
Name

Address

City, State, Zip

Phone

Email

In the District Court of Utah

_____ Judicial District _____ County

Court Address _____

<p>_____ Plaintiff/Petitioner</p> <p>V.</p> <p>_____ Defendant/Respondent</p>	<p>Order Confirming Registration of Office of Recovery Services (ORS) Support Order</p> <p>_____ Case Number</p> <p>_____ Judge</p> <p>_____ Commissioner (domestic cases)</p>
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The matter before the court is a Petition to Register Office of Recovery Services Support Order. This matter is being resolved by: (Choose all that apply.)

- The default of Petitioner Respondent.
- The stipulation of the parties.
- The pleadings and other papers of the parties.
- A hearing held on _____ (date), notice of which was served on all parties.

Petitioner

was present was not present.

was represented by _____ (name).

was not represented.

Respondent

was present was not present.

was represented by _____ (name).

was not represented.

The court finds:

1. This court:

has the authority to enforce the ORS support order.

does not have the authority to enforce the ORS support order.

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

The court orders:

2. The Petition to Register Office of Recovery Services (ORS) Support Order is

granted. The ORS administrative support order dated _____ is the order of this court.

denied.

3. The ORS administrative support order has the full force and effect of a district court order.

4. This court shall have continuing jurisdiction over this matter

5. Other

Commissioner's or Judge's signature may instead appear at the top of the first page of this document.

Date

Signature ► _____
Commissioner _____

Date

Signature ► _____
Judge _____

Approved as to form.

Date

Signature ► _____
Petitioner, Attorney or Licensed Paralegal
Practitioner _____

Date

Signature ► _____
Respondent, Attorney or Licensed Paralegal
Practitioner _____

Certificate of Service

I certify that I filed with the court and am serving a copy of this Order Confirming Registration of ORS Administrative Support Order on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> 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"/> E-filed <input type="checkbox"/> 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"/> E-filed <input type="checkbox"/> 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

Signature ► _____
 Printed Name _____