IN THE SUPERIOR COURT FOR THE STATE OF ALASKA
AT FAIRBANKS

)
)
)
) CASE NO. _____
)
) **MOTION FOR EMPLOYER-REPORTED WAGES IN DEFAULT CASE**
_____)

[This form may only be used in default cases in Fairbanks.]

1. I am making this request in order to establish, modify, or enforce a child support obligation.

2. I am ☐ Parent A ☐ Parent B ☐ the custodian of the children in this case.

3. I request that the court obtain employer-reported wage information about the following parent(s) from the Child Support Services Division (CSSD):

   ☐ Parent A's Name: _____ Date of Birth: _____
   ☐ Parent B's Name: _____ Date of Birth: _____

4. I understand that employer-reported wage information is available from CSSD only if I have an open case with CSSD or submit an application for CSSD services.

   ☐ An application for CSSD services is attached.
   ☐ There is already an open case with CSSD. CSSD #: _____

_____
Signature of person making request

_____
Print or type name

_____
Date

Notice to Opposing Parties: You have the right to file a response to this motion. Forms and instructions (CIV-808 Packet) are available at courts and at www.courts.alaska.gov/forms/index.htm. File your response at (court address): _____. You must also mail a copy to the person who filed the motion. You must respond within 10 days if the motion was personally served on you or within 13 days from the date of mailing if the motion was mailed to you.

Certificate of Distribution:

I certify that on (date) _____ I sent a copy of this request to:

☐ Parent A or Parent A's attorney named _____
☐ Parent B or Parent B's attorney named _____
☐ Custodian named _____

Signature _____