F.C.A .§ 413(3)(d) Form 4-20

(Motion to Vacate

Adjusted Order of

Support)

1/2024

FAMILY COURT OF THE STATE OF NEW YORK

COUNTY OF

...........................................................................................

In the Matter of a Proceeding under Article 4 of the DOCKET NO.

Family Court Act,

NOTICE OF MOTION Petitioner TO VACATE ADJUSTED

ORDER OF SUPPORT

-against-

Respondent

............................................................................................

I, the □ Petitioner □ Respondent in the

above-entitled proceeding move to vacate the adjusted order of support entered in

the above-entitled proceeding on

The Motion will be heard in the County Family Court located

at on , at in the □ morning □ afternoon.

Attached is an affirmation in support of this Motion to Vacate the Adjusted Order of Support in which I state that personal jurisdiction over me was not timely obtained.

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

Signature of □ Petitioner □ Respondent

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

Print or type name

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

Signature of Attorney, if any

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

Attorney’s Name (Print or Type)

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

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

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

Attorney’s Address and Telephone Number

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_