

# **MOTION FOR REVIEW AND MODIFICATION OF CHILD SUPPORT**

**M-3**

Resource Center  
1 South Sierra St., Third Floor  
Reno, NV 89501  
775-325-6731  
[www.washoecourts.com](http://www.washoecourts.com)

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**Motion for Review and Modification  
of Child Support  
PACKET M-3**

**Use this motion for review and modification of child support only if the following statements are true:**

- You already have a child support order with the Second Judicial District Court.
- If the child support is being enforced or was setup through the District Attorney's Office, you have already contacted them about wanting to make a change.

**IMPORTANT**

If you are requesting that the court enter a judgement for child support arrears, or you are requesting that the court affirm a past order for arrears, a **schedule of arrears** must be filed with this motion.

The penalty for willfully making a false statement under penalty of perjury is a minimum of 1 year, and a maximum of 4 years in prison, in addition to a fine of not more than \$5,000.00.  
N.R.S. §199.145.

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## **INSTRUCTIONS FOR COMPLETING FORMS**

Carefully read all instructions before starting to fill out any of the forms.

Use **black or blue ink only**. Neatly print or type the information requested.

Do not use correction fluid/tape on the forms.

This packet contains the following forms:

1. Motion for Review and Modification of Child Support
2. Appendix A: Child Support Worksheet
3. General Financial Disclosure\*  
\*The court cannot review your motion without this document.
4. Proof of Service
5. Reply to Opposition to Motion for Review and Modification of Child Support
6. Request for Submission
7. Proof of Service

This packet contains the following additional information:

1. Nevada Statutes regarding child support
2. Child support calculation worksheets

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## INSTRUCTIONS: STEP 1

### Complete the Motion for Review and Modification of Child Support as Shown:

1) Print your name, address, telephone number, and email address.

2) Print the names of the parties, the Case No., and Department No. just as they appear on all other documents in this case.

3) Complete pages 1-6, following the instructions on each page.

1 Code: 2340  
2 Name: \_\_\_\_\_  
3 Address: \_\_\_\_\_  
4 Telephone: \_\_\_\_\_  
5 Email: \_\_\_\_\_  
6 Self-Represented Litigant

7 IN  
8 OF THE SECOND JUDICIAL  
9 IN AND F

11 \_\_\_\_\_, Case No. \_\_\_\_\_  
12 Plaintiff / Petitioner, Dept. No. \_\_\_\_\_  
13 vs.  
14 \_\_\_\_\_, Defendant / Respondent, ✓

16 MOTION FOR REVIEW AND MODIFICATION OF CHILD SUPPORT

17 1. I request the Court review and modify or adjust the child support obligation in this matter. To  
18 the best of my knowledge, the last order for child support in this matter was entered on (date of  
19 last order) \_\_\_\_\_.

20

21

22 2. 

Child's Name	Date of Birth	Current Physical Custody Order
		<input type="checkbox"/> Joint physical custody <input type="checkbox"/> I have Primary/Sole physical custody <input type="checkbox"/> Other parent has Primary/Sole physical custody
		<input type="checkbox"/> Joint physical custody <input type="checkbox"/> I have Primary/Sole physical custody <input type="checkbox"/> Other parent has Primary/Sole physical custody
		<input type="checkbox"/> Joint physical custody <input type="checkbox"/> I have Primary/Sole physical custody <input type="checkbox"/> Other parent has Primary/Sole physical custody
		<input type="checkbox"/> Joint physical custody <input type="checkbox"/> I have Primary/Sole physical custody <input type="checkbox"/> Other parent has Primary/Sole physical custody

23

24

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REV 1/17/20 JDB 1 M3 MOTION

If you have more than one case filed against the other party use the case number from the case in which your child support was ordered.

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INSTRUCTIONS: STEP 1a

## Calculating Child Support using Appendix A

Appendix A does not need to be filed with the Court.

- Use this work sheet to help you calculate the child support.

### APPENDIX A

#### Gross Monthly Income (GMI)

The first step in determining child support is calculating your Gross Monthly Income, the amount of money you make each month *before taxes are deducted*.

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Gross Monthly Income includes money received from employment, social security, unemployment benefits, pension/retirement, interest/investments, etc. Gross Monthly Income DOES NOT include SSI, SNAP, TANF, cash benefits from the county, or child support received. For a full list of incomes included in Gross Monthly Income please see NAC 425.

To calculate your Gross Monthly Income from employment, use one of the tables below:

**Parent 1**

Annual Income	\$
÷ by 12 months =	\$
<b>Employment GMI</b>	

  

Biweekly Income	\$
x26 weeks	\$
÷ by 12 months =	\$
<b>Employment GMI</b>	

  

Weekly Income	\$
x52 weeks	\$
÷ by 12 months =	\$
<b>Employment GMI</b>	

  

Hourly Wage	\$
# of hours worked per week	
hourly wage x hours worked per week	\$
x52 weeks	\$
÷ by 12 months =	\$
<b>Employment GMI</b>	

**Parent 2**

Annual Income	\$
÷ by 12 months =	\$
<b>Employment GMI</b>	

  

Biweekly Income	\$
x26 weeks	\$
÷ by 12 months =	\$
<b>Employment GMI</b>	

  

Weekly Income	\$
x52 weeks	\$
÷ by 12 months =	\$
<b>Employment GMI</b>	

  

Hourly Wage	\$
# of hours worked per week	
hourly wage x hours worked per week	\$
x52 weeks	\$
÷ by 12 months =	\$
<b>Employment GMI</b>	

**Copy the amount of GMI from Employment for each parent into the table on the following page.**

REV 1/17/2020 JDB
Child Support Worksheet

# APPENDIX A

## Gross Monthly Income (GMI)

**The first step in determining child support is calculating your Gross Monthly Income, the amount of money you make each month *before taxes are deducted*.**

Gross Monthly Income includes money received from employment, social security (*Not SSI*), unemployment benefits, pension/retirement, interest/investments, etc. Gross Monthly Income DOES NOT include SSI, SNAP, TANF, cash benefits from the county, or child support received. *For a full list of incomes included in Gross Monthly Income please see NAC 425.*

To calculate your Gross Monthly Income from employment, use one of the tables below:

### Parent 1

Annual Income	\$
÷ by 12 months = <b>Employment GMI</b>	\$

Biweekly Income	\$
x26 weeks	\$
÷ by 12 months = <b>Employment GMI</b>	\$

Weekly Income	\$
x52 weeks	\$
÷ by 12 months = <b>Employment GMI</b>	\$

Hourly Wage	\$
# of hours worked per week	
hourly wage x hours worked per week	\$
x52 weeks	\$
÷ by 12 months = <b>Employment GMI</b>	\$

### Parent 2

Annual Income	\$
÷ by 12 months = <b>Employment GMI</b>	\$

Biweekly Income	\$
x26 weeks	\$
÷ by 12 months = <b>Employment GMI</b>	\$

Weekly Income	\$
x52 weeks	\$
÷ by 12 months = <b>Employment GMI</b>	\$

Hourly Wage	\$
# of hours worked per week	
hourly wage x hours worked per week	\$
x52 weeks	\$
÷ by 12 months = <b>Employment GMI</b>	\$

**Copy the amount of GMI from Employment for each parent into the table on the following page.**

Now that you have determined the GMI from employment, add any money you receive each month from social security, unemployment benefits, pension/retirement, interest/investments, etc. Use the table below to find your Total Gross Monthly Income.

**Parent 1**

**Parent 2**

Employment GMI:	\$
Social Security:	\$
Unemployment:	\$
Pension/Retirement:	\$
Interest/Investments:	\$
Other:	\$
<b>TOTAL GMI:</b>	<b>\$</b>

Employment GMI:	\$
Social Security:	\$
Unemployment:	\$
Pension/Retirement:	\$
Interest/Investments:	\$
Other:	\$
<b>TOTAL GMI:</b>	<b>\$</b>

You should now have your Total Gross Monthly Income. If you or the other parent's Total Gross Monthly Income is less than \$1,956 a month, use the **Low-Income** Child Support Schedule below to complete the following pages. Please continue to the next page.

**Low-Income Child Support Schedule**  
**Child Support Obligation of Low-Income Payers**  
**at 75% to 150% of the 2025 Federal Poverty Guidelines**

Monthly Income Up To	One Child		Two Children		Three Children		Four Children		Five Children	
	Percent	Child Support Amount	Percent	Child Support Amount	Percent	Child Support Amount	Percent	Child Support Amount	Percent	Child Support Amount
\$978	10.56%	\$103	14.52%	\$142	17.16%	\$168	18.48%	\$181	19.80%	\$194
\$1,013	10.75%	\$109	14.79%	\$150	17.48%	\$177	18.82%	\$191	20.16%	\$204
\$1,048	10.95%	\$115	15.05%	\$158	17.79%	\$186	19.16%	\$201	20.53%	\$215
\$1,083	11.14%	\$121	15.32%	\$166	18.11%	\$196	19.50%	\$211	20.89%	\$226
\$1,118	11.34%	\$127	15.59%	\$174	18.42%	\$206	19.84%	\$222	21.26%	\$238
\$1,153	11.53%	\$133	15.86%	\$183	18.74%	\$216	20.18%	\$233	21.62%	\$249
\$1,188	11.73%	\$139	16.12%	\$191	19.05%	\$226	20.52%	\$244	21.99%	\$261
\$1,223	11.92%	\$146	16.39%	\$200	19.37%	\$237	20.86%	\$255	22.35%	\$273
\$1,258	12.11%	\$152	16.66%	\$209	19.69%	\$248	21.20%	\$267	22.71%	\$286
\$1,293	12.31%	\$159	16.92%	\$219	20.00%	\$259	21.54%	\$278	23.08%	\$298
\$1,327	12.50%	\$166	17.19%	\$228	20.32%	\$270	21.88%	\$290	23.44%	\$311
\$1,362	12.70%	\$173	17.46%	\$238	20.63%	\$281	22.22%	\$303	23.81%	\$324
\$1,397	12.89%	\$180	17.73%	\$248	20.95%	\$293	22.56%	\$315	24.17%	\$338
\$1,432	13.09%	\$187	17.99%	\$258	21.26%	\$305	22.90%	\$328	24.54%	\$351
\$1,467	13.28%	\$195	18.26%	\$268	21.58%	\$317	23.24%	\$341	24.90%	\$365
\$1,502	13.47%	\$202	18.53%	\$278	21.90%	\$329	23.58%	\$354	25.26%	\$380
\$1,537	13.67%	\$210	18.79%	\$289	22.21%	\$341	23.92%	\$368	25.63%	\$394
\$1,572	13.86%	\$218	19.06%	\$300	22.53%	\$354	24.26%	\$381	25.99%	\$409
\$1,607	14.06%	\$226	19.33%	\$311	22.84%	\$367	24.60%	\$395	26.36%	\$424
\$1,642	14.25%	\$234	19.60%	\$322	23.16%	\$380	24.94%	\$409	26.72%	\$439
\$1,677	14.45%	\$242	19.86%	\$333	23.47%	\$394	25.28%	\$424	27.09%	\$454
\$1,712	14.64%	\$251	20.13%	\$345	23.79%	\$407	25.62%	\$439	27.45%	\$470
\$1,747	14.83%	\$259	20.40%	\$356	24.11%	\$421	25.96%	\$453	27.81%	\$486
\$1,782	15.03%	\$268	20.66%	\$368	24.42%	\$435	26.30%	\$469	28.18%	\$502
\$1,817	15.22%	\$277	20.93%	\$380	24.74%	\$449	26.64%	\$484	28.54%	\$518
\$1,851	15.42%	\$285	21.20%	\$392	25.05%	\$464	26.98%	\$500	28.91%	\$535
\$1,886	15.61%	\$294	21.47%	\$405	25.37%	\$479	27.32%	\$515	29.27%	\$552
\$1,921	15.81%	\$304	21.73%	\$418	25.68%	\$493	27.66%	\$531	29.64%	\$569
\$1,956	16.00%	\$313	22.00%	\$430	26.00%	\$509	28.00%	\$548	30.00%	\$587

# Child Support Worksheet

## ① Parent 1's Information

Gross monthly income (GMI) includes: employment income, including consistent overtime; interest and investment income; Social Security old-age insurance benefits and disability benefits (SSD), but not supplemental security income (SSI); alimony; military allowances; periodic payments from a pension or retirement plan; and unemployment benefits.

How much is Parent 1's gross monthly income? \$ \_\_\_\_\_

Ⓐ If Parent 1's gross monthly income is less than \$1,956, use the attached low-income child support schedule to identify Parent 1's child support obligation. \$ \_\_\_\_\_

If Parent 1's gross monthly income is less than \$1,956, stop here, and go to line ③.

Ⓑ Multiply the amount of Parent 1's gross monthly income which is more than \$1,956 but less than \$6,000 by

.16 (for 1 child)

.22 (for 2 children)

.26 (for 3 children)

.28 (for 4 children)

Add .02 for each additional child \$ \_\_\_\_\_

Ⓒ Multiply the amount of Parent 1's gross monthly income which is more than \$6,000 but less than \$10,000 by

.08 (for 1 child)

.11 (for 2 children)

.13 (for 3 children)

.14 (for 4 children)

Add .01 for each additional child \$ \_\_\_\_\_

Ⓓ Multiply the amount of Parent 1's gross monthly income which is more than \$10,000 by

.04 (for 1 child)

.06 (for 2 children)

.06 (for 3 children)

.07 (for 4 children)

Add .005 for each additional child \$ \_\_\_\_\_

Ⓔ Parent 1's child support obligation (Add lines B, C, and D) \$ \_\_\_\_\_



**② Parent 2's Information**

Gross monthly income (GMI) includes: employment income, including consistent overtime; interest and investment income; Social Security old-age insurance benefits and disability benefits (SSD), but not supplemental security income (SSI); alimony; military allowances; periodic payments from a pension or retirement plan; and unemployment benefits.

How much is Parent 2's gross monthly income? \$ \_\_\_\_\_

**Ⓐ** If Parent 2's gross monthly income is less than \$1,956, use the attached low-income child support schedule to identify Parent 2's child support obligation. \$ \_\_\_\_\_

If Parent 2's gross monthly income is less than \$1,956, stop here, and go to line ③.

**Ⓑ** Multiply the amount of Parent 2's gross monthly income which is more than \$1,956 but less than \$6,000 by

.16 (for 1 child)

.22 (for 2 children)

.26 (for 3 children)

.28 (for 4 children)

Add .02 for each additional child

\$ \_\_\_\_\_

**Ⓒ** Multiply the amount of Parent 2's gross monthly income which is more than \$6,000 but less than \$10,000 by

.08 (for 1 child)

.11 (for 2 children)

.13 (for 3 children)

.14 (for 4 children)

Add .01 for each additional child

\$ \_\_\_\_\_

**Ⓓ** Multiply the amount of Parent 2's gross monthly income which is more than \$10,000 by

.04 (for 1 child)

.06 (for 2 children)

.06 (for 3 children)

.07 (for 4 children)

Add .005 for each additional child

\$ \_\_\_\_\_

**Ⓔ** Parent 2's child support obligation (Add lines B, C, and D) \$ \_\_\_\_\_

③ **Joint Physical Custody.** Only fill out this section if you are asking for joint physical custody. Skip to ④ if one parent is to be awarded primary physical custody.

**Subtract** the lower earning parent's child support obligation from the higher earning parent's child support obligation.

	Higher		
	\$ _____		
-	Lower		
	\$ _____		
	Child Support Obligation	paid by	Name of higher income parent:
	\$ _____		_____

④ **Adjustments.** (complete all that apply)

- If Parent 1 wants primary or sole physical custody, the court uses the number in ③ as the standard amount of child support Parent 2 would pay.
- If Parent 2 wants to have primary or sole physical custody, the court uses the number in ③ as the standard amount of child support Parent 1 would pay.
- If you want both parents to have joint physical custody, the court uses the number in ③ as the standard amount of child support.

Adjustment Factors	Amount -/+
Any special education needs of the child	\$
A parent's legal responsibility to support others	\$
Value of services contributed by either parent	\$
Any public assistance paid to support the child	\$
Cost of transportation of the child to and from visitation	\$
The relative income of both households.	\$
The obligor's ability to pay	\$
Any other necessary expenses for the benefit of the child(ren)	\$
Total Deviations	\$

⑤ **Final Child Support Amount Requested:**

\$ \_\_\_\_\_ paid by (*name*) \_\_\_\_\_

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## INSTRUCTIONS: STEP 2

### Complete the General Financial Disclosure as Shown:

It is very important that you file this document, without it, the court cannot review your motion.

1) Print your name, address, telephone number, and email address.

2) Print the names of the parties, the Case No., and Department No. just as they appear on all other documents in this case.

3) Complete pages 1-7, following the instructions on each page.

MISC  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Attorney for \_\_\_\_\_  
Nevada State Bar No. \_\_\_\_\_

Second Judicial District Court  
Washoe County, Nevada

_____	Case No. _____
Plaintiff / Petitioner,	Dept. _____
vs.	
_____	
Defendant / Respondent.	

GENERAL FINANCIAL DISCLOSURE FORM

A. Personal Information:

1. What is your full name? (*first, middle, last*) \_\_\_\_\_
2. How old are you? \_\_\_\_\_
3. What is your date of birth? \_\_\_\_\_
4. What is your highest level of education? \_\_\_\_\_

B. Employment Information:

1. Are you currently employed/ self-employed? ( check one)  
 No  
 Yes If yes, complete the table below. Attached an additional page if needed.

Date of Hire	Employer Name	Job Title	Work Schedule (days)	Work Schedule (shift times)

2. Are you disabled? ( check one)  
 No  
 Yes If yes, what is your level of disability? \_\_\_\_\_  
What agency certified you disabled? \_\_\_\_\_  
What is the nature of your disability? \_\_\_\_\_

C. Prior Employment: If you are unemployed or have been working at your current job for less than 2 years, complete the following information.

Prior Employer: \_\_\_\_\_ Date of Hire: \_\_\_\_\_  
Date of Termination: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Page 1 of 7

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## INSTRUCTIONS: STEP 3

### Electronically Filing and Serving the Documents

You will need to upload the original documents to eFlex. EFlex is available online at <https://wcefex.washoecourts.com/>, at the Law Library and the Resource Center.

Scanners are available at the Law Library and the Resource Center.

Sign into your eFlex account using the username and password you created and electronically file the:

- Motion and any Exhibits; and
- General Financial Disclosure.

Make sure to keep the original documents you file for your personal records. File-stamped copies of your documents are available through your eFlex account.

There may be a filing fee charged when documents are filed. Fee information is available at the Resource Center and online at: [www.washoecourts.com](http://www.washoecourts.com).

#### FILING FEE WAIVERS

If you cannot afford the filing fee, you may apply to have your filing fee waived. To apply, you must fill out and file the application found in the **Application for Waiver of Fees and Costs packet**, which may be obtained at the following locations:

- Resource Center, 1 South Sierra Street, Reno, NV, Third Floor
- Law Library, 75 Court Street, Reno, NV, First Floor
- Online at: [www.washoecourts.com](http://www.washoecourts.com) (select the “Forms and Packets” tab on the right-hand-side of the home screen)

Once a document has been electronically filed, a Notice of Electronic Filing will be automatically generated and sent to any electronic filers in the case. All electronic filers have agreed to accept the notice as valid and effective service. This replaces the need for paper service.

If the other party has not yet signed up for electronic filing, or you do not know whether the other party is an electronic filer, please contact the Resource Center. **Additional steps are required to complete service if the other party is not an electronic filer.**

The Notice of Electronic Filing does not replace the Proof of Service (*see* INSTRUCTIONS: STEP 4).

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## INSTRUCTIONS: STEP 4

### Complete the Proof of Service as Shown:

This form must be completed by the person who serves the documents.

1) Print your name, address, telephone number, and email address.

2) Print the names of the parties, the Case No. and Department No. just as they appear in all other documents in this case.

3) Print the name of the person served, and the date served.

4) Mark the box for how they were served. If serving by personal service, certified mail, or postage prepaid, and write the address.

5) The person who serves the document(s) must date, sign, and print their name.

1	Code: 3720
2	Name: _____
3	Address: _____
4	Telephone: _____
5	Email: _____
6	Self-Represented Litigant
7	IN THE FAMILY DIVISION
8	OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
9	IN AND FOR THE COUNTY OF WASHOE
10	_____
11	Plaintiff / Petitioner / Joint Petitioner, Case No. _____
12	vs. Dept. No. _____
13	_____
14	Defendant / Respondent / Joint Petitioner.
15	<u>PROOF OF SERVICE</u>
16	I served a true and correct copy of MOTION FOR REVIEW AND MODIFICATION OF
17	CHILD SUPPORT and GENERAL FINANCIAL DISCLOSURE upon the following people:
18	L. Name: _____ Date: _____
19	By: <input type="checkbox"/> Service by eFlex <input type="checkbox"/> Personal Service
20	<input type="checkbox"/> Certified mail, return receipt attached <input type="checkbox"/> U.S. Mail, postage prepaid
21	<input type="checkbox"/> Other: _____
22	Address where service occurred, if applicable: _____
23	If more room is needed, attach additional sheets.
24	A copy of this Proof of Service has been electronically served, mailed, or personally delivered
25	to all parties or their lawyer.
26	This document does not contain the personal information of any person as defined by
27	NRS 603A.040.
28	Date: _____ Your Signature: _____
	Print Your Name: _____
	REV 9/2018 JCB 1 PROOF OF SERVICE

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## INSTRUCTIONS: STEP 5

### **Filing the Proof of Service**

After service is completed, you must file the Proof of Service with the Court (*See INSTRUCTIONS: STEP 3*). There will not be a filing fee for the Proof of Service.

Without proof of service on the other party, the court cannot consider your request.

### **Time to Respond**

If you served the other party through eFlex or personal service, the other party has fourteen (14) days, beginning the day after service, to file an opposition/response to the request.

If you served the other party by U.S. Mail, the other party has seventeen (17) days, beginning the day after mailing, to file an opposition/response to the request.

If the other party does not oppose/respond within that time, you will file the Request for Submission to send your request to the judge for review. Please skip INSTRUCTIONS: STEP 6 and continue to INSTRUCTIONS: STEP 7.

If the other party does file an opposition/response, you have seven (7) days, beginning the day after service upon you, to file a Reply to the opposition/response. If the other party serves you by U.S. Mail, you have ten (10) days, starting the day after mailing, to file a Reply to the opposition/response. Please continue to INSTRUCTIONS: STEP 6.

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## INSTRUCTIONS: STEP 6

*Only use this form if you have waited the time provided for the other party to respond **AND** the other party has filed an opposition to the motion.*

### Complete the Reply to Opposition as Shown:

1) Print your name, address, telephone number, and email address.

2) Print the names of the parties, the Case No., and Department No. just as they appear on all other documents in this case.

3) Complete pages 1 and 2, following the instructions on each page.

1	Code: 3795
2	Name: _____
3	Address: _____
4	Telephone: _____
5	Email: _____
6	Self-Represented Litigant
7	IN THE FAMILY DIVISION
8	OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
9	IN AND FOR THE COUNTY OF WASHOE
10	_____,
11	Plaintiff / Petitioner, Case No. _____
12	vs. Dept. No. _____
13	_____,
14	Defendant / Respondent,
15	
16	<u>REPLY TO OPPOSITION TO MOTION FOR REVIEW AND</u>
17	<u>MODIFICATION OF CHILD SUPPORT</u>
18	I reply to the Opposition to my Motion for Review and Modification of Child Support as follows:
19	
20	State, in detail, your reply to the other party's statements.
21	
22	
23	
24	
25	
26	
27	
28	
	REV 10/2017 JCB 1 M-3 REPLY

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## INSTRUCTIONS: STEP 7

### Complete the Request for Submission as Shown:

*This document lets the judge know that all the necessary paperwork has been filed and that each person has been given the correct amount of time to respond. It is very important to file this document, it allows your case to move forward.*

1) Print your name, address, telephone number, and email address.

2) Print the names of the parties, the Case No., and Department No. just as they appear on all other documents in this case.

3) Print the date the document(s) were filed.

4) Date, print your name, and sign.

1	Code: 3860
2	Name: _____
3	Address: _____
4	Telephone: _____
5	Email: _____
6	Self-Represented Litigant
7	
8	IN THE FAMILY DIVISION
9	OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
10	IN AND FOR THE COUNTY OF WASHOE
11	
12	_____
13	Plaintiff/Petitioner/ Joint Petitioner, Case No. _____
14	vs. Dept. No. _____
15	_____
16	Defendant/Respondent/ Joint Petitioner.
17	_____
18	
19	<u>REQUEST FOR SUBMISSION</u>
20	
21	I request that the Motion for Review and Modification of Child Support that was filed on
22	(date the document was filed with the Court) _____ be submitted to the Court
23	for decision.
24	This document does not contain the personal information of any person as defined by NRS
25	603A.040.
26	
27	Date: _____ Your Signature: _____
28	Print Your Name: _____

REV 8/13/19 JDB 1 REQUEST FOR SUBMISSION



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INSTRUCTIONS: STEP 8

## **Filing and Serving the Reply and Request for Submission**

File, and serve the Reply and Request for Submission as you did the Motion and General Financial Disclosure (*see* INSTRUCTIONS: STEP 3).

INSTRUCTIONS: STEP 9

## **Complete and File the Proof of Service for the Reply and Request for Submission**

Complete the second Proof of Service for both the Reply and Request for Submission (*see* INSTRUCTIONS: STEP 4). File the Proof of Service (*see* INSTRUCTIONS: STEP 5). There is no fee to file these documents.

### **WHAT HAPPENS NOW?**

Now that you have completed all the steps, your motion has been submitted to the court for a decision. The court may do several things, such as: 1) file an order based upon the documents you have submitted, 2) require you to file additional documents, or 3) file an order requiring you to set a hearing.

If you receive an order and do not know what to do next, contact a private attorney or seek help from the Resource Center.

***Do not ignore a court order.***

## Legal Assistance Information

The information in this packet is provided as a courtesy only. This packet is not a substitute for the advice of an attorney. Counsel is always recommended for legal matters.

If you do not have an attorney, you are encouraged to seek the advice of a licensed attorney or contact the Resource Center or the Law Library. **The Resource Center and the Law Library staff cannot give legal advice** but can give information regarding court procedures.

You may wish to speak with a lawyer at no cost through the Law Library's Lawyer in the Library program. The Lawyer in the Library program is held via Zoom; you must register ahead of time to participate. No walk-ins accepted as space is limited.

### LAWYER IN THE LIBRARY

Sign up on our website:

<https://www.washoecourts.com/LawLibrary/LawyerInLibrary>

For questions, contact the Law Library at 775-328-3250

To seek assistance from other free or reduced-cost legal resources in the area, please contact:

#### NEVADA LEGAL SERVICES

449 S. Virginia St.  
Reno, NV 89501

775-284-3491 – leave a message, if  
necessary

<https://nevadalegalservices.org>

#### NORTHERN NEVADA LEGAL AID

1 S. Sierra St., 1<sup>st</sup> Floor  
Reno, NV 89501

775-321-2062 – leave a message, if  
necessary

<https://nnlegalaid.org>