URCHILL COUNTY DISTRICT ATTORNEY	Child Support Division	165 North Ada Street	Fallon, Nevada 89406	Phone (775) 423-8423 Fax (775) 428-6571
UKCHILL				Phone (

1	REQUEST FOR HEARING
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3	TO:CHURCHILL COUNTY DISTRICT ATTORNEY'S OFFICE CHILD SUPPORT DIVISION
4	165 NORTH ADA STREET FALLON, NV 89406
5	Custodial Parents Name:
6	Non-Custodial Parents Name:
7	I request a hearing of my current child support order based on:
8	() Alleged Paternity () Duty of Support
9	() Arrearages () Income Withholding
10	() The current order is more than 3 years old.
11	 () There is no provision for health insurance () The absent parent's income had increased since the last time the order was entered that would merit an increase of at least 20% per
12	month for support. () My income has decreased since the last order was entered and would
13	merit a decrease of at least 20% per month for support, and it is anticipated to last six (6) months.
14	() The order is not in compliance with NRS 125B.070. () Other:
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22	I understand I have the BURDEN OF PROOF TO ESTABLISH the defense and that I am responsible for informing your office of any changes in my address.
23	I swear or affirm under penalty of perjury that the foregoing is true and correct.
24	
25	Print Name Signature
	Date:

		428-6571
105 INOTIN Ada Sireet	Fallon, Nevada 89406	Phone (775) 423-8423 Fax (775)

SSN:	Date of Birth:				
Address					
City	State		Zip		
Phone #					
Employer					
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Employer Address		City	State	Zip	