



**PEACEFUL SEPARATIONS
MODIFICATION WORKSHEET** (this is NOT a legal document)

	MOTHER	FATHER
FULL Legal Name (not initials): First/Middle/Last (Jr.? Sr.? III?)		
Physical street address and apt. number (No PO Boxes) City/State/Zip Code		
County (not 'country')		
Contact phone number		
Mailing Address (if different) City/State/Zip Code (PO box okay here)		
Contact email		
Social Security Number		
Birthdate		
Birthplace (State)		
Employer Name		
Employer Physical Address (location where you go to for work) Employer City/State/Zip		
Employer Phone		
Driver's License (ID) Number		

In which county was your original divorce filed in? (circle one) **Snohomish** **Lincoln**

Date original divorce was finalized? _____

Case number: _____

(Please bring in copies of the court documents that you will be modifying)

What documents need to be modified? **Order of Child Support** ____ **Parenting Plan** ____

Number of children born alive of this marriage: _____

Who is the requesting party for this action? (circle one) **Mother** **Father**

Who was the "petitioner" in the original case (circle one) **Husband** **Wife**

NOTE: Requesting party and petitioner must match for past Peaceful Separations clients

CHILDREN'S INFORMATION

(this is NOT a legal document)

Full legal name of all minor children of either party (first/middle/last)	Sex	Date of Birth	Is the child from a <u>previous</u> relationship? (If yes, is it the petitioner or respondent's child?)	Social Security Number	Primary Parent is Mom, Dad, or 50/50?

Who will claim the child(ren) as a tax credit? _____

Is your family currently receiving TANF or DSHS Medical Coupons (not Apple Health)? (circle one) Yes No
 Have the children ever been involved in any other legal proceedings such as adoption or third party custody? If yes, please give **case number, court name and date final**. _____

Have the children lived anywhere other than Washington or with anyone other than you or your spouse in the past five years? If yes, tell us city and state where you lived and the date you moved to Washington. _____

What is the school year visitation schedule for the non-custodial parent? (check one)

___ From Friday at _____ am/pm until Sunday at _____ am/pm every other week with a mid-week visit from _____ pm until _____ pm every Wednesday (you may substitute another day here).

___ **(50/50 plan)** From Sunday at _____ am/pm until the following Sunday at the same time of day, alternating between parents every other week.

___ From Thursday after school until Monday before school every other week with an overnight visit on the opposite week from after school Thursday until before school on Friday.

___ Other: **(MUST BE SPECIFIC)** _____

How should the winter school break visitation be divided? (check one)

___ With mother for the first half of the break and with father for the last half of the break in even years. (Opposite in odd-years).

___ With mother for the first half of the break and with father for the last half of the break in odd years. (Opposite in even-years).

___ With mother for the whole break in even years and with father for the whole break in odd years.

___ With father for the whole break in even years and with mother for the whole break in odd years.

___ Other: **(MUST BE SPECIFIC)** _____

How should the mid-winter school break visitation be divided? (check one)

- With mother for the first half of the break and with father for the last half of the break in even years. (Opposite in odd-years).
 - With mother for the first half of the break and with father for the last half of the break in odd years. (Opposite in even-years).
 - With mother for the whole break in even years and with father for the whole break in odd years.
 - With father for the whole break in even years and with mother for the whole break in odd years.
 - Other: **(MUST BE SPECIFIC)**
-

How should the spring school break visitation be divided? (check one)

- With mother for the first half of the break and with father for the last half of the break in even years. (Opposite in odd-years).
 - With mother for the first half of the break and with father for the last half of the break in odd years. (Opposite in even-years).
 - With mother for the whole break in even years and with father for the whole break in odd years.
 - With father for the whole break in even years and with mother for the whole break in odd years.
 - Other: **(MUST BE SPECIFIC)**
-

How should the summer visitation schedule be managed? (check one)

- With mother for the first two weeks of the months June, July and August, and with father for the last two weeks of each month.
 - With father for the first two weeks of the months June, July and August, and with the mother for the last two weeks of each month.
 - Same as the school year visitation schedule with each parent having a two week visitation, the date of which would be negotiable between the parents each year.
 - All of June and the first two weeks of July with the mother, the last two weeks of July and all of August with the father.
 - All of June and the first two weeks of July with the father, the last two weeks of July and all of August with the mother.
 - Other: **(MUST BE SPECIFIC)**
-
-
-

Put a check next to the holidays the mother should have in even years and the father should have in odd years (those left blank will be the reverse, mother will have in odd years, father in even years):

- Martin Luther King's Birthday President's Day Memorial Day Independence Day
- Labor Day Thanksgiving Christmas Eve Christmas Day New Year's Eve/Day

MOTHER'S FINANCIAL DECLARATION

Both parties in a legal action with minor children must complete and submit a financial declaration.

This questionnaire is designed to provide all the information to comply with this rule. Please fill it out **completely**.

Name: _____ Occupation: _____

Are you presently employed? ___ yes ___ no Where do you work? _____

If you are currently employed, what is your current income **before taxes** from the following sources:

Wages and Salaries: _____ (check one) Yearly? ___ Monthly? ___ Hourly? ___

Net Business Income (business owners only): _____

Spousal Maintenance received from other relationships: _____

Income from second job: _____ Interest and Dividends: _____

Other Income: _____ Source of Other Income: _____

What pre-tax deductions do you have monthly from your income and how much is deducted for each?

State Industrial (**NOT** L&I): _____ Mandatory Union Dues: _____

Pension/401k/IRA monthly contributions: _____

Spousal Maintenance Paid (to other relationships): _____

Do you have insurance coverage for your children? ___ yes ___ no

Do **you** pay for the insurance coverage for your children? ___ yes ___ no, the other parent pays ___ it's free

If yes, how much is the cost to cover **ONLY** the children's portion? _____

(Do not include the cost for yourself or a spouse. Ex: If the cost to cover yourself is \$100 and the cost to cover you and your children together is \$150, then the cost for the children's portion would be \$50).

Does this coverage come from Washington's Apple Health Program? ___ yes ___ no

Does your employer/union pay all health insurance premiums? ___ yes ___ no

If you are **NOT** employed, when did you last work? _____

If you are **NOT** employed, what were your previous monthly earnings **before taxes**? _____

FATHER'S FINANCIAL DECLARATION

Both parties in a legal action with minor children must complete and submit a financial declaration.

This questionnaire is designed to provide all the information to comply with this rule. Please fill it out **completely**.

Name: _____ Occupation: _____

Are you presently employed? ___ yes ___ no Where do you work? _____

If you are currently employed, what is your current income **before taxes** from the following sources:

Wages and Salaries: _____ (check one) Yearly? ___ Monthly? ___ Hourly? ___

Net Business Income (business owners only): _____

Spousal Maintenance received from other relationships: _____

Income from second job: _____ Interest and Dividends: _____

Other Income: _____ Source of Other Income: _____

What pre-tax deductions do you have monthly from your income and how much is deducted for each?

State Industrial (**NOT** L&I): _____ Mandatory Union Dues: _____

Pension/401k/IRA monthly contributions: _____

Spousal Maintenance Paid (to other relationships): _____

Do you have insurance coverage for your children? ___ yes ___ no

Do **you** pay for the insurance coverage for your children? ___ yes ___ no, the other parent pays ___ it's free

If yes, how much is the cost to cover **ONLY** the children's portion? _____

(Do not include the cost for yourself or a spouse. Ex: If the cost to cover yourself is \$100 and the cost to cover you and your children together is \$150, then the cost for the children's portion would be \$50).

Does this coverage come from Washington's Apple Health Program? ___ yes ___ no

Does your employer/union pay all health insurance premiums? ___ yes ___ no

If you are **NOT** employed, when did you last work? _____

If you are **NOT** employed, what were your previous monthly earnings **before taxes**? _____

Peaceful Separations Service Agreement

At this point in time my modification is uncontested and the worksheets have been filled out as accurately as possible. All worksheets have been reviewed and approved by the petitioner and respondent in this case. If my modification becomes contested in the future, I realize that I may need to retain an attorney to reach an agreement on any contested issues, and that I may have to switch my case to a local county. I understand that any additional court costs and attorney fees incurred because of a contested modification would be separate from the preparation fee of Peaceful Separations..

I agree to pay Peaceful Separations \$_____ (No Personal Checks) to prepare the following documents needed in my dissolution case based on the information I have given them in my case:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Summons | <input checked="" type="checkbox"/> Petition for Modification |
| <input checked="" type="checkbox"/> CIF | <input checked="" type="checkbox"/> Findings of Fact and Conclusions of Law |
| <input checked="" type="checkbox"/> Proposed Parenting Plan | <input checked="" type="checkbox"/> Final Parenting Plan |
| <input checked="" type="checkbox"/> Acceptance of Service | <input checked="" type="checkbox"/> Child Support Worksheets |
| <input checked="" type="checkbox"/> Order of Child Support | <input checked="" type="checkbox"/> Order on Modification |

I understand that fees are not refundable once work has begun on my case, and that any further revisions of my documents will result in a charge of \$10 per document. I realize that there will be a separate court fee of \$86 payable to the court for the filing of my documents.

I confirm under penalty of perjury by signing below both parties to this action have reviewed these worksheets.

_____	_____	_____
Petitioner's Signature	Petitioner's Name Printed	Date

Jody Studdard, WSBA #26574
Supervising Attorney for Peaceful Separations

Please return this page with your worksheets. You will receive a copy of this agreement.