

IN THE CIRCUIT COURT OF THE TENTH JUDICIAL CIRCUIT  
MARSHALL COUNTY, ILLINOIS

**UNIFORM ORDER FOR SUPPORT**  
(check and complete where applicable)

Temporary Initial Order  
 Temporary Modification Order

Permanent Initial Order  
 Permanent Modification Order

\_\_\_\_\_) )  
Petitioner: [ ] Obligor [ ] Obligee ) )  
vs. ) No. \_\_\_\_\_ )  
\_\_\_\_\_) )  
Respondent: [ ] Obligor [ ] Obligee ) )

**Obligor** - Parent who owes a duty to make support payments pursuant to an order for support.  
**Obligee** - An individual to whom a duty of support is owed or the individual's legal representative.  
**Child** - Any child under the age of 18 and any child under the age of 19 who is still attending high school.

**THE COURT FINDS:**

- a) Net income/support **frequency**: [ ] every week; [ ] every other week; [ ] semi-monthly; [ ] every month.  
Net income **calculations** utilize: [ ] **standardized** tax amount; [ ] **individualized** tax amount.  
**Net income** on the date of this order: **Obligor**: \$ \_\_\_\_\_; **Obligee**: \$ \_\_\_\_\_.  
[ ] Includes multi-family adjustment; [ ] Does not include multi-family adjustment.  
**Obligor's** adjustment: \$ \_\_\_\_\_; **Obligee's** adjustment: \$ \_\_\_\_\_.  
**Combined** net income of **Obligor and Obligee** on the date of this order: \$ \_\_\_\_\_.  
**Percentage share** of **combined** net income: **Obligor**: \_\_\_\_\_%; **Obligee**: \_\_\_\_\_%.  
**Basic child support obligation (BCSO)** from **schedule** for \_\_\_\_\_ child(ren): \$ \_\_\_\_\_.  
[ ] **Obligor's** share of **BCSO**: \$ \_\_\_\_\_.  
[ ] **Shared physical care** (each parent exercises 146 or more overnights).  
Overnights: **Obligor**: \_\_\_\_\_ days, \_\_\_\_\_%; **Obligee**: \_\_\_\_\_ days, \_\_\_\_\_%.  
**Shared child care support obligation (SCCSO)**: \$ \_\_\_\_\_ (**BCSO** x 1.5).  
**Obligor's** share of **SCCSO** after section 505(a)(3.8) offset calculations: \$ \_\_\_\_\_.  
[ ] **Health insurance premium** attributable to child(ren): \$ \_\_\_\_\_.  
Premium paid by: [ ] **Obligor**; [ ] **Obligee**.  
**Obligor's** share: \$ \_\_\_\_\_: [ ] **add to Obligor's** share of **BCSO** or **SCCSO after offset**.  
**Obligee's** share: \$ \_\_\_\_\_: [ ] **deduct from Obligor's** share of **BCSO** or **SCCSO after offset**.  
[ ] **Child care expense**: \$ \_\_\_\_\_.  
Expense paid by: [ ] **Obligor**; [ ] **Obligee**.  
**Obligor's** portion: \$ \_\_\_\_\_: [ ] **add to Obligor's** share of **BCSO** or **SCCSO after offset**.  
**Obligee's** portion: \$ \_\_\_\_\_: [ ] **deduct from Obligor's** share of **BCSO** or **SCCSO after offset**.
- OBLIGOR'S CHILD SUPPORT** (Obligor's share of **BCSO** and any **addition(s)/deduction(s)**  
or Obligor's share of **SCCSO after offset** and any **addition(s)/deduction(s)**):

\$ \_\_\_\_\_.

b) The amount of **arrearage** as of the date of this order is \$ \_\_\_\_\_ for unpaid child support and \$ \_\_\_\_\_ for interest on unpaid child support; and \$ \_\_\_\_\_ for unpaid maintenance and \$ \_\_\_\_\_ for interest on unpaid maintenance; or \$ \_\_\_\_\_ for unpaid unallocated support and \$ \_\_\_\_\_ for interest on unpaid unallocated support.

**IT IS ORDERED THAT:**

**Obligor:** \_\_\_\_\_, pay **Obligee:** \_\_\_\_\_:

**CHILD SUPPORT**

(Do not complete this section if Unallocated Support is ordered.)

Payment Amount:

Payment Frequency:

Current Support Payment: \$ \_\_\_\_\_

- every week
- every other week
- monthly
- twice each month on the \_\_\_\_\_ & \_\_\_\_\_ (date)
- every year
- other \_\_\_\_\_

Arrearage Payment: \$ \_\_\_\_\_

Payments Begin: \_\_\_\_\_ (date)

**MAINTENANCE**

**OR**

**UNALLOCATED SUPPORT**

Payment Amount:

Payment Frequency:

Current Maintenance or Unallocated Support Payment: \$ \_\_\_\_\_

- every week
- every other week
- monthly
- twice each month on the \_\_\_\_\_ & \_\_\_\_\_ (date)
- every year
- other: \_\_\_\_\_

Arrearage Payment: \$ \_\_\_\_\_

Payments Begin: \_\_\_\_\_ (date)

**IT IS FURTHER ORDERED THAT:**

If the obligor becomes delinquent in the payment of support after the entry of the Order For Support, the obligor must pay, in addition to the current support obligation, the sum of (a) \$ \_\_\_\_\_ for child support per the payment frequency ordered above for child support, and (b) \$ \_\_\_\_\_ for maintenance or unallocated support per the payment frequency ordered above for maintenance or unallocated support, until the delinquency is paid in full. **(This additional amount, the total of (a) and (b), shall not be less than 20 percent of the total of the current support amount and the amount to be paid periodically for payment of any arrearage stated in the order for support.)** A support obligation required under this order, or any portion of a support obligation required under this order, that becomes due and remains unpaid as of the end of each month, excluding the child support that was due for that month to the extent that it was not paid in that month, shall accrue simple interest as set forth in Section 12-109 of the Code of Civil Procedure.

Unless modified or terminated by written order of the court, the obligation to pay current support terminates on \_\_\_\_ - \_\_\_\_ - \_\_\_\_ (**date of youngest child's 18th birthday**), the date on which \_\_\_\_\_ (**youngest child's initials**) will attain the age of 18. However, if said child will not graduate from high school until after attaining the age of 18, then the termination date shall be the earlier of the date on which the child's high school graduation will occur **or** on the date on which the child will attain the age of 19, which is \_\_\_\_ - \_\_\_\_ - \_\_\_\_ (**date of youngest child's 19th birthday.**) The termination date does not apply to any arrearage that may remain unpaid on that date. If there is an unpaid arrearage or delinquency equal to at least one month's support obligation on the termination date stated in this order for support or, if there is no termination date stated in this order, on the date the child attains the age of majority or is otherwise emancipated, the periodic payment amount required to be paid for current support of the child immediately prior to that date shall automatically continue to be an obligation, not as current support but as periodic payment toward satisfaction of the unpaid arrearage or delinquency. That periodic payment shall be in addition to any periodic payment previously required for satisfaction of the arrearage or delinquency. The total periodic amount to be paid toward satisfaction of the arrearage or delinquency may be enforced and collected by any method provided by law for the enforcement and collection of child support, including but not limited to income withholding under the Income Withholding for Support Act.

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**PAYMENT ARRANGEMENTS INCLUDE:**

**(CHECK ONLY ONE)**

**Payments must be sent to the STATE DISBURSEMENT UNIT through income withholding.**

A Notice to Withhold Income shall issue immediately and shall be served on the obligor's employer.

Any subsequent employer may be served with a Notice to Withhold Income without further order of court.

**Payments must be sent DIRECTLY BY THE OBLIGOR to the STATE DISBURSEMENT UNIT.**

An income withholding notice is to be prepared and served only if the obligor becomes delinquent in paying the order for support.

**By their signatures on this order and/or by a separate written agreement, the parties have provided for an alternative arrangement for the payment of support, which is approved by the Court, and is consistent with applicable law. The agreement SHALL NOT provide for the payment of support directly to the Circuit Clerk unless specifically authorized and directed by the Court.** An income withholding notice is to be prepared and served only if the obligor becomes delinquent in paying the order for support.

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**ALL SUPPORT PAYMENTS ARE TO BE MADE: (CHECK ONLY ONE)**

**This line must be checked if Notice to Withhold Income is issued immediately.**

**Payable** through income withholding to the **STATE DISBURSEMENT UNIT** and sent to State Disbursement Unit, P.O. Box 5400, Carol Stream, IL 60197-5400. Payments must include CASE NUMBER, COUNTY of the court issuing this Order (GRUNDY), and obligor's name and social security number.

**Payable DIRECTLY BY THE OBLIGOR to the STATE DISBURSEMENT UNIT** and sent to the State Disbursement Unit, P.O. Box 5400, Carol Stream, IL 60197-5400. Payments must include CASE NUMBER, COUNTY of the court issuing this Order (GRUNDY), and obligor's name and social security number.

**Payable** in accordance with the written agreement of the parties.

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**IT IS FURTHER ORDERED THAT:**

In addition to and separate from amounts ordered to be paid as child support or maintenance, the obligor shall pay a \$36 per year Child Support and Separate Maintenance Collection Fee. **This sum shall be paid directly to the Clerk of the Circuit Court of Marshall County at 122 N. Prairie St, PO Box 328, Lacon, IL 61540 and NOT to the State Disbursement Unit.**

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**[ ] HEALTH INSURANCE:**

The ( ) obligor, ( ) obligee, ( ) obligor **and** obligee, shall provide health insurance for the child(ren) either by enrolling them in any health insurance coverage available through the ( ) obligor's, ( ) obligee's, ( ) obligor's and obligee's, employment or ( ) securing a private health insurance policy, accepted by the obligor **and** obligee or approved by the Court, which names the child(ren) as beneficiary. Both the obligor and the obligee shall be provided a copy of the insurance policy and the insurance card. The name of the health insurance provider and the number of the insurance policy regarding dependent benefits/coverage are as follows:

\_\_\_\_\_  
Name of Health Insurance Provider:

\_\_\_\_\_  
Policy No:

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**IT IS FURTHER ORDERED THAT:**

The obligor shall notify the court and, in cases in which a party is receiving child and spouse services under Article X of the IL Public Aid Code, the Dept. of Healthcare and Family Services, **within 7 days**, (i) of the name and address of any new employer of the supporting parent, (ii) whether the supporting parent has access to health insurance coverage through the employer or other group coverage and, if so, the policy name and number and the names of persons covered under the policy, except only the initials of any covered minor(s) shall be included, and (iii) of any new residential mailing address or telephone number of the supporting parent.

Each parent shall report to the other parent and to the clerk of court **within 10 days** each time either parent obtains new employment, and each time either parent's employment is terminated for any reason. The report shall be in writing and shall, in the case of new employment, include the name and address of new employer.

The obligor and obligee shall advise each other of a change in residence **within 5 days** of the change except when the court finds that the physical, mental, or emotional health of a party or that of a child, or both, would be seriously endangered by disclosure of the party's address.

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**ADDITIONAL CONDITIONS OR FINDINGS:**

**[ ] Child Support payment amount deviates from the amount required by statutory minimum guidelines.**

The amount of support that would have been required under the guidelines is \$ \_\_\_\_\_.

Reasons for deviation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

[ ] Other (child care, health care, extra curricular activities and school expenses, tax exemption(s), etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IT IS FURTHER ORDERED THAT** the Child Support Data Sheet attached hereto is made a part of this order. The Clerk of the Court shall impound the Child Support Data Sheet until further order of this court.

**IT IS SO ORDERED.**

**ENTERED:** \_\_\_\_\_  
DATE

\_\_\_\_\_  
JUDGE

**ALL FINDINGS, TERMS AND CONDITIONS APPROVED AND AGREED TO:**

\_\_\_\_\_  
PETITIONER

\_\_\_\_\_  
RESPONDENT

\_\_\_\_\_  
ATTORNEY FOR PETITIONER

\_\_\_\_\_  
ATTORNEY FOR RESPONDENT

**FAILURE TO OBEY ANY OF THE PROVISIONS OF THIS ORDER MAY RESULT IN A FINDING OF CONTEMPT OF COURT.**

Clerk of the Circuit Court  
Marshall Co. Courthouse  
122 N. Prairie St, PO Box 328  
Lacon, IL 61540-0328  
(309) 246-6435