

MOTION FOR REVIEW AND MODIFICATION OF CHILD SUPPORT

M-3

Resource Center
1 South Sierra St., Third Floor
Reno, NV 89501
775-325-6731
www.washoecourts.com

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**Motion for Review and Modification
of Child Support
PACKET M-3**

Use this motion for review and modification of child support only if the following statements are true:

- You already have a child support order with the Second Judicial District Court.
- If the child support is being enforced or was setup through the District Attorney's Office, you have already contacted them about wanting to make a change.

IMPORTANT

If you are requesting that the court enter a judgement for child support arrears, or you are requesting that the court affirm a past order for arrears, a **schedule of arrears** must be filed with this motion.

The penalty for willfully making a false statement under penalty of perjury is a minimum of 1 year, and a maximum of 4 years in prison, in addition to a fine of not more than \$5,000.00.
N.R.S. §199.145.

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INSTRUCTIONS FOR COMPLETING FORMS

Carefully read all instructions before starting to fill out any of the forms.

Use **black or blue ink only**. Neatly print or type the information requested.

Do not use correction fluid/tape on the forms.

This packet contains the following forms:

1. Motion for Review and Modification of Child Support
2. Appendix A: Child Support Worksheet
3. General Financial Disclosure*
*The court cannot review your motion without this document.
4. Proof of Service
5. Reply to Opposition to Motion for Review and Modification of Child Support
6. Request for Submission
7. Proof of Service

This packet contains the following additional information:

1. Nevada Statutes regarding child support
2. Child support calculation worksheets

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INSTRUCTIONS: STEP 1a

Calculating Child Support using Appendix A

Appendix A does not need to be filed with the Court.

- Use this work sheet to help you calculate the child support.

APPENDIX A

Gross Monthly Income (GMI)

The first step in determining child support is calculating your Gross Monthly Income, the amount of money you make each month *before taxes are deducted*.

Gross Monthly Income includes money received from employment, social security, unemployment benefits, pension/retirement, interest/investments, etc. Gross Monthly Income DOES NOT include SSI, SNAP, TANF, cash benefits from the county, or child support received. For a full list of incomes included in Gross Monthly Income please see NAC 425.

To calculate your Gross Monthly Income from employment, use one of the tables below:

Parent 1		Parent 2	
Annual Income	\$	Annual Income	\$
÷ by 12 months =	\$	÷ by 12 months =	\$
Employment GMI		Employment GMI	
Biweekly Income	\$	Biweekly Income	\$
x26 weeks	\$	x26 weeks	\$
÷ by 12 months =	\$	÷ by 12 months =	\$
Employment GMI		Employment GMI	
Weekly Income	\$	Weekly Income	\$
x52 weeks	\$	x52 weeks	\$
÷ by 12 months =	\$	÷ by 12 months =	\$
Employment GMI		Employment GMI	
Hourly Wage	\$	Hourly Wage	\$
# of hours worked per week		# of hours worked per week	
hourly wage x hours worked per week	\$	hourly wage x hours worked per week	\$
x52 weeks	\$	x52 weeks	\$
÷ by 12 months =	\$	÷ by 12 months =	\$
Employment GMI		Employment GMI	

Copy the amount of GMI from Employment for each parent into the table on the following page.

REV 1/17/2020 JDB Child Support Worksheet

APPENDIX A

Gross Monthly Income (GMI)

The first step in determining child support is calculating your Gross Monthly Income, the amount of money you make each month *before taxes are deducted*.

Gross Monthly Income includes money received from employment, social security (*Not SSI*), unemployment benefits, pension/retirement, interest/investments, etc. Gross Monthly Income DOES NOT include SSI, SNAP, TANF, cash benefits from the county, or child support received. *For a full list of incomes included in Gross Monthly Income please see NAC 425.*

To calculate your Gross Monthly Income from employment, use one of the tables below:

Parent 1

Annual Income	\$
÷ by 12 months = Employment GMI	\$

Biweekly Income	\$
x26 weeks	\$
÷ by 12 months = Employment GMI	\$

Weekly Income	\$
x52 weeks	\$
÷ by 12 months = Employment GMI	\$

Hourly Wage	\$
# of hours worked per week	
hourly wage x hours worked per week	\$
x52 weeks	\$
÷ by 12 months = Employment GMI	\$

Parent 2

Annual Income	\$
÷ by 12 months = Employment GMI	\$

Biweekly Income	\$
x26 weeks	\$
÷ by 12 months = Employment GMI	\$

Weekly Income	\$
x52 weeks	\$
÷ by 12 months = Employment GMI	\$

Hourly Wage	\$
# of hours worked per week	
hourly wage x hours worked per week	\$
x52 weeks	\$
÷ by 12 months = Employment GMI	\$

Copy the amount of GMI from Employment for each parent into the table on the following page.

Now that you have determined the GMI from employment, add any money you receive each month from social security, unemployment benefits, pension/retirement, interest/investments, etc. Use the table below to find your Total Gross Monthly Income.

Parent 1

Parent 2

Employment GMI:	\$
Social Security:	\$
Unemployment:	\$
Pension/Retirement:	\$
Interest/Investments:	\$
Other:	\$
TOTAL GMI:	\$

Employment GMI:	\$
Social Security:	\$
Unemployment:	\$
Pension/Retirement:	\$
Interest/Investments:	\$
Other:	\$
TOTAL GMI:	\$

You should now have your Total Gross Monthly Income. If you or the other parent's Total Gross Monthly Income is less than \$1,883 a month, use the **Low-Income** Child Support Schedule below to complete the following pages. Please continue to the next page.

Low-Income Child Support Schedule
Child Support Obligation of Low-Income Payers
at 75% to 150% of the 2024 Federal Poverty Guidelines

Monthly Income Up To	One Child		Two Children		Three Children		Four Children		Five Children	
	Percent	Child Support Amount	Percent	Child Support Amount	Percent	Child Support Amount	Percent	Child Support Amount	Percent	Child Support Amount
\$941	10.56%	\$99	14.52%	\$137	17.16%	\$162	18.48%	\$174	19.80%	\$186
\$975	10.75%	\$105	14.79%	\$144	17.48%	\$170	18.82%	\$183	20.16%	\$197
\$1,008	10.95%	\$110	15.05%	\$152	17.79%	\$179	19.16%	\$193	20.53%	\$207
\$1,042	11.14%	\$116	15.32%	\$160	18.11%	\$189	19.50%	\$203	20.89%	\$218
\$1,076	11.34%	\$122	15.59%	\$168	18.42%	\$198	19.84%	\$213	21.26%	\$229
\$1,109	11.53%	\$128	15.86%	\$176	18.74%	\$208	20.18%	\$224	21.62%	\$240
\$1,143	11.73%	\$134	16.12%	\$184	19.05%	\$218	20.52%	\$235	21.99%	\$251
\$1,177	11.92%	\$140	16.39%	\$193	19.37%	\$228	20.86%	\$245	22.35%	\$263
\$1,210	12.11%	\$147	16.66%	\$202	19.69%	\$238	21.20%	\$257	22.71%	\$275
\$1,244	12.31%	\$153	16.92%	\$211	20.00%	\$249	21.54%	\$268	23.08%	\$287
\$1,277	12.50%	\$160	17.19%	\$220	20.32%	\$260	21.88%	\$279	23.44%	\$299
\$1,311	12.70%	\$166	17.46%	\$229	20.63%	\$271	22.22%	\$291	23.81%	\$312
\$1,345	12.89%	\$173	17.73%	\$238	20.95%	\$282	22.56%	\$303	24.17%	\$325
\$1,378	13.09%	\$180	17.99%	\$248	21.26%	\$293	22.90%	\$316	24.54%	\$338
\$1,412	13.28%	\$187	18.26%	\$258	21.58%	\$305	23.24%	\$328	24.90%	\$352
\$1,445	13.47%	\$195	18.53%	\$268	21.90%	\$317	23.58%	\$341	25.26%	\$365
\$1,479	13.67%	\$202	18.79%	\$278	22.21%	\$329	23.92%	\$354	25.63%	\$379
\$1,513	13.86%	\$210	19.06%	\$288	22.53%	\$341	24.26%	\$367	25.99%	\$393
\$1,546	14.06%	\$217	19.33%	\$299	22.84%	\$353	24.60%	\$380	26.36%	\$408
\$1,580	14.25%	\$225	19.60%	\$310	23.16%	\$366	24.94%	\$394	26.72%	\$422
\$1,614	14.45%	\$233	19.86%	\$321	23.47%	\$379	25.28%	\$408	27.09%	\$437
\$1,647	14.64%	\$241	20.13%	\$332	23.79%	\$392	25.62%	\$422	27.45%	\$452
\$1,681	14.83%	\$249	20.40%	\$343	24.11%	\$405	25.96%	\$436	27.81%	\$468
\$1,714	15.03%	\$258	20.66%	\$354	24.42%	\$419	26.30%	\$451	28.18%	\$483
\$1,748	15.22%	\$266	20.93%	\$366	24.74%	\$432	26.64%	\$466	28.54%	\$499
\$1,782	15.42%	\$275	21.20%	\$378	25.05%	\$446	26.98%	\$481	28.91%	\$515
\$1,815	15.61%	\$283	21.47%	\$390	25.37%	\$461	27.32%	\$496	29.27%	\$531
\$1,849	15.81%	\$292	21.73%	\$402	25.68%	\$475	27.66%	\$511	29.64%	\$548
\$1,883	16.00%	\$301	22.00%	\$414	26.00%	\$489	28.00%	\$527	30.00%	\$565

Child Support Worksheet

① Parent 1's Information

Gross monthly income (GMI) includes: employment income, including consistent overtime; interest and investment income; Social Security old-age insurance benefits and disability benefits (SSD), but not supplemental security income (SSI); alimony; military allowances; periodic payments from a pension or retirement plan; and unemployment benefits.

How much is Parent 1's gross monthly income? \$ _____

Ⓐ If Parent 1's gross monthly income is less than \$1,883, use the attached low-income child support schedule to identify Parent 1's child support obligation. \$ _____

If Parent 1's gross monthly income is less than \$1,883, stop here, and go to line ③.

Ⓑ Multiply the amount of Parent 1's gross monthly income which is more than \$1,883 but less than \$6,000 by

.16 (for 1 child)

.22 (for 2 children)

.26 (for 3 children)

.28 (for 4 children)

Add .02 for each additional child \$ _____

Ⓒ Multiply the amount of Parent 1's gross monthly income which is more than \$6,000 but less than \$10,000 by

.08 (for 1 child)

.11 (for 2 children)

.13 (for 3 children)

.14 (for 4 children)

Add .01 for each additional child \$ _____

Ⓓ Multiply the amount of Parent 1's gross monthly income which is more than \$10,000 by

.04 (for 1 child)

.06 (for 2 children)

.06 (for 3 children)

.07 (for 4 children)

Add .005 for each additional child \$ _____

Parent 1's child support obligation (Add lines B, C, and D) \$ _____

② Parent 2's Information

Gross monthly income (GMI) includes: employment income, including consistent overtime; interest and investment income; Social Security old-age insurance benefits and disability benefits (SSD), but not supplemental security income (SSI); alimony; military allowances; periodic payments from a pension or retirement plan; and unemployment benefits.

How much is Parent 2's gross monthly income? \$ _____

Ⓐ If Parent 2's gross monthly income is less than \$1,883, use the attached low-income child support schedule to identify Parent 2's child support obligation. \$ _____

If Parent 2's gross monthly income is less than \$1,883, stop here, and go to line ③.

Ⓑ Multiply the amount of Parent 2's gross monthly income which is more than \$1,883 but less than \$6,000 by

.16 (for 1 child)

.22 (for 2 children)

.26 (for 3 children)

.28 (for 4 children)

Add .02 for each additional child \$ _____

Ⓒ Multiply the amount of Parent 2's gross monthly income which is more than \$6,000 but less than \$10,000 by

.08 (for 1 child)

.11 (for 2 children)

.13 (for 3 children)

.14 (for 4 children)

Add .01 for each additional child \$ _____

Ⓓ Multiply the amount of Parent 2's gross monthly income which is more than \$10,000 by

.04 (for 1 child)

.06 (for 2 children)

.06 (for 3 children)

.07 (for 4 children)

Add .005 for each additional child \$ _____

Parent 2's child support obligation (Add lines B, C, and D) \$ _____

③ **Joint Physical Custody.** Only fill out this section if you are asking for joint physical custody. Skip to ④ if one parent is to be awarded primary physical custody.

Subtract the lower earning parent's child support obligation from the higher earning parent's child support obligation.

	Higher		
	\$ _____		
-	Lower		
	\$ _____		
	Child Support Obligation	paid by	Name of higher income parent:
	\$ _____		_____

④ **Adjustments.** (complete all that apply)

- If Parent 1 wants primary or sole physical custody, the court uses the number in ⑥ as the standard amount of child support Parent 2 would pay.
- If Parent 2 wants to have primary or sole physical custody, the court uses the number in ⑥ as the standard amount of child support Parent 1 would pay.
- If you want both parents to have joint physical custody, the court uses the number in ③ as the standard amount of child support.

Adjustment Factors	Amount -/+
Any special education needs of the child	\$
A parent's legal responsibility to support others	\$
Value of services contributed by either parent	\$
Any public assistance paid to support the child	\$
Cost of transportation of the child to and from visitation	\$
The relative income of both households.	\$
The obligor's ability to pay	\$
Any other necessary expenses for the benefit of the child(ren)	\$
Total Deviations	\$

⑤ **Final Child Support Amount Requested:**

\$ _____ paid by (*name*) _____

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INSTRUCTIONS: STEP 2

Complete the General Financial Disclosure as Shown:

It is very important that you file this document, without it, the court cannot review your motion.

1) Print your name, address, telephone number, and email address.

2) Print the names of the parties, the Case No., and Department No. just as they appear on all other documents in this case.

3) Complete pages 1-7, following the instructions on each page.

MISC
Name: _____
Address: _____
Phone: _____
Email: _____
Attorney for _____
Nevada State Bar No. _____

Second Judicial District Court
Washoe County, Nevada

_____	Case No. _____
Plaintiff / Petitioner,	Dept. _____
vs.	

Defendant / Respondent.	

GENERAL FINANCIAL DISCLOSURE FORM

A. Personal Information:

1. What is your full name? (*first, middle, last*) _____
2. How old are you? _____
3. What is your date of birth? _____
4. What is your highest level of education? _____

B. Employment Information:

1. Are you currently employed/ self-employed? (check one)
 No
 Yes If yes, complete the table below. Attached an additional page if needed.

Date of Hire	Employer Name	Job Title	Work Schedule (days)	Work Schedule (shift times)

2. Are you disabled? (check one)
 No
 Yes If yes, what is your level of disability? _____
What agency certified you disabled? _____
What is the nature of your disability? _____

C. Prior Employment: If you are unemployed or have been working at your current job for less than 2 years, complete the following information.
Prior Employer: _____ Date of Hire: _____
Date of Termination: _____ Reason for Leaving: _____

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INSTRUCTIONS: STEP 3

Electronically Filing and Serving the Documents

You will need to upload the original documents to eFlex. EFlex is available online at <https://wceflex.washoecourts.com/>, at the Law Library and the Resource Center.

Scanners are available at the Law Library and the Resource Center.

Sign into your eFlex account using the username and password you created and electronically file the:

- Motion and any Exhibits; and
- General Financial Disclosure.

Make sure to keep the original documents you file for your personal records. File-stamped copies of your documents are available through your eFlex account.

There may be a filing fee charged when documents are filed. Fee information is available at the Resource Center and online at: www.washoecourts.com.

FILING FEE WAIVERS

If you cannot afford the filing fee, you may apply to have your filing fee waived. To apply, you must fill out and file the application found in the **Application for Waiver of Fees and Costs packet**, which may be obtained at the following locations:

- Resource Center, 1 South Sierra Street, Reno, NV, Third Floor
- Law Library, 75 Court Street, Reno, NV, First Floor
- Online at: www.washoecourts.com (select the “Forms and Packets” tab on the right-hand-side of the home screen)

Once a document has been electronically filed, a Notice of Electronic Filing will be automatically generated and sent to any electronic filers in the case. All electronic filers have agreed to accept the notice as valid and effective service. This replaces the need for paper service.

If the other party has not yet signed up for electronic filing, or you do not know whether the other party is an electronic filer, please contact the Resource Center. **Additional steps are required to complete service if the other party is not an electronic filer.**

The Notice of Electronic Filing does not replace the Proof of Service (*see* INSTRUCTIONS: STEP 4).

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INSTRUCTIONS: STEP 4

Complete the Proof of Service as Shown:

This form must be completed by the person who serves the documents.

1) Print your name, address, telephone number, and email address.

2) Print the names of the parties, the Case No. and Department No. just as they appear in all other documents in this case.

3) Print the name of the person served, and the date served.

4) Mark the box for how they were served. If serving by personal service, certified mail, or postage prepaid, and write the address.

5) The person who serves the document(s) must date, sign, and print their name.

1	Code: 3720
2	Name: _____
3	Address: _____
4	Telephone: _____
5	Email: _____
6	Self-Represented Litigant
7	IN THE FAMILY DIVISION
8	OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
9	IN AND FOR THE COUNTY OF WASHOE
10	_____
11	Plaintiff / Petitioner / Joint Petitioner, Case No. _____
12	vs. Dept. No. _____
13	_____
14	Defendant / Respondent / Joint Petitioner.
15	<u>PROOF OF SERVICE</u>
16	I served a true and correct copy of MOTION FOR REVIEW AND MODIFICATION OF
17	CHILD SUPPORT and GENERAL FINANCIAL DISCLOSURE upon the following people:
18	L. Name: _____ Date: _____
19	By: <input type="checkbox"/> Service by eFlex <input type="checkbox"/> Personal Service
20	<input type="checkbox"/> Certified mail, return receipt attached <input type="checkbox"/> U.S. Mail, postage prepaid
21	<input type="checkbox"/> Other: _____
22	Address where service occurred, if applicable: _____
23	If more room is needed, attach additional sheets.
24	A copy of this Proof of Service has been electronically served, mailed, or personally delivered
25	to all parties or their lawyer.
26	This document does not contain the personal information of any person as defined by
27	NRS 603A.040.
28	Date: _____ Your Signature: _____
	Print Your Name: _____
	REV 9/2018 JCB 1 PROOF OF SERVICE

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INSTRUCTIONS: STEP 5

Filing the Proof of Service

After service is completed, you must file the Proof of Service with the Court (*See INSTRUCTIONS: STEP 3*). There will not be a filing fee for the Proof of Service.

Without proof of service on the other party, the court cannot consider your request.

Time to Respond

If you served the other party through eFlex or personal service, the other party has fourteen (14) days, beginning the day after service, to file an opposition/response to the request.

If you served the other party by U.S. Mail, the other party has seventeen (17) days, beginning the day after mailing, to file an opposition/response to the request.

If the other party does not oppose/respond within that time, you will file the Request for Submission to send your request to the judge for review. Please skip INSTRUCTIONS: STEP 6 and continue to INSTRUCTIONS: STEP 7.

If the other party does file an opposition/response, you have seven (7) days, beginning the day after service upon you, to file a Reply to the opposition/response. If the other party serves you by U.S. Mail, you have ten (10) days, starting the day after mailing, to file a Reply to the opposition/response. Please continue to INSTRUCTIONS: STEP 6.

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INSTRUCTIONS: STEP 6

*Only use this form if you have waited the time provided for the other party to respond **AND** the other party has filed an opposition to the motion.*

Complete the Reply to Opposition as Shown:

1) Print your name, address, telephone number, and email address.

2) Print the names of the parties, the Case No., and Department No. just as they appear on all other documents in this case.

3) Complete pages 1 and 2, following the instructions on each page.

1	Code: 3795
2	Name: _____
3	Address: _____
4	Telephone: _____
5	Email: _____
6	Self-Represented Litigant
7	IN THE FAMILY DIVISION
8	OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
9	IN AND FOR THE COUNTY OF WASHOE
10	_____
11	Plaintiff / Petitioner, Case No. _____
12	vs. Dept. No. _____
13	_____
14	Defendant / Respondent,
15	_____
16	<u>REPLY TO OPPOSITION TO MOTION FOR REVIEW AND</u>
17	<u>MODIFICATION OF CHILD SUPPORT</u>
18	I reply to the Opposition to my Motion for Review and Modification of Child Support as follows:
19	
20	State, in detail, your reply to the other party's statements.
21	
22	
23	
24	
25	
26	
27	
28	
	REV 10/2017 JCB 1 M-3 REPLY

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INSTRUCTIONS: STEP 7

Complete the Request for Submission as Shown:

This document lets the judge know that all the necessary paperwork has been filed and that each person has been given the correct amount of time to respond. It is very important to file this document, it allows your case to move forward.

1) Print your name, address, telephone number, and email address.

2) Print the names of the parties, the Case No., and Department No. just as they appear on all other documents in this case.

3) Print the date the document(s) were filed.

4) Date, print your name, and sign.

1	Code: 3860
2	Name: _____
3	Address: _____
4	Telephone: _____
5	Email: _____
6	Self-Represented Litigant
7	
8	IN THE FAMILY DIVISION
9	OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
10	IN AND FOR THE COUNTY OF WASHOE
11	
12	_____
13	Plaintiff/Petitioner/ Joint Petitioner, Case No. _____
14	vs. Dept. No. _____
15	_____
16	Defendant/Respondent/ Joint Petitioner.
17	_____
18	
19	<u>REQUEST FOR SUBMISSION</u>
20	
21	I request that the Motion for Review and Modification of Child Support that was filed on
22	(date the document was filed with the Court) _____ be submitted to the Court
23	for decision.
24	This document does not contain the personal information of any person as defined by NRS
25	603A.040.
26	
27	Date: _____ Your Signature: _____
28	Print Your Name: _____

REV 8/13/19 JDB 1 REQUEST FOR SUBMISSION

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INSTRUCTIONS: STEP 8

Filing and Serving the Reply and Request for Submission

File, and serve the Reply and Request for Submission as you did the Motion and General Financial Disclosure (*see* INSTRUCTIONS: STEP 3).

INSTRUCTIONS: STEP 9

Complete and File the Proof of Service for the Reply and Request for Submission

Complete the second Proof of Service for both the Reply and Request for Submission (*see* INSTRUCTIONS: STEP 4). File the Proof of Service (*see* INSTRUCTIONS: STEP 5). There is no fee to file these documents.

WHAT HAPPENS NOW?

Now that you have completed all the steps, your motion has been submitted to the court for a decision. The court may do several things, such as: 1) file an order based upon the documents you have submitted, 2) require you to file additional documents, or 3) file an order requiring you to set a hearing.

If you receive an order and do not know what to do next, contact a private attorney or seek help from the Resource Center.

Do not ignore a court order.

Legal Assistance Information

The information in this packet is provided as a courtesy only. This packet is not a substitute for the advice of an attorney. Counsel is always recommended for legal matters.

If you do not have an attorney, you are encouraged to seek the advice of a licensed attorney or contact the Resource Center or the Law Library. **The Resource Center and the Law Library staff cannot give legal advice** but can give information regarding court procedures.

You may wish to speak with a lawyer at no cost through the Law Library's Lawyer in the Library program. The Lawyer in the Library program is held via Zoom; you must register ahead of time to participate. No walk-ins accepted as space is limited.

LAWYER IN THE LIBRARY

Sign up on our website:

<https://www.washoecourts.com/LawLibrary/LawyerInLibrary>

For questions, contact the Law Library at 775-328-3250

To seek assistance from other free or reduced-cost legal resources in the area, please contact:

NEVADA LEGAL SERVICES

449 S. Virginia St.
Reno, NV 89501

775-284-3491 – leave a message, if
necessary

<https://nevadalegalservices.org>

NORTHERN NEVADA LEGAL AID

1 S. Sierra St., 1st Floor
Reno, NV 89501

775-321-2062 – leave a message, if
necessary

<https://nnlegalaid.org>