

FAMILY COURT OF THE STATE OF NEW YORK
COUNTY OF

.....
In the Matter of a Proceeding for Support

Docket No.

(Commissioner of Social Services, Assignor,
on behalf of _____, Assignee)

FINDINGS OF FACT

Petitioner

-against-

Respondent.

.....
_____, being the Support Magistrate before whom the issues of support in the above-entitled proceeding were assigned for determination, makes the following findings of fact: [check applicable boxes]:

1. Petitioner and Respondent were:

married on [specify date]: _____, and

are still husband and wife were divorced on [specify date]:

never married to each other.

2. The following children were born of this marriage [specify]:

There are no children born of this marriage.

3. a. Respondent is liable for the support of the following child(ren): [specify]:

Name of Child Child's Date of Birth

b. The basis of, or reason for, Respondent's liability is [specify]:

Respondent is not liable for the support of the children.

4. a. The following child(ren) [state name(s)]:

reside with Petitioner.

b. The following child(ren) [state name(s)]:

reside with Respondent.

5. a. Petitioner: filed a net worth statement or financial disclosure affidavit.
 did not file a net worth statement or financial disclosure affidavit
and did did not have good cause for not filing.
- b. Respondent: filed a net worth statement or financial disclosure affidavit.
 did not file a net worth statement or financial disclosure affidavit
and did did not have good cause for not filing.

6. The basic child support obligation for support of the following child(ren) [specify name(s)]:

is \$ _____ weekly every two weeks monthly twice per month quarterly.

7. The mother is the custodial non-custodial parent, whose pro rata share of the basic child support obligation is \$ _____ weekly every two weeks monthly
 twice per month quarterly.

8. The father is the custodial non-custodial parent, whose pro rata share of the basic child support obligation is \$ _____ weekly every two weeks monthly
 twice per month quarterly.

9. Petitioner has available health insurance coverage under [specify plan]:

This plan: covers the following children [specify]:

with the following contribution or premium paid by Petitioner

\$ _____ weekly every two weeks monthly twice per month quarterly.

can be extended to cover the following children [specify]:

with the following contribution or premium paid by Petitioner

\$ _____ weekly every two weeks monthly twice per month quarterly.

This plan contains the following benefits: medical dental prescription drugs optical other health care benefits [specify]: _____

Respondent has available health insurance coverage under [specify plan]:

This plan: covers the following children [specify]:

with the following contribution or premium paid by Petitioner

\$ _____ weekly every two weeks monthly twice per month quarterly.

can be extended to cover the following children [specify]:

with the following contribution or premium paid by Petitioner

\$ _____ weekly every two weeks monthly twice per month quarterly.

This plan contains the following benefits: medical dental prescription drugs optical other health care benefits [specify]: _____

Neither Petitioner nor Respondent have available health insurance coverage.

10. a. Health insurance coverage for the children is ordered as follows:

Petitioner is directed to continue the health insurance coverage for the following child(ren) [specify]: _____ with costs to be allocated between the parties as follows [specify]: _____

Petitioner is directed to enroll the following child(ren) [specify]: _____ in the above-named health insurance plan, effective [specify date]: _____, with costs to be allocated between the parties as follows [specify]: _____

Respondent is directed to continue the health insurance coverage for the following child(ren) [specify]: _____ with costs to be allocated between the parties as follows [specify]: _____

Respondent is directed to enroll the following child(ren) [specify]: _____ in the above-named health insurance plan, effective [specify date]: _____, with costs to be allocated between the parties as follows [specify]: _____

The custodial parent [specify]: _____ shall immediately apply to enroll the child(ren) in the NYS "Child Health Plus Program" or the New York State Medical Assistance Program or the publicly funded health insurance program in the State where the custodial parent resides. If the child(ren) is/are accepted into the "Child Health Plus Program," the cost of the premiums or family contribution shall be allocated between the parties as follows:

b. The allocation between the parties of costs of medical premiums or contributions in paragraph a :

is prorated in the same proportion as each parent's income is to the combined parental income.

is not prorated in the same proportion as each parent's income is to the combined parental income, because that would be unjust or inappropriate for the following reason(s) [specify]: _____

OR

c. [Where the child(ren) are recipients of coverage under the managed care coverage under the New York State Medical Assistance Program]

i. The monthly premium for managed care coverage under the New York State Medical Assistance Program is \$_____.

- ii. The monthly amount that would be required as a family contribution under the state's child health insurance plan pursuant to title one-a of article twenty-five of the public health law (Child Health Plus) for the child(ren) if they were in a two-parent household with income equal to the combined income of the non-custodial and custodial parents is \$_____.
- iii. Five percent (5%) of the non-custodial parent's gross income is \$_____.
- iv. The non-custodial parent's obligation for managed care coverage under the New York State Medical Assistance Program is \$_____.
- v. The obligation for managed care coverage under the New York State Medical Assistance Program would reduce the non-custodial parent's income below the self-support reserve. Therefore the non-custodial parent's obligation is \$_____.
- vi. The non-custodial parent's obligation for managed care coverage under the New York State Medical Assistance Program is for the period from _____ to _____ is \$_____.

[Where the child(ren) are recipients of coverage under fee for service coverage under the New York State Medical Assistance Program]

- i. The annual amount that would be required as a family contribution under the state's child health insurance plan pursuant to title one-a of article twenty-five of the public health law (Child Health Plus) for the child(ren) if they were in a two-parent household with income equal to the combined income of the non-custodial and custodial parents is \$_____.
- ii. Five percent (5%) of the non-custodial parent's gross income is \$_____.
- iii. The non-custodial parent's obligation for fee for service coverage under the New York State Medical Assistance Program is \$_____ annually.
- iv. The non custodial parent's obligation for fee for service coverage under the New York State Medical Assistance Program for the balance of the current calendar year is \$_____.
- v. The obligation for fee for service coverage under the New York State Medical Assistance Program would reduce the non-custodial parent's income below the self-support reserve. Therefore the non-custodial parent's obligation is \$_____ annually. The non custodial parent's obligation for the balance of the current calendar year is \$_____.
- v. The non-custodial parent's obligation for fee for service coverage under the New York State Medical Assistance Program is for the period from _____ to _____ is \$_____.

11. The non-custodial parent's pro rata share of the basic child support obligation is:

ordered without deviation;

would be unjust inappropriate, based upon consideration of the following

factor(s) in Family Court Act §413(l)(f) [specify factor(s) and reason(s)]:

12. [Applicable only where the parties have agreed or stipulated to an order of child support, pursuant to Family Court Act §413(1)(h)]:

The parties have voluntarily stipulated to child support for the following child(ren)[specify]:

payable by [specify]: _____ to [specify]: _____

in the amount of \$ _____ weekly every two weeks monthly

twice per month quarterly, such stipulation having been entered into the record and reciting, in compliance with Section 413(l)(h) of the Family Court Act that:

- a. The parties have been advised of the provisions of Section 413(l) of the Family Court Act;
- b. The unrepresented party, if any, has received a copy of the child support standards chart promulgated by the Commissioner of the New York State Office of Temporary and Disability Assistance pursuant to Section 111-i of the Social Services Law;
- c. The basic child support obligation as defined in Family Court Act Section 413(l) presumptively results in the correct amount of child support to be awarded; and
- d. The parties' reason(s) for agreeing to child support in an amount different from the basic child support obligation (is)(are) [specify]: _____

13. [Applicable to determinations of petitions for wilful violation under F.C.A. §454]:

a. Respondent willfully failed to obey the order of this Court as follows [specify]: _____

Respondent did not willfully fail to obey the order of this Court.

b. Respondent showed the following good cause for failing to make application for relief from the judgment or order directing payment of support prior to the accrual of the alleged arrears: [set forth facts and circumstances constituting good cause; *see* F.C.A. §451]: _____

Respondent did not show good cause for failing to make application for relief from the judgment or order directing payment of support prior to the accrual of the alleged arrears.

c. The request for the following relief [specify]: _____

is denied for the following reasons(s) [specify; *see* F.C.A. §454]: _____

14. [Applicable in petitions for modification]:

The following facts constitute a change of circumstances [specify]: _____

No change in circumstances has been found.

15. The following appendices are attached and made a part of these Findings of Fact:

Appendix A Appendix B Other [specify]:

16. The following are additional findings of fact:¹

Dated:

Support Magistrate

¹ These may include, among others: potential for support; other child support obligations; support payments previously made; efforts to supplement income; efforts to find employment; and findings regarding child care, educational expenses and accident and life insurance.

Appendix A
Itemization of Income and Deductions of Custodial
and Non-Custodial Parents
[Family Court Act §§413(1)(b), 413(1)(c), 413(1)(f), 416]

CUSTODIAL PARENT

Mother Father

Gross (Total) Income

- | | | |
|----|---|----------|
| 1. | Gross (total) income (as should have been or should be reported in most recent federal income tax return) | \$ _____ |
| 2. | Investment income (not already included in item 1), reduced by sums expended in connection with the investments | \$ _____ |
| 3. | Income or compensation voluntarily deferred or income from the following sources (not already included in items 1 or 2) | |
| a. | deferred compensation | \$ _____ |
| b. | worker's compensation | \$ _____ |
| c. | disability benefits | \$ _____ |
| d. | unemployment insurance benefits | \$ _____ |
| e. | social security benefits | \$ _____ |
| f. | veterans benefits | \$ _____ |
| g. | pensions and retirement benefits | \$ _____ |
| h. | fellowships and stipends | \$ _____ |
| i. | annuity payments | \$ _____ |
| 4. | Income based upon former resources or income | \$ _____ |
| 5. | Self-employment deductions (not already included in items 1 or 2) | |
| a. | depreciation deduction | \$ _____ |
| b. | entertainment and travel allowances | \$ _____ |
| 6. | Other ² | \$ _____ |
| | | |
| 7. | GROSS INCOME | \$ _____ |

² See Family Court Act Section 413, subd. 1(b)(5)(iv) and (v)

Deductions

- 8. Unreimbursed employee business expenses (except to extent expenses reduce personal expenditures) \$ _____
- 9. Alimony or maintenance actually paid to non-party spouse pursuant to court order or agreement \$ _____
- 10. Alimony or maintenance actually paid or to be paid to party-spouse pursuant to court order or agreement \$ _____
- 11. Child support actually paid pursuant to court order or agreement for non-party child \$ _____
- 12. Family assistance \$ _____
- 13. Supplemental Security Income \$ _____
- 14. N.Y.C. or Yonkers income taxes \$ _____
- 15. Federal Insurance Contributions Act (FICA) taxes \$ _____
- 16. TOTAL DEDUCTIONS \$ _____

Health Insurance: Insurance available? yes no

- 17. CUSTODIAL PARENT'S NET INCOME \$ _____

NON-CUSTODIAL PARENT

Mother Father

Gross (Total) Income

1. Gross (total) income (as should have been or should be reported in most recent federal income tax return) \$ _____

2. Investment income (not already included in item 1), reduced by sums expended in connection with the investments \$ _____

3. Income or compensation voluntarily deferred or income from the following sources (not already included in items 1 or 2)
 - a. deferred compensation \$ _____
 - b. worker's compensation \$ _____
 - c. disability benefits \$ _____
 - d. unemployment insurance benefits \$ _____
 - e. social security benefits \$ _____
 - f. veterans benefits \$ _____
 - g. pensions and retirement benefits \$ _____
 - h. fellowships and stipends \$ _____
 - i. annuity payments \$ _____

4. Income based upon former resources or income \$ _____

5. Self-employment deductions (not already included in items 1 or 2)
 - a. depreciation deduction \$ _____
 - b. entertainment and travel allowances \$ _____

6. Other³ \$ _____

7. GROSS INCOME \$ _____

³ See Family Court Act Section 413, subd. 1(b)(5)(iv) and (v)

Deductions

- 8. Unreimbursed employee business expenses (except to extent expenses reduce personal expenditures) \$ _____
- 9. Alimony or maintenance actually paid to non-party spouse pursuant to court order or agreement \$ _____
- 10. Alimony or maintenance actually paid or to be paid to party-spouse pursuant to court order or agreement \$ _____
- 11. Child support actually paid pursuant to court order or agreement for non-party child \$ _____
- 12. Family assistance \$ _____
- 13. Supplemental Security Income \$ _____
- 14. N.Y.C. or Yonkers income taxes \$ _____
- 15. Federal Insurance Contributions Act (FICA) taxes \$ _____
- 16. TOTAL DEDUCTIONS \$ _____

Health Insurance: Insurance available? yes no

- 17. NON-CUSTODIAL PARENT'S NET INCOME \$ _____

Appendix B
**Itemization of Income and Deductions of Custodial
and Non-Custodial Parents**
[FCA §§413(1)(a), 413(1)(b), 413(1)(c), 413(1)(f)]

1. Petitioner's weekly monthly expenses are: [itemize]:
2. Petitioner's weekly monthly sources of income are: [itemize]:
3. Respondent's weekly monthly expenses are: [itemize]:
4. Respondent's weekly monthly sources of income are: [itemize]:
5. The weekly monthly needs of the following children are: [itemize as to each child]: