

IN THE FAMILY COURT OF _____ COUNTY, WEST VIRGINIA.

In Re:

The Marriage / Children of:

Civil Action No. _____

_____,
Petitioner

and

_____.
Respondent

Address

Address

Daytime phone

Daytime phone

PETITION FOR MODIFICATION

1. General Information

a. The Petitioner is: _____, who is:

(Print your name.)

___ the mother / wife whose name is listed in the case style at the top of this page.

___ the father / husband whose name is listed in the case style at the top of this page.

___ other person, whose relationship to the Respondent / children is: _____

b. The Petitioner requests that the Order entered on the date of _____ be modified with regard to:

___ Parenting Plan

___ Child support

___ Spousal support

___ Other; (Explain) _____

2. I want the Court to modify the Order in these ways: (Check all that apply.)

___ Increase child support

___ Decrease child support ___ End child support

___ Change Parenting Plan with regard to: ___ Decision making;

___ Time spent with the children; ___ Other; (Explain) _____

___ Order child support *paid to* another person, who

is: _____.

Order child support *paid by* another person, who

is: _____.

Increase spousal support

Decrease spousal support End spousal support

Other modification request(s); (Explain.) _____

3. Circumstances that justify the modification I am requesting.

(Explain all of the changes in circumstances you think justify the modifications you requested.) :

4. Information concerning Public Assistance and Child Support Enforcement Services

- a. A Public Assistance check from Health and Human Services is now being received by: The Children; The Petitioner; The Respondent.
- b. A Public Assistance check from Health and Human Services was received in the past by: The Children; The Petitioner; The Respondent.
- c. Services from the Bureau for Child Support Enforcement have been applied for by: The Petitioner; The Respondent.
- d. Income withholding services are currently being received from the Bureau for Child Support Enforcement.

Petitioner's Signature

Date

You must sign the Verification on the next page before a Notary Public.

VERIFICATION

I, _____, after making an oath or affirmation to tell the truth, say that the facts I have stated in this Petition are true of my personal knowledge; and if I have set forth matters upon information given to me by others, I believe that information to be true.

Signature

Date

This Verification was sworn to or affirmed before me on the ____ day of _____,
2____.

Notary Public / Other official

My commission expires:_____.

CERTIFICATE OF SERVICE

State of West Virginia

County of _____

I, _____, the Petitioner for Modification, mailed my Petition
by first class United States Mail, postage paid, to:

(Name and Address)

(Date mailed)

And:

(Name and Address)

(Date mailed)

Petitioner's Signature

Date