

AFFIDAVIT FOR TERMINATION OF CHILD SUPPORT

- **There is no filing fee required, however, if service is required the filer will be responsible for the service fee.**
- **Either the custodial OR non-custodial parent may file this.**
- **Form may be filed ONLY if there are no other children still entitled to support. (If support is still being paid on other children under the same case number, a Motion to Modify the original support order will need to be filed.)**
- **You must ensure that current addresses are listed.**

FILED BY NON-CUSTODIAL PARENT

- **Form must be filled out completely, with Petitioner and Respondent being listed as they were in the original Dissolution/Paternity case. (Ex.: If Custodial parent was petitioner in original case, they remain the petitioner on termination request.)**
- **Return the form, along with the appropriate service fee, to the clerk.**
- **Form will be served to the custodial parent, along with blank Acknowledgment of Termination of Child Support and Objection to Termination of Child Support forms.**
- **Custodial parent will have 30 days from the DATE OF SERVICE to submit a response. If they submit the Acknowledgment, a judgment will be presented to the Judge for his/her review and signature. If they submit the Objection, a court hearing will be scheduled with the parties being notified of such. If custodial parent fails to respond within the 30 days, it will be treated as an acknowledgment and a judgment will be submitted to the Judge.**

FILED BY CUSTODIAL PARENT

- **Complete form and return it to the clerk.**
- **Judgment will be submitted to the Judge for review and signature.**



IN THE 8th JUDICIAL CIRCUIT COURT, RAY COUNTY, MISSOURI

Judge or Division:	Case Number:	(Date File Stamp)
	MACSS Case ID:	
Petitioner:	Petitioner's Address:	
SSN (last four digits) or DOB:	vs.	
Respondent:	Respondent's Address:	
SSN (last four digits) or DOB:		

Affidavit for Termination of Child Support

(This form may be used only where a claim is made that no child remains entitled to support.)

I, _____, am receiving support paying support for _____ (hereinafter referred to as the child), whose age is _____ and who is no longer entitled to support because: (Check **all** which are applicable):

- The child died on _____ (date).
- The child married on _____ (date).
- The child entered active duty in the military on _____ (date).
- The child has become self-supporting, and the custodial parent has relinquished the child from parental control by express or implied consent.
- The child has attained the age of 21.
- The child is enrolled in and attending a secondary (high) school program of instruction but has attained the age of 21.
- The child has attained the age of 18 and
 - has not graduated from secondary (high) school or completed a graduation equivalence degree program and, upon reaching age 18, was not attending and progressing toward completion of a secondary (high) school program of instruction.
 - has graduated from secondary (high) school or completed a graduation equivalence degree program but did not enroll in an institution of vocational or higher education by October 1 following graduation or completion of the graduation equivalence degree program.
 - has enrolled in an institution of vocational or higher education by October 1 following graduation from secondary (high) school or completion of a graduation equivalence degree program, but failed to achieve grades sufficient to re-enroll at such institution or failed to complete sufficient credit hours in each semester (at least 12 semester hours or the equivalent).
 - when enrolled and attending an institution of vocational or higher education (course load of at least 12 hours), received failing grades in half or more of his/her course load in any one semester.
 - when enrolled and attending an institution of vocational or higher education, the child failed to provide the non-custodial parent with documentation of grades from the education institution as requested by the non-custodial parent.
- The child is not physically or mentally incapacitated from supporting himself or herself, and the child's circumstances do not manifestly dictate that child support should continue.
- Other _____

I swear/affirm under the penalty of perjury that these facts are true to my best knowledge and belief.

Signature of Person Paying/Receiving Support

Date

Notice to Parent Receiving Support

If you agree with the statements in this Affidavit and agree to termination of the obligation to pay support for the child, you may, but are not required to, file an Acknowledgement with the Court. Upon your filing of an Acknowledgement, a judgment terminating the obligation to pay support for the child will be entered.

If you disagree with the statements in this Affidavit and object to termination of the obligation to pay support for the child, you must file with the Court an Answer which states the reasons the obligation to pay support for the child should continue. Upon your filing of an Answer, the Court will treat this Affidavit as a request for hearing.

Your failure to file an Acknowledgment or Answer with the Court within 30 days of your receipt of this Affidavit may result in entry by default of a judgment terminating the obligation to pay support for the child.

Certificate of Service of Parent Receiving Support

I certify that on _____ (date), I filed the original Affidavit with the Circuit Clerk of _____ (County/City of St. Louis), Missouri at _____ (address), and mailed a copy to _____ (name), the parent paying support, at _____ (address), _____ (city), _____ (state).

Signature of Parent Receiving Support

Sheriff's or Server's Return

I certify that I served this Affidavit at _____ (address) in _____ (County/City of St. Louis), _____ (state), on _____ (date), at _____ (time), by:

(Check one)

- delivering a copy of the Affidavit and Answer and Acknowledgement forms to _____ (name);
- leaving a copy of the Affidavit and Answer and Acknowledgement forms at the dwelling place or usual abode of _____ (name), with _____ (name), a person of _____ (name)'s family over the age of 15 years.
- other (describe) _____

Printed Name of Sheriff or Server

Sheriff or Server

Must be sworn before a notary public if not served by an authorized officer

(Seal)

Subscribed and sworn to before me on _____ (date).

My commission expires: _____ Date _____ Notary Public

Sheriff's Fee (if applicable)

Service Fee \$ _____
 Sheriff's Deputy Salary _____
 Supplemental Surcharge \$ 10.00
 Mileage \$ _____ (_____ miles @ \$. _____ per mile)
Total \$ _____

Sheriff or Server

Complete for Out of State Service

- 1) I am authorized to serve process in civil actions within the state or territory where the Affidavit was served.
- 2) My official title is _____ of _____ County, _____ (state).

Subscribed and sworn before me this _____ (date).

- I am: (check one)
- the clerk of the court of which affiant is an officer.
 - the judge of the court of which affiant is an officer.
 - authorized to administer oaths in the state in which the affiant served the above Affidavit. (use for out-of-state officer)
 - authorized to administer oaths. (use for court-appointed server)

(Seal)

Signature and Title

Directions to Officer Making Return on Service of Summons

A copy of the Affidavit must be served on each person. If any person refuses to receive the copy of the Affidavit when offered to him, the return shall be prepared to show the offer of the officer to deliver the Affidavit and the person's refusal to receive the same.

Service shall be made: (1) On Individual. On an individual, including an infant or incompetent person not having a legally appointed guardian, by delivering a copy of the Affidavit to the individual personally or by leaving a copy of the Affidavit at the individual's dwelling house or usual place of abode with some person of the family over 15 years of age, or by delivering a copy of the Affidavit to an agent authorized by appointment or required by law to receive service of process; (2) On Guardian. On an infant or incompetent person who has a legally appointed guardian, by delivering a copy of the Affidavit to the guardian personally.

Service may be made by an officer or deputy authorized by law to serve process in civil actions within the state or territory where such service is made.

Service may be made in any state or territory in the United States. If served in a territory, substitute the word "territory" for the word "state."

If service is made outside of Missouri, the officer making the service must swear an affidavit before the clerk, deputy clerk, or judge of the court of which the person is an officer or other person authorized to administer oaths. This affidavit must state the time, place, and manner of service, the official character of the affiant, and the affiant's authority to serve process in civil actions within the state or territory where service is made.

The return should be made promptly.

INFORMATION SHEET—AFFIDAVIT FOR TERMINATION OF CHILD SUPPORT

Case No. _____ MACSS Case ID: _____

There are a number of reasons a child may no longer be entitled to support. The Affidavit for Termination of Child Support includes some, but perhaps not all, of the reasons. When reviewing your affidavit and determining whether there is a basis for terminating child support, the judge will only consider the reason(s) you check that apply. Provide all the information requested below that are applicable for the reason(s) you check. **COURT CLERKS ARE NOT ALLOWED TO ANSWER ANY QUESTIONS YOU HAVE ABOUT WHETHER A PARTICULAR REASON APPLIES.** Clerks are only allowed to review your affidavit for completeness. If you have any questions about whether a particular reason applies, you should consult with an attorney.

I am the: Petitioner
 Respondent

I am the: Parent Receiving Support
 Parent Paying Support

Full name of last child entitled to support: _____

Date of birth of last child entitled to support: _____

Date each month child support is due under the support order: _____

Date the last child entitled to support graduated from secondary (high) school or completed a graduation equivalence degree program: _____*

*If the last child entitled to support graduated from secondary (high) school *AFTER* October 1, the child has until October 1 of the following year to enroll in an institution of vocational or higher education.

(If applicable) Date the last child entitled to support failed to achieve grades sufficient to re-enroll at the institution of vocational or higher education or failed to complete sufficient credit hours in each semester: _____

(If applicable) Date the non-custodial parent requested documentation of grades from the institution of vocational or higher education from the last child entitled to support:

Date you believe support should terminate: _____

Signature: _____

Date: _____