

CUSTODY ANSWER PACKET

FORMS FOR ANSWERING A CHILD CUSTODY COMPLAINT

<i>Form Number</i>	<i>Form Name</i>
WHERE CAN I FIND INSTRUCTIONS?	
<u>DR-445</u>	<p>Instructions for answering a child custody complaint are online at</p> <p><u>https://public.courts.alaska.gov/web/forms/docs/dr-445.pdf</u></p> <p>Printed copies are available for customers with limited or no internet access.</p>
WHAT IS INCLUDED IN THIS PACKET?	
<u>DR-450</u>	Answer to Complaint for Custody
<u>DR-314</u>	Information Sheet
<u>DR-150</u>	Child Custody Jurisdiction Affidavit
<u>DR-305</u>	Child Support Guidelines Affidavit
<u>DR-306</u>	Shared Custody Child Support Calculation
<u>DR-315</u>	Application for CSED Services
<u>DR-316</u>	Information about CSED
OTHER INFORMATION	
<u>Attorneys who do unbundled legal services</u>	<p>If you need help with your case, you may want to talk to a lawyer. The Lawyer Referral Service at the Alaska Bar Association can give you names of lawyers who handle family law cases, including some who do “unbundled legal services” (limited services instead of representing you for the whole case). Go to https://alaskabar.org/for-our-community/unbundled-legal-services/ or call (907) 272-0352 or (800) 770-9999 for more information.</p>
<u>Family Law Self-Help Center</u>	<p>For help filling out these forms, visit the Family Law Self-Help Center’s website at https://courts.alaska.gov/shc/family/index.htm.</p> <p>Or call (907) 264-0851 (in Anchorage and outside Alaska) or (866) 279-0851 (toll free in Alaska but outside of Anchorage).</p>

June 2025
Alaska Court System

The statutes, court rules, and forms in this packet are available on the court’s website:
www.courts.alaska.gov/forms.

Name: _____ Date of Birth: _____

Mailing Address: _____

[You must provide a mailing address for the court and other parties to mail required documents to you. That address may be in care of another person, as long as you will timely receive all papers sent to you.]

Email: _____ Phone: _____

By providing an email address, I agree that the court and other parties can send me court documents at this email address.

[Fill out the case caption below exactly the same as on the complaint.]

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA
AT _____

Parent A: _____

Parent B: _____ Case No. _____

ANSWER AND COUNTERCLAIM TO COMPLAINT FOR CUSTODY OF MINOR CHILDREN

I, _____ [your name], state that the following facts are true and respond to Parent A's complaint as follows:

A. ANSWER

- ☐ I agree with all of the statements in the complaint.
- ☐ I agree with the statements in the complaint, **except** for [list the specific section numbers and letters you disagree with]: _____
- ☐ I am not sure if I agree or disagree with the statements in these sections of the complaint: _____

B. AFFIRMATIVE DEFENSES

Affirmative defenses are facts or legal arguments that prevent Parent A from bringing this court case at all. An affirmative defense might win you the case even if everything in the complaint is true.

- ☐ I have no affirmative defenses. [Go to Section C.]
- ☐ I state the following affirmative defenses. [Check all sections below that apply.]
1. ☐ This court does not have subject-matter jurisdiction (authority) to decide custody of the minor children, because: [**Note:** Attach *Child Custody Jurisdiction Affidavit*, form [DR-150](#), to this answer form to support this defense.]
- ☐ The children have never lived or been present in Alaska.
- ☐ The children do not currently live in Alaska and have not lived in Alaska since _____.
- ☐ The children currently live in Alaska, but it has been less than six months.
- ☐ Another court has already decided custody issues about the children.
- ☐ I attached a *Motion to Dismiss for Lack of Jurisdiction*. [You can use form [TF-706](#).]

2. ☐ The location of this case is not correct. The case should have been filed at the courthouse in _____ [name of city or town].

☐ I attached a *Motion to Change Venue*. [You can use form [TF-706](#).]

3. ☐ Other:

C. COUNTERCLAIMS

A counterclaim is where you tell the court what you want to happen in the case.

☐ I have no counterclaims. [Go to Section D.]

☐ I have stated above that the case should be dismissed, because the Alaska court does not have jurisdiction over the children. If the court does not dismiss the case, I make the following counterclaims without waiving my claim about the court's lack of jurisdiction:

☐ I make the following counterclaims:

1. Parenting Plan

A. Decision-Making. [How the parents will make important decisions about the children. For example: educational, medical, and religious decisions.]

Joint Decision-Making: both parents discuss the issues and decide together, because they can communicate about the children, even though they may not get along otherwise. Joint decision-making is the most common arrangement.

Sole Decision-Making: one parent makes decisions about the children, because the parents are not able to communicate about the children, or one parent is unfit due to severe mental illness, substance abuse, or domestic violence issues. Both parents usually have access to school and medical records, both parents have the authority to make a decision in an emergency when the child is with them, and neither parent can move out of the state with the children without permission from the court or the other parent.

Because it is in the best interests of the children, I request:

☐ joint decision-making.

☐ sole decision-making to ☐ me. ☐ Parent A.

B. Living Arrangements. [The children's schedule. Which parent the children will physically be with and live with **on particular days and times**.]

Usual schedule during the week or year: [Be as specific as possible.]

Special schedule for summer or other vacation periods (spring break, winter break, etc.):

Special arrangements for holidays and birthdays:

Other:

You may also attach one of the following forms to show the parenting schedule:

- ☐ Weekly Scheduling Chart, SHC-1132 [Word](#) | [PDF](#)
☐ Custody & Visitation Plan, SHC-1120 [Word](#) | [PDF](#)

- C. Travel costs necessary for each parent to spend time with the children should be divided as follows:

- D. Safety Concerns.

[**Note:** a history of domestic violence can significantly affect the parenting plan in your case. If one or both parents have a history of domestic violence, as defined by the law, the court may be limited in the kind of parenting plan it can order. If this applies to your situation, **you are strongly encouraged to discuss the situation with a lawyer.**]

- ☐ I am concerned about the children's safety around Parent A, because:

Therefore, I request that Parent A's parenting time be restricted as follows:

2. Child & Medical Support

Information about child support:

To calculate child support, figure out the percentage of time during the year the children will be with each parent based on the number of overnights.

1. Look at an annual calendar and count the days each parent will have overnights with the children.
2. To figure out what percentage of the year the children will have overnights with each parent, divide the total number of overnights with each parent by 365, then multiply that number by 100.
3. If there are 109 overnights or fewer for one parent, fill out form [DR-305](#) only. If **both parents** have 110 overnights or more, fill out both form [DR-305](#) and form [DR-306](#). If you have a less common schedule, see [ak-courts.info/css](#).

For links to many school calendars:

<http://www.courts.alaska.gov/shc/family/docs/calendars.pdf>.

For a one-page annual calendar without school dates: www.timeanddate.com/calendar/.

To learn more about child support: <http://courts.alaska.gov/shc/family/support.htm>.

- ☐ I completed and attached **required** *Child Support Guidelines Affidavit*, form [DR-305](#).
- ☐ I am proposing a **shared parenting time schedule** (the children are with each parent at least 110 overnights per year), so I have **also** completed and attached *Shared Custody Child Support Calculation*, form [DR-306](#).
- ☐ I attached *Divided Custody Child Support Calculation*, form [DR-307](#), because I am proposing that type of parenting plan. [See the form for a description.]
- ☐ I attached *Hybrid Custody Child Support Calculation*, form [DR-308](#), because I am proposing that type of parenting plan. [See the form for a description.]
- A. Civil Rule 90.3 Calculation. [You can read the full rule at [ak-courts.info/civrules](#).]
- ☐ The Court should enter child support according to the formula in Civil Rule 90.3.
- ☐ The Court should vary from Civil Rule 90.3, because: [**Note:** variances are rare.]

B. Child Support should start on:

- ☐ the date when Parent A and I stopped being in a relationship: _____
- ☐ the birthdate of the child: _____
- ☐ the date when the court signs the final order.
- ☐ other: _____

C. Income and Employment Information.

My Current or Most Recent Employer: _____

Address: _____

Dates of Employment: _____

Parent A's Current or Most Recent Employer: _____

Address: _____

Dates of Employment: _____

I believe that Parent A:

- ☐ is making approximately \$_____ per ☐ hour ☐ year at their current job.
☐ has a work history of being able to make \$_____ per ☐ hour ☐ year
as a _____ [type of job].

I used this amount for Parent A when I filled out form [DR-305](#).

- D. Child support can continue while the child is 18 years old, if the child is (1) not married, (2) actively pursuing a high school diploma or equivalent level of training, and (3) living as a dependant with a parent.

Do you want support to continue while the children are 18 years old? ☐ Yes ☐ No

- E. Has Child Support Enforcement Division (CSED), any other child support agency, or any state or tribal court ordered anyone to pay child support for the children?

☐ Yes ☐ No

If yes, who was ordered to pay? ☐ Me ☐ Parent A ☐ _____

[Attach copy of child support order if you have it. Read about registering orders from another state or tribe at <http://www.courts.alaska.gov/shc/family/shcforeign.htm>.]

- F. Has anyone applied for public benefits (ATAP, TANF, SNAP, etc.) to support these children? ☐ No ☐ Yes, name of person: _____

- G. Do you want CSED to enforce the child support order and keep records of the payments? ☐ No ☐ Yes [Fill out form [DR-315](#) and attach it, or apply online at www.childsupport.alaska.gov.]

- H. The court must order immediate income withholding from the person ordered to pay child support, unless there is an exception under Alaska Statute 25.27.062(m). If you want to ask for an exception, explain below:

3. Other Financial Issues

- A. Alaska Permanent Fund Dividend (PFD)

☐ The children are not eligible to receive a PFD currently and/or will not be eligible to receive one in the future.

☐ The children are eligible to receive a PFD or will be in the future.

I request that the court designate ☐ me ☐ Parent A ☐ _____
as the authorized person to apply for the children's PFDs.

☐ The children's PFDs must be placed in a savings account. Both parents will have access to the account records, and both parents must agree before spending any money from the accounts.

☐ The PFDs may be spent on the children's expenses, in their best interests.

☐ Other arrangement for spending or saving the children's PFDs:

B. Alaska Native Corporation (ANC) Dividend

- ☐ The children are not eligible to receive an ANC dividend currently and/or will not be eligible to receive one in the future.
- ☐ The children are eligible to receive an ANC dividend or will be in the future.
- ☐ ANC dividends must be placed in a savings account. Both parents will have access to the account records, and both parents must agree before spending any money from the accounts.
- ☐ ANC dividends may be spent on the children's expenses, in their best interests.
- ☐ Other arrangement for spending or saving the children's ANC dividends:

C. Federal Taxes

- ☐ I request that the court designate ☐ me ☐ Parent A to claim all the children as dependents on federal income taxes
- ☐ every year.
- ☐ in alternating years, where I will have ☐ odd years. ☐ even years.
- ☐ I request that I claim the following children every year on my federal income taxes: _____
- and Parent A claim the following children every year on their federal income taxes: _____
- ☐ Other arrangement for claiming the children as dependents on federal income taxes:

4. Paternity

Do you need to establish paternity for one or more of the children (for example, you need to add the biological father to the birth certificate)? ☐ Yes ☐ No

[If yes, complete the chart below.]

Child's Name	Affidavit of Paternity? (Y or N)	DNA Test Done? (Y or N)	DNA Test Planned? (Y or N)	Name (if any) of Father Listed on Birth Certificate

- ☐ More children needing paternity establishment are listed on an attachment.

I attached the following documents to establish paternity:

- ☐ *Three-Way Affidavit to Disestablish and Establish Paternity*, form [DR-521](#)
- ☐ A completed DNA test
- ☐ *Motion and Affidavit for Genetic (DNA) Testing*, form [DR-530](#), because I need the court to order the other parent to do a DNA test

5. Other requests or information I want the court to know about:

REQUEST FOR RELIEF

I REQUEST that the court:

1. Enter a final order granting the parenting plan according to section C.1 of this answer;
2. Calculate child support and enter a child support order according to section C.2 of this answer;
3. Enter a final order regarding financial matters related to the children, according to section C.3 of this answer;
4. ☐ Establish paternity for the children according to section C.4 of this answer and order the birth certificates to be amended;
5. ☐ Other: _____

I attached the following **REQUIRED** forms:

- ☐ *Child Custody Jurisdiction Affidavit*, form [DR-150](#)
- ☐ *Child Support Guidelines Affidavit*, form [DR-305](#)
- ☐ *Information Sheet*, form [DR-314](#)

I attached the following **additional** documents:

- ☐ *Shared Custody Child Support Calculation*, form [DR-306](#)
- ☐ *Application for CSED Services*, form [DR-315](#)
- ☐ Copy of child support order from another court or child support agency
- ☐ Proposed Parenting Plan
- ☐ Other: _____

Date

Signature

Use of TrueFiling ([Administrative Bulletin No. 92](#) - AB 92)

1. See if TrueFiling is available for your case type and court location at [ak-courts.info/tfcourts](#).
2. If available, you **must** use TrueFiling unless you are exempt. You are exempt if one of these applies:
 - You are in a jail or correctional facility.
 - You have a disability under the Americans with Disabilities Act (ADA).
 - You do not have safe access to a computer, internet, or email.
 - You cannot access the help you need to use TrueFiling.
 - You have a language barrier or are Limited English Proficient.

You do not need to prove you are exempt. If you are exempt **and** you choose not to use TrueFiling, check and sign the text box below. If you sign below, you can only give documents to the court by mail or in person. You cannot email them.

☐ I certify that I am exempt from using TrueFiling for a reason listed in AB 92.

Signature: _____ Print or Type Name: _____

****See instructions for the REQUIRED service on the next page.****

You must give a copy of this form (and everything attached to it) to every party in the case. This is called "service."

Use TrueFiling to serve the other party if:

- Both you and the other party are using TrueFiling.
- You are using TrueFiling and the other party gave their email address to the court.

Use the Certificate of Service below if:

- The other party is not using TrueFiling and did not give their email address to the court.
- TrueFiling is not available - check TrueFiling availability at <https://ak-courts.info/tfcourts>
- You are exempt from using TrueFiling.

Certificate of Service

I certify on _____ at _____ [date/time] I gave a copy of this document **and** any attachments by ☐ mail. ☐ hand-delivery. ☐ TrueFiling. ☐ email. [You can only use email if the other party provided an email address to the court].

I served these people: _____

Signature: _____

Information about Filing and Serving Your Answer & Next Steps

You have 20 days after you receive the complaint to file your answer and any attachments to it. If the due date is a weekend or holiday, your answer is due the next day the court is open. For example, if you count 20 days and it ends on a Saturday, and the court is open Monday, your answer is due Monday. Count 20 days from

- the date you signed the certified mail restricted delivery receipt, or
- the date the process server delivered the court documents.

File your documents in the court where the case was started and serve Parent A

Even if you ask to change the court location, you must still file your answer in the same court where Parent A filed the complaint.

1. File with the Court.

Using TrueFiling: Create a TrueFiling account and log in. Upload this answer and all attachments as one "bundle." See the User Guide at ak-courts.info/tfhowto.

Not Using TrueFiling: Make two copies of this answer and all attachments: one copy for your records and one copy for Parent A. Bring the original to the court in person or mail it (court directory: ak-courts.info/dir). Make sure to mail it early enough for the court to get it before the 20-day deadline.

2. Service. If Parent A has a lawyer, you must serve the lawyer instead of serving Parent A directly.

If both of you use TrueFiling, you will complete service through TrueFiling. If not, service varies. See ak-courts.info/tfservice for instructions.

What to expect after you file your answer and serve a copy on Parent A

If you do not file an answer, Parent A can ask the judge to decide the case without hearing from you. This is called "default." Read more at ak-courts.info/default.

After you file your answer, the court will set a hearing and send you a notice with the date, time, and location of the hearing.

For more help, call the Family Law Self-Help Center at (907) 264-0851 or (866) 279-0851. Or visit the self-help website at ak-courts.info/family.



Clerk: This form is CONFIDENTIAL and must be kept in a confidential envelope or file.

Information Sheet

Case Number: _____ Court Location: _____

- ☐ I am not filling out the following three paragraphs because an Information Sheet providing all this information has already been filed in this case and I agree the information is correct.

1. Full Name of Party A/Parent A: _____

Date of Birth: _____ Social Security No.* _____

2. Full Name of Party B/Parent B: _____

Date of Birth: _____ Social Security No.* _____

3. Children Involved in This Case:

<u>Full Name of Child</u>	<u>Date of Birth</u>	<u>Social Security Number*</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I certify that the above information is correct.

[If you are filing an uncontested case together with the other party, **both** must sign below.]

_____	_____	_____
Date	Signature of Party 1	Print or Type Name of Party 1

_____	_____	_____
Date	Signature of Party 2	Print or Type Name of Party 2

* Disclosure of social security numbers is mandatory under AS 25.24.210(f), AS 18.50.280(a) and 42 USC 666(a)(13). The numbers may be used to insure compliance with the child support order.

If disclosure of the information on this form could harm the health, safety or liberty of you or your children, then you are not required to give a copy of this form to the other party. Instead, file this form at the court with form [DR-151](#) which is available online or from the court clerk. AS 25.30.380(e).

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA AT _____

Case Name:

☐ _____, Parent A (Plaintiff/Petitioner)
_____, Parent B (Defendant/Respondent)

☐ In the Matter of: _____

☐ _____ Case No. _____

CHILD CUSTODY JURISDICTION AFFIDAVIT

Name (include first, middle, and last): _____

Email: _____ Phone: _____

By providing an email address, I agree that the court and other parties can send court documents to me at this email address.

Mailing Address: _____

☐ This is an uncontested case and both parents are filling out this affidavit together.

[You **must both sign** this form at the end.]

☐ I agree with the *Child Custody Jurisdiction Affidavit* already filed by _____, so I am not completing the rest of this form. [You still **must sign** this form at the end.]

1. These children are the subject of the current custody proceedings:

CHILD 1				
First Name		Middle Name	Last Name	
Date of Birth		Place of Birth	Gender	
Current Address (since ____/____/____)		Who has custody?	Relationship	
Past Addresses (last 5 years)		City and State	Who did this child live with then? (name and current address)	Relationship
From	To			

CHILD 2				
First Name		Middle Name	Last Name	
Date of Birth		Place of Birth	Gender	
Current Address (since ____/____/____)		Who has custody?	Relationship	
Past Addresses (last 5 years)		City and State	Who did this child live with then? (name and current address)	Relationship
From	To			

CHILD 3				
First Name		Middle Name		Last Name
Date of Birth		Place of Birth		Gender
Current Address (since ____/____/____)		Who has custody?		Relationship
Past Addresses (last 5 years)		City and State	Who did this child live with then? (name and current address)	Relationship
From	To			

CHILD 4				
First Name		Middle Name		Last Name
Date of Birth		Place of Birth		Gender
Current Address (since ____/____/____)		Who has custody?		Relationship
Past Addresses (last 5 years)		City and State	Who did this child live with then? (name and current address)	Relationship
From	To			

CHILD 5				
First Name		Middle Name		Last Name
Date of Birth		Place of Birth		Gender
Current Address (since ____/____/____)		Who has custody?		Relationship
Past Addresses (last 5 years)		City and State	Who did this child live with then? (name and current address)	Relationship
From	To			

[Attach extra pages if there are more than 5 children. Write only on one side of the page.]

2. Have you participated as a party, witness, or in another capacity in another proceeding about the custody of any of the children listed above or about visitation with them?

☐ Yes ☐ No

If yes, describe the other custody proceeding:

Name of the court: _____

Case number: _____ Date: _____

Court's decision: _____

3. Do you know of a proceeding that could affect this proceeding (such as a proceeding about domestic violence, protective orders, child-in-need-of-aid, termination of parental rights, adoption, or enforcement of a court order)?

☐ Yes ☐ No

If yes, identify the court: _____

Case number: _____

Type of the proceeding: _____

4. Do you know of anybody who is not a party to this proceeding who has physical custody of any of the children listed above, or claims they have a right to physical custody, legal custody, or visitation? ☐ Yes ☐ No

If yes, list each person's name, address, and what the person claims:

I say on oath or affirm under penalty of perjury that my statements in this affidavit are true to the best of my knowledge and belief.

Type or Print Name

Signature (sign in front of a notary)

Subscribed and sworn to or affirmed before me at _____ on _____

Court clerk, notary public, or other person
authorized to administer oaths

My commission expires _____

Type or Print Name

Signature (sign in front of a notary)

Subscribed and sworn to or affirmed before me at _____ on _____

Court clerk, notary public, or other person
authorized to administer oaths

My commission expires _____

[NOTE: All parties have a continuing duty to tell the court of any other court proceeding in Alaska or any other state concerning the children listed above.]

****See instructions for the REQUIRED service on the next page.****

You must give a copy of this form (and everything attached to it) to every party in the case. This is called "service." If you are filling this out together with the other parent, you do **not** have to serve it on each other.

Use TrueFiling to serve the other party if:

- Both you and the other party are using TrueFiling.
- You are using TrueFiling and the other party gave their email address to the court.

Use the Certificate of Service below if:

- The other party is not using TrueFiling and did not give their email address to the court.
- TrueFiling is not available - check TrueFiling availability at <https://ak-courts.info/tfcourts>
- You are exempt from using TrueFiling.

Certificate of Service

I certify on _____ at _____ *[date/time]* I gave a copy of this document **and** any attachments by ☐ mail. ☐ hand-delivery. ☐ TrueFiling. ☐ email. *[You can only use email if the other party provided an email address to the court].*

I served these people: _____

Signature: _____

NOTE

Download this form to your local device and then reopen it with PDF software (such as Adobe) before filling it out. If you fill it out in your internet browser, the programming on the form may not work correctly.

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA AT _____

_____)	
Parent A (Plaintiff or Co-Petitioner))	
_____)	
Parent B (Defendant or Co-Petitioner))	CASE NO. _____
_____)	

**CHILD SUPPORT
GUIDELINES AFFIDAVIT**

For more information about income and deductions, see Civil Rule 90.3. (ak-courts.info/civrules)

☐ I attached a copy of my most recent tax return, 3 pay stubs, and documents needed to show my deductions to verify this information.

[**Important:** delete social security numbers & account numbers from any documents you attach.]

☐ I did not attach supporting documents, because: _____

The amounts below are ☐ **MONTHLY.** ☐ **YEARLY.** [You must check one for the math on this form to work. If you decide to change from monthly to yearly (or yearly to monthly) after you start filling out the form, then start over with a blank form, or some fields may not work.]

A. Income¹ [Do not list ATAP or SSI below.]	PARENT A	PARENT B
Gross wages or salary	_____	_____
Value of employer-provided housing, food, etc. ²	_____	_____
Unemployment compensation	_____	_____
Alaska PFD (divide by 12 if using monthly amounts)	_____	_____
_____	_____	_____
_____	_____	_____
TOTAL INCOME	_____	_____
B. Deductions Allowed under Civil Rule 90.3		
Federal, state, and local income tax	_____	_____
Social security tax or self-employment tax	_____	_____
Medicare tax	_____	_____
Employment security tax (SUI)	_____	_____
Mandatory union dues	_____	_____
Mandatory retirement or pension plan contributions	_____	_____
Voluntary retirement contributions ³	_____	_____
Spousal support (alimony) ordered and currently paid	_____	_____
Child support or in-kind support for prior children ⁴	_____	_____
Work-related child care for children in this case	_____	_____
Health insurance premiums for parent ⁵	_____	_____
Life insurance premiums for eligible beneficiaries ⁶	_____	_____
_____	_____	_____
TOTAL DEDUCTIONS	_____	_____

¹ Other common examples of income are self-employment and rental income, "gig" work, Alaska Native dividends, disability (VA, SSDI, worker's comp), investment earnings, and pensions. This is not a full list.

² Put employer or military provided COLA, and military BAH and BAS, on this line.

³ Only if plan earnings are tax-free or tax-deferred. When added to mandatory retirement contributions, this deduction cannot be more than 7.5% of total income.

⁴ "Prior children" are children from a different relationship born or adopted before the children in this case. For more information, see "Prior Child Deduction Chart" (<https://ak-courts.info/pcdchart>).

⁵ This deduction cannot be more than 10% of total income.

⁶ "Eligible beneficiaries" are the other parent in this case and all children that you and the other parent have together. If there are additional beneficiaries of the policy, divide the premium by total number of beneficiaries, then multiply that number by eligible beneficiaries. The maximum deduction is \$1200 per year (\$100 per month).

C. Adjusted Annual Income	PARENT A	PARENT B
1. If TOTAL INCOME from section A is monthly , multiply by 12 and write the amount here. If yearly , repeat the amount from section A here:	_____	_____
2. If TOTAL DEDUCTIONS from section B are monthly , multiply by 12 and write the amount here. If yearly , repeat the amount from section B here:	_____	_____
3. Subtract line 2 from line 1 to get NET INCOME:	_____	_____
4. If line 3 is more than \$138,000, write \$138,000 here. If not, repeat line 3 here:	_____	_____
5. If TOTAL INCOME from line 1 is \$30,000 or less , subtract \$7,500 from line 1 and write the amount here. If line 1 is more than \$30,000, then repeat line 4 here:	_____	_____
6. Compare the amounts on lines 4 and 5. Write the smaller amount of those two lines here:	_____	_____
D. Multiply Adjusted Annual Income from line C.6 by:		
.20 for one child,		
.27 for two children,	x _____	x _____
.33 for three children, and		
.03 more for each additional child		
TOTAL	_____	_____

ANNUAL CHILD SUPPORT _____ (Amount from TOTAL line in paragraph D or \$600, whichever is larger .)
--

E. Monthly Child Support Payment [Types of custody are defined in [Civil Rule 90.3\(f\)](#).]

☐ 1. Primary Custody. The children will stay with one parent for 70% (256) or more of their overnights during the year. Take the Annual Child Support amount of the parent who does **not** have the children most of the year and divide by 12: \$ _____
to be paid each month by ☐ Parent A. ☐ Parent B.

☐ 2. Shared Custody. [Attach form [DR-306](#).]
The children will stay with each parent at least 30% (110) of the overnights during the year. Child support payment (line 10 of DR-306): \$ _____
to be paid by ☐ Parent A. ☐ Parent B.

☐ 3. Divided Custody. [Attach form [DR-307](#).]
Each parent will have primary custody of one or more of the children, and the parents will not share custody of any of the children.
Child support payment (section 6 of DR-307): \$ _____
to be paid by ☐ Parent A. ☐ Parent B.

☐ 4. Hybrid Custody. [Attach form [DR-308](#).]
The parents share custody of at least one child, and one or both parents have primary custody of a different child or children.
Child support payment (section 8 of DR-308): \$ _____
to be paid by ☐ Parent A. ☐ Parent B.

F. Health Care Coverage for the Children

1. Health Insurance

- a. Are the children eligible for services through any of the following?
☐ Parent A's employer or union ☐ Parent B's employer or union
☐ Indian Health Service ☐ TriCare (Military) ☐ Denali KidCare (Medicaid)
- b. Do the children have other health insurance or care available? ☐ Yes ☐ No
Describe: _____
- c. Health insurance for the children ☐ is being ☐ will be purchased by:
☐ Parent A at a monthly cost to Parent A of \$ _____*
☐ Parent B at a monthly cost to Parent B of \$ _____*
through the above person's ☐ employer ☐ union ☐ _____
whose name and address is: _____

The cost will be divided between the parents ☐ equally. ☐ unequally, because:

* List only the cost to insure the children involved in this case. If there is no extra cost to the parent to include children in the parent's own coverage, none of the cost can be included as part of child support. For more info, see "Children's Health Insurance Costs" (ak-courts.info/cshealthinsurance).

2. Health Care Expenses Not Covered by Insurance

Should uninsured health care expenses of the children (up to \$5,000 per calendar year) be shared equally by the parents? ☐ Yes ☐ No, because:

G. Monthly Child Support Payment (after adjusting for health insurance costs)

["Obligor" is the parent who owes support. "Obligee" is the parent who receives support.]

1. Monthly Child Support Payment from paragraph E above: \$ _____
2. If obligor is buying health insurance for the children, subtract 50% (or _____%) of the monthly insurance payment. - \$ _____
3. If obligee is buying health insurance for the child(ren), add 50% (or _____%) of the monthly insurance payment. + \$ _____
4. NET MONTHLY CHILD SUPPORT PAYMENT \$ _____

H. Seasonal Income. Is obligor's income seasonal? ☐ Yes ☐ No

[If yes, you can ask the court for unequal monthly payments under Civil Rule 90.3(c)(5).]

You MUST sign on the next page.

Signature Instructions

If you are filing this form together with the other parent, you must **both** sign below. If you are filing this alone, you only need to fill out the first signature section. Sign in front of a notary. A court clerk can provide this notary service for you for free. Bring a photo ID with you for the notarization. If you do not have access to a notary or court clerk, attach *Self-Certification (No Notary Available)*, form [TF-835](#).

I swear or affirm that everything I wrote in this affidavit and any attachments is true to the best of my knowledge and belief.

_____ Date	_____ Signature	_____ Print or Type Name
Subscribed and sworn to or affirmed before me in _____ on _____		
(SEAL)	_____ Court clerk, notary public, or other person authorized to administer oaths. My commission expires: _____	

I swear or affirm that everything I wrote in this affidavit and any attachments is true to the best of my knowledge and belief.

_____ Date	_____ Signature	_____ Print or Type Name
Subscribed and sworn to or affirmed before me in _____ on _____		
(SEAL)	_____ Court clerk, notary public, or other person authorized to administer oaths. My commission expires: _____	

Service Instructions

You must give a copy of this form (and everything attached to it) to every party in the case. This is called "service." If you are filing this form together with the other parent, you do not need to serve each other.

Use TrueFiling to serve the other party if:

- Both you and the other party are using TrueFiling.
- You are using TrueFiling and the other party gave their email address to the court.

Use the Certificate of Service below if:

- The other party is not using TrueFiling and did not give their email address to the court.
- TrueFiling is not available - check TrueFiling availability at <https://ak-courts.info/tfcourts>
- You are exempt from using TrueFiling.

Certificate of Service

I certify on _____ at _____ [date/time] I gave a copy of this document **and** any attachments to the other parent by:

☐ mail ☐ hand-delivery ☐ TrueFiling. ☐ email. [You can only use email if the other parent provided an email address to the court.]

Signature: _____

SHARED CUSTODY CHILD SUPPORT CALCULATION

Case Number: _____

Parent A (Plaintiff/Co-Petitioner): _____

Parent B (Defendant/Co-Petitioner): _____

Instructions: Attach this form to [DR-305](#), *Child Support Guidelines Affidavit* or to [DR-105](#), *Petition for Dissolution of Marriage*, to explain the child support calculation if the parents will have "shared physical custody" per Civil Rule 90.3(f). "Shared physical custody" means that all of the children will stay with each parent at least 30% (110) of the overnights during the year.

	PARENT A	PARENT B
1. Adjusted annual income (from line C.6 on form DR-305 or from page 4, line C.6 on form DR-105):	\$ _____	\$ _____
2. Multiply line 1 by:		
.20 for one child		
.27 for two children		
.33 for three children and	x _____	x _____
add .03 for each additional child		
Annual Child Support (if less than \$600, write "\$600" here):	\$ _____	\$ _____
3. Percentage of time each parent will have physical custody:	_____ %	_____ %
4. Percentage of time the other parent will have physical custody:	_____ %	_____ %
5. Multiply line 2 and line 4:	\$ _____	\$ _____
6. Compare amounts in line 5. The higher amount is the parent who will pay support. Subtract the smaller amount from the larger and write the difference in the column of the parent who will pay support (the other parent's line will be blank):	\$ _____	\$ _____
7. Multiply line 6 by 1.5 (one line will be blank):	\$ _____	\$ _____
8. Annual Child Support. For the parent who will pay support, fill in the smaller of line 2 or line 7:	\$ _____	\$ _____
9. Number of payments per year: _____ [This number is almost always 12, once for every month. See Civil Rule 90.3(b)(1)(D) (https://ak-courts.info/civrules) for exceptions.] Months when child support will not be paid: _____		
10. Divide line 8 by line 9 to get Monthly Child Support Payment: \$ _____ to be paid by <input type="checkbox"/> Parent A. <input type="checkbox"/> Parent B. Write this amount on either:		
• form DR-305 , page 2, line E.2. or		
• form DR-105 , page 11, line A.3.b		

Parent A's Signature_____
Parent B's Signature_____
Type or Print Parent A's Name_____
Type or Print Parent B's Name

Notice to Court Clerk

If this application is filed with the court, send the application along with a copy of the child support order to CSED.

APPLICATION FOR CHILD SUPPORT ENFORCEMENT DIVISION (CSED) SERVICES

Court Case No. _____

I am voluntarily applying for the services of the Child Support Enforcement Division (CSED). I understand that CSED will take all actions necessary to enforce the child support order for the children named below. I agree that CSED can enforce the medical support order. I understand that I must provide all the information that CSED needs to enforce the support order.

My Full Name: _____ Birthdate: _____

Previous Names Used: _____

My Contact Information:

Mailing Address (include city/state/ZIP): _____

Phone: _____ ☐ cell ☐ work ☐ other Phone: _____ ☐ cell ☐ work ☐ other

Email: _____

Employer Information: _____

Other Parent's Name: _____ Birthdate: _____

Previous Names Used: _____

Other Parent's Contact Information:

Mailing Address (include city/state/ZIP): _____

Phone: _____ ☐ cell ☐ work ☐ other Phone: _____ ☐ cell ☐ work ☐ other

Email: _____

Employer Information: _____

.....
I am the children's ☐ Parent. ☐ Legal Guardian. ☐ Non-Parent Custodian.

<u>Child's Name</u>	<u>Birthdate</u>	<u>Child's Name</u>	<u>Birthdate</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

☐ A child support order is currently in effect:

Date of order: _____ Court case number: _____

Court location (city and state): _____

Parents' names on order: _____

Date of marriage (if applicable): _____

Date

Applicant's Signature

AS 25.27.265(b) requires parties in child support proceedings to give CSED their social security numbers and other specified information. Your social security number may be used to make sure that you follow the child support order. **You must provide your social security number on form [DR-314](#), *Information Sheet*. This form will be kept confidential.**

Visit CSED's website at www.childsupport.alaska.gov for more information.

INFORMATION ABOUT CSED

July 2023

The Child Support Enforcement Division (CSED) is the state agency responsible for a number of services related to support orders.

What services does CSED provide?

- Establish and enforce an administrative child support order, if there is not already a court order. CSED will also automatically open a case (and therefore enforce the order) if the children are receiving public assistance or if the children are in state custody.
- Enforce a child support order from the court, if the parent or guardian applies for CSED services.
- If CSED established the child support order, review the amount of child support at the request of either parent, to see if it needs to be increased or decreased. CSED will make the necessary changes to an administrative order. If the order is a court order, CSED will advise clients to address these requests with the court.
- Arrange for genetic (DNA) testing where paternity is not agreed upon.
- Locate absent parents.
- Enforce health care coverage for children if it's available to the paying parent through employment or union membership.

How does a parent apply for CSED services?

You must complete an application either through the court or by submitting an online application at www.childsupport.alaska.gov. Your application should provide as much information as possible about the other parent. It must include an affidavit of payments already made or received. Be sure to attach your current custody and support order, and any previous orders you may have in the case.

How does CSED enforce child support orders?

To collect support payments, CSED will notify the paying parent's employer to withhold child support from the parent's wages and to send the money to CSED. CSED will then either give that money to the other parent, or repay the state for public assistance benefits paid on behalf of the children. CSED can also issue orders to "withhold and deliver" other assets, including commissions, retirement checks, bank accounts, Alaska Permanent Fund Dividends, Native Corporation Dividends, IRS tax refunds, stock dividends, and income-producing property.

CSED can file liens against the paying parent's property, as well as revoke state occupational and driver's licenses if that parent does not pay child support. CSED can sue the parent in court for failure to pay child support. CSED charges interest on late payments the last day of the month.

If late or missed payments (called "arrear") continue to go up, certain enforcement actions will automatically start when the amount owed reaches a certain point:

- At \$50, CSED will report to the PFD office.
- At \$150 for TANF arrears and at \$500 for non-TANF arrears, CSED will report to the Federal Offset Program (FOP).
- At \$1,000, CSED will report to the Credit Bureau.
- At either \$2,500 or 12 months unpaid, CSED will report to the Passport office and start property liens.

Note: Native Corporation Dividend funds can only be used to pay debt owed to a parent/guardian.

It is required by federal law that CSED use wage withholding for monthly payments. CSED will tell the paying parent's employer the amount of the child support order, and the employer will send the money each month to CSED. The monthly payment will be broken out in partial payments corresponding to the pay schedule. For example, if the parent is paid twice a month, CSED will ask the employer to garnish half of the monthly child support payment each pay period. Child support payments will not be collected through wage withholding if the paying parent is self-employed or if the court order states something different.

How long does it take for the non-paying parent to receive support payments made to CSED?

CSED will mail the payment to the non-paying parent, or deposit it directly to the parent's bank account, within two business days.

How does a parent sign up for direct deposit?

You may enroll or change your direct deposit information online through <https://my.alaska.gov/>. Select "CSED Member Services Portal" under the Services tab. Call (907) 269-6900 if you have questions or need assistance.

How can I find out about the payment status of my case?

There are several ways to check on the status of your child support payments:

- Call the KIDSLINE at (907) 269-6900 in Anchorage, or (800) 478-3300 outside of Anchorage (select option 2)
- Click on KIDS Online at www.childsupport.alaska.gov, located under "Online Service"
- Log into your CSED Member Services Portal through <https://my.alaska.gov/>

You will need to have your member ID number, which can be found in the introductory letters to both parents. You can also request your member ID number by calling (907) 269-6900 during business hours.

Can CSED also collect spousal support?

Yes, in cases where both child support and spousal support have been ordered, CSED will collect and enforce both types of support obligations. However, CSED cannot collect and enforce spousal support only, nor can CSED establish orders for spousal support. This must be done through the courts.

What if either parent moves out of state?

CSED can continue to collect payments and can coordinate enforcement of the support order with the child support agency in the other state.

**This information was provided by the Alaska Child Support Enforcement Division.
For more information, contact CSED.**

Mailing Address:

550 W. 7th Ave., Ste. 310
Anchorage, AK 99501

Phone: (907) 269-6900 (in Anchorage)
(800) 478-3300 (toll-free, statewide)

Website: www.childsupport.alaska.gov

Email: dor.csed.customerservice.anchorage@alaska.gov

Physical Address:

655 F St.
Anchorage, AK 99501

Fax: (907) 787-3220