

Nassau County Family Court Information Concerning the Filing of Objections and Rebuttal in a Proceeding Before a Support Magistrate

You have received a copy of an order of support signed by a support magistrate and a copy of the support magistrate's findings of fact upon which the order is based. This order must be obeyed.

Either party has a right to file specific written objections to this order with the clerk of the court. These objections must be filed within thirty (30) days of the date the order was received in court or personally served, or, if the order was received by mail, within thirty-five (35) days of the mailing of the order. The objections then will be reviewed by a judge of the family court. Even if objections are filed, the amount ordered by the support magistrate must continue to be paid unless and until a judge signs a different order. Note that if you were not in court for the hearing and this order was issued on default, you may not file objections but may challenge the order only by filing a motion to vacate the order.

Procedure for Filing Objections

1. The objections must be in writing and contain the name and docket number of the case and the date the order to which objections are being raised was issued.
2. The reasons for your objections and the parts of the order objected to must be clearly stated.
3. The opposing party must be served with a copy of the objections, either in person or by mail, and an affidavit of service must be filled out. The clerk of the court will make a sample objections form and affidavit form available.
4. The original of the objections and the affidavit of service must be filed with the clerk of the court within thirty (30) days of the date the order was received in court or personally served or, if the order was received by mail, within thirty-five (35) days of the mailing of the order.
5. A transcript will not be necessary unless the judge requires one. If so, the clerk of the court will provide information on how to obtain a duplicate copy of the recording or a transcript. The person filing objections must pay the cost for the duplicate recording or transcript.
6. Even if the judge does not require a transcript, either party may request a duplicate recording or transcript, and the requesting party must pay the fee.
7. If an objecting party cannot afford to pay for a duplicate recording or transcript, when it is required by the judge, the clerk of the court will provide information about the procedure for requesting the court's permission to obtain the transcript without charge.
8. The party served with objections has a right to file a rebuttal. A rebuttal is an answer to the objections.

Procedure for Filing a Rebuttal

1. A rebuttal to objections must be in writing and contain the name and docket number of the case.
 2. It must state the date the objections were received, the specific objections being answered and the reasons for the rebuttal.
 3. The rebuttal must be filed with the clerk of the court. The opposing party must be served with a copy of the rebuttal, either in person or by mail, within thirteen (13) days after service of the objections, and an affidavit of service must be filled out. The clerk of the court will make a sample affidavit of service available.
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Nassau County Family Court - Additional Information and Requirements

1. Black ink must be used to prepare the objections or rebuttal.
2. You must sign the objections or rebuttal and an original must be submitted.
3. Service by mail or in person must be made on the opposing party by someone over the age of 18 who is not a party to the action. An original affidavit of service completed by the person who serves must be notarized and submitted with the objections or with the rebuttal.
4. A Nassau County Family Court Information Sheet should also be submitted along with your objections or with the rebuttal.
5. All forms necessary to file objections or a rebuttal, including these instructions, are available in Room 108 of the Nassau County Family Court at 1200 Old Country Road, Westbury, NY 11590, or at:

www.nycourts.gov/courts/10jd/nassau/family.shtml .
6. Objections are not appropriate after an order that was issued upon inquest (by default because the respondent did not appear) or upon dismissal for non-appearance by the petitioner. To request that an order issued upon inquest or a dismissal for non-appearance be vacated, a written motion to be heard by the assigned support magistrate may be filed.
7. In addition, objections are not appropriate after a temporary order was issued or for an order issued upon agreement or stipulation.
8. A rebuttal, which must be served on the opposing party within thirteen (13) days after service of objections, must also be filed with the clerk of the court within that time frame.
9. Please note that all applications including objections and motions must follow the applicable laws and contain sufficient facts and or evidence for the relief requested to be considered. You may wish to consult an attorney for advice particular to your circumstances.

FAMILY COURT OF THE STATE OF NEW YORK
COUNTY OF NASSAU

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Petitioner _____
 First M.I. Last

-AGAINST-

Respondent _____
 First M.I. Last

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OBJECTIONS to
Support Magistrate Order

File # _____
Docket # _____

I am a party in the above-entitled proceeding and I object to the Order of Support Magistrate
_____, dated ____ / ____ / ____, which directs [print specific
terms of the order]: _____

I object to the order upon the following grounds [print specific reasons for each part that you
are objecting to]: _____

[print name]

[sign name]

**Please print legibly and in black ink.
Attach additional pages if necessary.**

**AFFIDAVIT OF PERSONAL SERVICE
of Objections or Rebuttal to a
Support Magistrate Order**

STATE OF _____)
COUNTY OF _____) :ss.:

File # _____
Docket # _____

I, _____, being duly sworn, depose and say:
[print name of person serving papers]

1. That I am at least 18 years of age and not a party to the action, and reside at:

[print address of person serving papers - street/city/state/zip code]

2. On the _____ day of _____, 20__ at _____ a.m./p.m.
[circle one]

at _____,
[print address/place where papers were served - street/city/state/zip code]

I personally served the (objections) (rebuttal) on _____
[circle one] [print name of person served]

in the above-mentioned action, by delivering to and leaving copies of each with
_____ at said time and place.
[print name of person served]

3. I knew the person so served to be _____.
[print name of person served]

4. Description of person served:

sex: _____, color of skin: _____, color of hair: _____,
approximate approximate approximate
age: _____, height: _____, weight: _____,
other identifying features:

Sworn to before me this _____
day of _____, 20__

Person serving papers [sign name before a notary]

Notary Public

**Please print legibly and in black ink.
This affidavit is not valid unless notarized.**

**AFFIDAVIT OF SERVICE BY MAIL
of Objections or Rebuttal to a
Support Magistrate Order**

STATE OF _____)
COUNTY OF _____) :ss.:

File # _____
Docket # _____

I, _____, being duly sworn, depose and say:
[print name of person mailing papers]

1. That I am at least 18 years of age and not a party to the action, and reside at:

[print address of person mailing papers - street/city/state/zip code]

2. On the _____ day of _____, 20____, I served the within
(objections) (rebuttal) on _____, the
[circle one] [print name of person served]
(petitioner) (respondent) herein, by depositing a true copy of the same securely
[circle one]
in a postpaid wrapper, in a Post Office official depository under the exclusive care and
custody of the United States Postal Service within the State of _____,
directed to said (petitioner) (respondent) at:
[circle one]

[print address of person served - street/city/state/zip code]

Sworn to before me this _____
day of _____, 20____

Person serving papers [sign name before a notary]

Notary Public

**Please print legibly and in black ink.
This affidavit is not valid unless notarized.**

Nassau County Family Court Information Sheet

Every box must be filled in. If you do not know the information, print the word UNKNOWN.

Petitioner (Person filing petition)							
Name: (First)		(M.I.)		(Last)			
Alias or Nickname: (First)		(Last)					
Date of Birth:			Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female				
Race: <input type="checkbox"/> American Indian/Alaskan Native		<input type="checkbox"/> Asian/Pacific Islander			<input type="checkbox"/> Black		
<input type="checkbox"/> Other		<input type="checkbox"/> Unknown			<input type="checkbox"/> White		
Ethnic Origin: <input type="checkbox"/> Hispanic		<input type="checkbox"/> Non Hispanic			<input type="checkbox"/> Unknown		
Social Security #: - -		Height: ft. in.	Weight: lbs.	Eye Color:		Hair Color:	
Distinguishing Marks:							
Driver's License ID #:				State:			
Address: (Street)							
(City)		(State)			(Zip Code)		
Address Confidential? <input type="checkbox"/> Yes <input type="checkbox"/> No		Home Phone #: () -		Work Phone #: () -		Cell Phone #: () -	
Employer's Name:							
Employer's Address:							
Respondent (Person you are filing petition against)							
Name: (First)		(M.I.)		(Last)			
Alias or Nickname: (First)		(Last)					
Date of Birth:			Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female				
Race: <input type="checkbox"/> American Indian/Alaskan Native		<input type="checkbox"/> Asian/Pacific Islander			<input type="checkbox"/> Black		
<input type="checkbox"/> Other		<input type="checkbox"/> Unknown			<input type="checkbox"/> White		
Ethnic Origin: <input type="checkbox"/> Hispanic		<input type="checkbox"/> Non Hispanic			<input type="checkbox"/> Unknown		
Social Security #: - -		Height: ft. in.	Weight: lbs.	Eye Color:		Hair Color:	
Distinguishing Marks:							
Driver's License ID #:				State:			
Address: (Street)							
(City)		(State)			(Zip Code)		
Address Confidential? <input type="checkbox"/> Yes <input type="checkbox"/> No		Home Phone #: () -		Work Phone #: () -		Cell Phone #: () -	
Employer's Name:							
Employer's Address:							