CHILD SUPPORT CLAIM

☐   I ask for child support for the following children:

Full name of child (Last, First, Middle)	Child's date of birth (day, month, year)

☐   I ask that the amount of child support be set using the child support guidelines or law of the jurisdiction where the respondent lives.

If the respondent lives in Canada:

     ☐   I ask for only the child support guidelines table amount for one or more children.

     ☐   I ask for child support in an amount different than the table amount. The form 'Request for a Child Support Order Different than Child Support Guidelines Table Amount' (Form G) is attached.

     ☐   I ask for additional child support, over the table or other amount. A 'Special Expense Claim' (Form H) is attached. I ask for additional child support of $_____ .

☐   I ask for an order that the respondent obtain or maintain medical or dental insurance coverage for the child(ren).

This document is attached to, and forms part of the evidence in, my support application/support variation application/answer:

_____
Signature