

**STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE TENTH JUDICIAL CIRCUIT
MARSHALL COUNTY**

_____))
_____))
Plaintiff))
vs.))
_____))
_____))
Defendant))

Case Number: _____

PETITION TO MODIFY, SUSPEND OR TERMINATE CHILD SUPPORT

Now comes _____, and states as follows:

1. That on _____ an order was entered in this court directing that \$_____ per _____ be withheld from the income of the Petitioner for the payment of support.

2. That the said order should be: (check appropriate items)

Modified because:

 the arrearage/delinquency in this case has been paid in (full) (part).

Suspend because:

 the underlying Order for Support has been suspended effective _____ as follows _____

payments cannot be delivered to _____

Terminated because: _____

WHEREFORE PETITIONER PRAYS: (check appropriate item)

1. That the Orders for Support and Withholding dated _____ be:

Modified as follows: _____

Suspended as follows: _____

Terminated effective: _____

2. For such other and further relief as the court deems just.

CERTIFICATION

Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that he/she verily believes the same to be true.

Attorney or Petitioner (printed name)

Petitioner

Address: _____

Telephone: _____

**STATE OF ILLINOIS
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MARSHALL COUNTY**

_____))
Plaintiff)
vs.)
_____))
Defendant)

Case Number: _____

ORDER

This cause coming on to be heard on the Petition filed on _____, in the above entitled case, for (modification) (suspension) (termination) of an Order for Support/Withholding dated _____ due notice having been given, the _____ (not) appearing (and/or counsel) in open court, and the Court having jurisdiction of the parties and subject matter, having heard all the evidence and being fully advised in the premises:

THE COURT FINDS:

() That effective _____, the underlying Order for support was (modified) (suspended) (terminated) as follows: _____

() That the delinquency in this case has been paid in full.

() That payments pursuant to the Order for Support/Withholding dated _____, have been made for at least three years and all arrearages have been paid.

() _____

WHEREFORE IT IS ORDERED:

That effective _____, the Order for Support/Withholding dated _____ is:

() Modified as follows: _____

() Suspended as follows: _____

() Terminated.

() _____

ENTER: _____

Judge

**STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE TENTH JUDICIAL CIRCUIT
MARSHALL COUNTY**

_____))
_____))
Plaintiff))
vs.))
_____))
Defendant))

Case Number: _____

NOTICE OF HEARING

TO: _____

YOU ARE HEREBY NOTIFIED that on _____, ____M., or as soon as I may be heard, I shall appear before the Honorable _____ at the Marshall County Courthouse, Lacon, Illinois, for the purpose of a hearing on my Petition to Modify, Suspend or Terminate my Child Support, at which time and place you may appear.

Petitioner

The undersigned certifies that the foregoing notice and petition was sent by U.S. Mail to:

Petitioner

INSTRUCTIONS TO FILE A PETITION FOR MODIFICATION OF SUPPORT

MARSHALL COUNTY

1. Fill out the attached Petition and Notice **COMPLETELY**.
 - a. Enter the Plaintiff and Respondent names exactly as they are on the Child Support order you are wanting to amend.
 - b. Enter the "Case Number." This number can be obtained from the Child Support order you are wanting to amend.
 - c. In item #1, enter the date of the most recent support order in your case.
 - d. In item #2, state your reasons for requesting the change. **BE SPECIFIC AND PROVIDE AS MANY DETAILS AS POSSIBLE.**
 - e. Continue filling out the Petition completely and as accurately as possible.
 - f. Sign the petition where indicated, print your name, address, and phone number.
 - g. Complete the Notice with addresses of the parties you are mailing to. Keep in mind, if the Custodial parent receives services from IDHFS, the Assistant Attorney General **will also require** Notice.
 - h. These forms will need to be sent by **Certified mail through the USPS** with the proof of mailing (green card) being returned to the Circuit Clerk's office on or before your Court date.

2. Take the completed forms to the Marshall County Circuit Clerk's office for filing. The Clerk will provide you with a File Stamped copy of Petition and Completed Notice.

Marshall County Circuit Clerk's Office
Marshall County Courthouse
122 N. Prairie St, PO Box 328
Lacon, IL 61540-0328

3. You **MUST** obtain a hearing date from the Clerk.

4. The Completed Notice and **FILE STAMPED** copy of Petition should be mailed via **Certified Mail through the USPS** to **ALL** interested parties including the **Assistant Attorney General** if the Custodial parent is receiving services from **IDHFS**.

5. The mailing address for Assistant Attorney General is:

Asst. Attorney General
5415 N. University, Ste 106
Peoria, IL 61614
Attn: Child Support division

You MUST obtain a hearing date and provide Notice to the Parties for this Petition to be heard by the Court.