit to an account of my choice.)
- has made arrangements insuring that a reliable and independent record of the date and place of child support payments will be maintained; or
- has arranged for electronic transfer of funds on a regular basis.

Child support not paid on or before the due date is delinquent on the day after the due date. Child support is due:

- one-half on or before the 5th day of each month, and one-half on or before the 20th day of each month.
- other (describe)

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(H)  The children are recipients of cash assistance from the state of Utah through the Temporary Aid to Needy Families (TANF) program or Family Employment Program (FEP) and any agreement by the parties to reduce child support under (5)(B) or (5)(C) must be approved by the Office of Recovery Services.

(I) Each party shall notify the other within 10 days of any change in income.

(J) Child support arrearages shall be determined by further judicial or administrative process. Any federal or state tax refund or rebate due to the non-custodial parent shall be intercepted by the state of Utah and applied to child support arrearages.

(6)  **Child care expenses.** Both parties shall share equally the reasonable child care expenses related to the custodial parent's work or training. The parent who incurs child care expenses shall provide to the other parent written verification of the child care provider's expense and identity:

- (A) upon initial engagement of the provider;
- (B) within 30 calendar days after a change in the provider or the expense; and
- (C) upon the request of the other parent.

If the parent incurring the expenses fails to comply with these provisions, the parent should be denied the right to receive credit for the expenses or to recover the other parent's share of the expenses. Immediately after receiving written verification, the other parent shall, on a monthly basis, reimburse the parent who incurred the child care expenses one-half of the amount.

(7)  **Health insurance.**  Petitioner  Respondent shall maintain health insurance for our minor children. Both parties shall share equally:

- (A) the cost of the premium paid by a parent for the children's portion of the insurance; and
- (B) all reasonable and necessary uninsured medical expenses incurred for the children and paid by a parent, including deductibles and co-payments.

The children's portion of the premium shall be calculated by dividing the premium amount by the number of people covered by the policy and multiplying the result by the number of minor children of the parties. The parent ordered to maintain insurance shall provide written verification of coverage to the other parent and the Office of Recovery Services:

- (D) upon initial enrollment of the children;
- (E) on or before January 2, of each calendar year; and
- (F) upon any change of insurance carrier, premium, or benefits within 30 calendar days after the date that parent knew or should have known of the change.

If the parent ordered to maintain insurance fails to provide written verification of coverage to the other parent or to the Office of Recovery Services, or if the parent incurring medical expenses fails to provide written verification of the cost and payment of the expenses to the other parent within 30 days of payment, that parent may be denied the right to receive credit for the expenses or to recover the other parent's share of the expenses. The parent receiving written verification shall reimburse the parent who

incurred the medical expenses one-half of the amount within 30 days after receiving the written verification.

**(8)  Alimony.**

<input type="checkbox"/> Petitioner	shall pay \$ _____ each month for alimony to	<input type="checkbox"/> Respondent
<input type="checkbox"/> Respondent		<input type="checkbox"/> Petitioner

**(9)  Attorney fees.**

<input type="checkbox"/> Petitioner	shall pay \$ _____ for attorney fees to	<input type="checkbox"/> Respondent
<input type="checkbox"/> Respondent		<input type="checkbox"/> Petitioner

**(10)  Payment of bills and debts.**

Petitioner shall pay the following bills and debts:

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Respondent shall pay the following bills and debts:

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**(11)  Possession of property.**

Petitioner shall have

The following essential personal belongings:

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The following property needed for daily living:

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The Respondent shall have

The following essential personal belongings:

\_\_\_\_\_

The following property needed for daily living:

\_\_\_\_\_

The parties shall take possession of the property as follows.

Petitioner:

\_\_\_\_\_

Respondent:

\_\_\_\_\_

Neither party may sell, transfer or dispose of any property without a court order or written agreement signed by both parties.

**(12)**  **Other.** The court further orders:

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

Date: \_\_\_\_\_ Sign here ► \_\_\_\_\_

Commissioner \_\_\_\_\_

Date: \_\_\_\_\_ Sign here ► \_\_\_\_\_

Judge \_\_\_\_\_

**Certificate of Service**

I certify that I served a copy of this Order on Motion for Temporary Order on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Petitioner or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Respondent or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

# Tab 3

**Delegation of Powers by Parent or Guardian**  
(Pursuant to Utah Code §75-5-103)

I \_\_\_\_\_ [name of parent/guardian],  
whose address and contact telephone number are:

\_\_\_\_\_  
\_\_\_\_\_ ,

appoint \_\_\_\_\_ [name of person  
being appointed], whose address and contact telephone number are:

\_\_\_\_\_  
\_\_\_\_\_ ,

as my attorney-in-fact to whom I delegate all power and authority regarding the care,  
custody, or property of my  minor child  ward,

\_\_\_\_\_ [name of minor child or ward],

born on \_\_\_\_\_ [date], except the power to  
consent to the marriage or adoption of a minor ward.

In addition, I delegate to my attorney-in-fact the specific authority to:

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

This power of attorney shall last for a period of not more than six months from the date I sign it, unless otherwise revoked by me.

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_  
Typed or printed name \_\_\_\_\_

I certify that \_\_\_\_\_, who is known to me or who presented satisfactory identification, has, while in my presence and while under oath or affirmation, voluntarily signed this document and declared that it is true.

Date: \_\_\_\_\_ Sign here ► \_\_\_\_\_  
Typed or printed name: \_\_\_\_\_  
Seal:

**Utah Code §75-5-103. Delegation of powers by parent or guardian.**

A parent or a guardian of a minor or incapacitated person, by a properly-executed power of attorney, may delegate to another person, for a period not exceeding six months, any of his powers regarding care, custody, or property of the minor child or ward, except his power to consent to marriage or adoption of a minor ward.

# Tab 4

## Voluntary Relinquishment of Parental Rights

### Forms Checklist

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Fill out these forms as instructed and file them with the court clerk:

- Civil Cover Sheet
- Petition for Termination of Parental Rights Upon Voluntary Relinquishment  
- complete and sign
- Voluntary Relinquishment of Parental Rights  
- complete but **do not sign** until the judge tells you to do so
- Findings of Fact & Conclusions of Law  
- complete the information on the first page but **do not sign** – the judge signs this form
- Order Terminating Parental Rights  
- complete but **do not sign** – the judge signs this form

If you cannot pay the filing fee, complete and file these forms to ask the judge to waive the filing fee. The judge will consider your request and may grant a total waiver, a partial waiver, or no waiver of fees.

- Affidavit and Application for Waiver of Court Fees (In the Matter Of)
- Court Order on Motion for Waiver of Court Fees

These forms are available on the court's website: <http://www.utcourts.gov/resources/forms/> under the *Waiver of Court Fees* heading.

Remember to keep copies of all paperwork for your records.

My Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

I am the  Petitioner  
 Attorney for the Petitioner and my Utah Bar number is \_\_\_\_\_

In the  Juvenile  District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

IN THE MATTER OF  
\_\_\_\_\_  
(use only the child's initials if in Juvenile Court)

A MINOR CHILD.

**Petition for Termination of Parental  
Rights Upon Voluntary  
Relinquishment**

Case Number \_\_\_\_\_

Judge \_\_\_\_\_

Commissioner \_\_\_\_\_

I, \_\_\_\_\_, allege as follows:

(1) I am the natural  father  mother of [use only the child's initials if in Juvenile Court]  
\_\_\_\_\_.

(2) My place of residence is:  
\_\_\_\_\_.

(3) My minor child is a  male  female, who was born on \_\_\_\_\_,  
and whose residence is \_\_\_\_\_.

(4) It is in my minor child’s best interest that my parental rights be terminated.

(5) The reason I am asking the court to terminate my parental rights is:

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(6) I am not seeking to terminate my parental rights to avoid my financial support obligations to my minor child.

I ask the court to:

(1) Schedule a date and time for the court for hearing on this petition.

(2) Provide notice of the petition and hearing to the following people and/or agencies if so required by the judge:

Name	Address	Relationship to Petitioner or Child
		Mother
		Father
		Legal guardian of child or person
		Guardian ad Litem
		Utah Attorney General

(3) Accept my voluntary relinquishment of parental rights signed or confirmed under oath before the judge or a public officer appointed by the court for the purpose of taking consents or relinquishments as provided in Utah Code § 78B-6-124.

(4) Determine that it is in my minor child’s best interests for my parental rights to be terminated.

(5) Grant a voluntary relinquishment of my parental rights.

I declare under criminal penalty of Utah Code §78B-5-705 that this Petition for Termination of Parental Rights Upon Voluntary Relinquishment is true and correct.

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_  
 Typed or printed name \_\_\_\_\_

<b>Certificate of Service</b>			
I certify that I served a copy of this Petition for Termination of Parental Rights Upon Voluntary Relinquishment on the following people.			
Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

My Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

I am the  Petitioner  
 Attorney for the Petitioner and my Utah Bar number is \_\_\_\_\_

In the  Juvenile  District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

IN THE MATTER OF

\_\_\_\_\_,  
(use only the child's initials if in Juvenile Court)

A MINOR CHILD.

**Voluntary Relinquishment of  
Parental Rights**

Case Number \_\_\_\_\_

Judge \_\_\_\_\_

Commissioner \_\_\_\_\_

Petitioner, \_\_\_\_\_, being first duly sworn, and  
under oath, states as follows:

(1) I am the natural  father  mother of [use only the child's initials if in Juvenile Court]

\_\_\_\_\_.

(2) My place of residence is:

\_\_\_\_\_.

(3) My minor child is a  male  female, who was born on \_\_\_\_\_,

and whose residence is \_\_\_\_\_.

(4) By my signature below I voluntarily relinquish my parental rights to this minor child and consent to the court's termination of those parental rights.

(5) It is in my minor child's best interest that my parental rights be terminated.

(6) The reason I am asking the court to terminate my parental rights is:

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(7) I am not seeking to terminate my parental rights to avoid my financial support obligations to my minor child.

(8) I understand that by signing this document my parental rights over my minor child will be terminated and that I will no longer have any rights or obligations of a parent to this child.

(9) The parental rights I am voluntarily relinquishing include, but are not limited to, the rights of custody, visitation, and any other physical contact with this child, whether in

person, by mail, or any electronic means whatsoever, and any input regarding decisions made about this child.

(10) The parental obligations that I am voluntarily relinquishing include, but are not limited to, obligations to provide for the care, support, education, and moral training of this child from the date the order terminating my parental rights is entered and forward.

(11) I understand that any obligation for support of this child incurred prior to the date of my signing this document will remain and I will still be obligated to pay for that support.

(12) I understand that termination of my parental rights following my voluntary relinquishment does not extinguish my child's right to inherit from my estate upon my death, nor does it remove eligibility from my child for entitlements from state or federal governments or Indian Tribes that my child may be entitled to as a result of my being the child's natural parent.

(13) I understand that once I sign this document I may not change my mind and that my parental rights and obligations will be terminated.

Having read this document, I fully understand that by signing below I will permanently relinquish all my rights and obligations as a parent to my minor child. Knowing this, I am signing this document voluntarily, of my own choice, without any pressure, coercion, or promises having been made to me by any person for any purpose whatsoever.

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

This document was signed before me on \_\_\_\_\_. Petitioner's identity was proven to me in the following way:

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

Prior to petitioner signing this document I placed petitioner under oath and asked petitioner whether petitioner had read this document and understood that the result of petitioner's signing this document would be that petitioner would relinquish permanently all parental rights and obligations over petitioner's minor child, and that once petitioner had signed the document, petitioner could not change petitioner's mind and reinstate petitioner's parental rights and obligations.

After being sworn and while under oath, petitioner stated that petitioner had read this document, fully understood its contents, and that the contents were true of petitioner's own personal knowledge.

Petitioner further stated that petitioner understood that petitioner was relinquishing all parental rights and obligations to petitioner's minor child and that petitioner understood

that the rights petitioner was relinquishing included custody, visitation, and the right to be involved in any decision regarding the child whatsoever.

Petitioner stated that petitioner understood that petitioner could not change petitioner's mind once this document was signed and that petitioner's relinquishment would be irrevocable. Petitioner then signed the document in my presence.

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Judge

or a public officer appointed by the court for the purpose of taking consents or relinquishments as provided in Utah Code §78B-6-124

<b>Certificate of Service</b>			
I certify that I served a copy of this Voluntary Relinquishment of Parental Rights on the following people.			
Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

In the  Juvenile  District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

IN THE MATTER OF

\_\_\_\_\_,  
(use only the child’s initials if in Juvenile Court)

A MINOR CHILD.

**Findings of Fact and Conclusions of Law**

Case Number \_\_\_\_\_

Judge \_\_\_\_\_

Commissioner \_\_\_\_\_

This matter came before the court on petitioner’s Petition for Termination of Parental Rights upon Voluntary Relinquishment. A hearing was held on \_\_\_\_\_ (date), before the Honorable \_\_\_\_\_, Judge, or before \_\_\_\_\_, a public officer appointed by the court for the purpose of taking consents or relinquishments as provided in Utah Code §78B-6-124.

The petitioner was placed under oath and the court made inquiries of the petitioner. The petitioner then signed the document entitled Voluntary Relinquishment of Parental Rights. The court, having received petitioner’s voluntary relinquishment, makes the following:

FINDINGS OF FACT

(1) Petitioner is the natural  father  mother of (use only the child’s initials if in Juvenile Court) \_\_\_\_\_.

(2) Petitioner’s minor child is a  male  female, who was born on \_\_\_\_\_, and whose residence is

\_\_\_\_\_.

(3) The reason petitioner voluntarily relinquished parental rights is:

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

(4) Petitioner is not voluntarily relinquishing petitioner’s parental rights for the purpose of avoiding petitioner’s financial support obligations to petitioner’s minor child.

(5) Petitioner understands that by signing the Voluntary Relinquishment of Parental Rights that petitioner’s parental rights over petitioner’s minor child will be terminated and that petitioner will no longer have any rights or obligations of a parent to this child.

(6) Petitioner understands that the parental rights petitioner is voluntarily relinquishing include, but are not limited to, the rights of custody, visitation, and any

other physical contact with this child, whether in person, by mail, or any electronic means whatsoever, and any input regarding decisions made about this child.

(7) Petitioner understands that the parental obligations that petitioner is voluntarily relinquishing include, but are not limited to, obligations to provide for the care, support, education, and moral training of this child.

(8) Petitioner understands that any obligation for support of this child incurred prior to the date of petitioner signing the document entitled Voluntary Relinquishment of Parental Rights remain and that petitioner is still obligated to pay that support.

(9) Petitioner understands that termination of petitioner's parental rights following petitioner's voluntary relinquishment does not extinguish the child's right to inherit from petitioner's estate, nor does it remove eligibility from petitioner's child for entitlements from state or federal governments or Indian Tribes that this child may be entitled to as a result of petitioner being the child's natural parent.

(10) Petitioner understands that once petitioner has signed the document entitled Voluntary Relinquishment of Parental Rights, petitioner may not change petitioner's mind and that petitioner's parental rights will be terminated.

The Court having entered its Findings of Fact, now makes its:

#### CONCLUSIONS OF LAW

The court concludes that it is in the best interest of the above named minor child that petitioner's parental rights be permanently terminated. The court further concludes that petitioner freely and voluntarily signed the document entitled Voluntary Relinquishment of Parental Rights and that the primary purpose for petitioner relinquishing petitioner's parental rights was other than to avoid support obligations for the child.

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

\_\_\_\_\_

Judge

<b>Certificate of Service</b>			
I certify that I served a copy of this Findings of Fact and Conclusions of Law on the following people.			
Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_

In the  Juvenile  District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

IN THE MATTER OF

\_\_\_\_\_,  
(use only the child's initials if in Juvenile Court)

A MINOR CHILD.

**Order Terminating Parental Rights**

Case Number \_\_\_\_\_

Judge \_\_\_\_\_

Commissioner \_\_\_\_\_

This matter came before the court on petitioner's Petition for Termination of Parental Rights upon Voluntary Relinquishment. A hearing was held on \_\_\_\_\_ [date], before the Honorable \_\_\_\_\_, Judge, or before \_\_\_\_\_, a public officer appointed by the court for the purpose of taking consents or relinquishments as provided in Utah Code §78B-6-124. Petitioner was placed under oath and the court made inquiries of the petitioner. The petitioner then signed or confirmed under oath the document entitled Voluntary Relinquishment of Parental Rights. The court having received petitioner's voluntary relinquishment and having previously entered its Findings of Fact and Conclusions of Law, orders as follows:

(1) Petitioner is identified as follows:

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

Date of Birth: \_\_\_\_\_

Residence: \_\_\_\_\_

- (2) Petitioner is the natural  father  mother of the minor child, identified as follows:

Name: [use only the child's initials if in Juvenile Court]

\_\_\_\_\_

Male  Female

Date of Birth: \_\_\_\_\_

Residence: \_\_\_\_\_

- (3) Pursuant to Utah Code §78A-6-513, petitioner's parental rights and obligations are permanently terminated over the minor child named above. The parental rights and obligations which are terminated by this order include, but are not limited to, the rights of custody, visitation, and any other physical contact with this child, whether in person, by mail, or any electronic means whatsoever, and any input regarding decisions made about this child; and the obligations to provide for the care, support, education, and moral training of this child from the date the relinquishment was entered. This order does not terminate any support obligations incurred prior to the date the relinquishment was entered. This order does not extinguish this child's right to inherit from petitioner's estate, nor does it remove eligibility from this child for entitlements from state or federal

governments or Indian tribes that this child may be entitled to as a result of petitioner being the child's natural parent.

(4) Other orders relating to the minor child's care and welfare that are in the minor child's best interests:

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

Judge

<b>Certificate of Service</b>			
I certify that I served a copy of this Order Terminating Parental Rights on the following people.			
Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_ Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_