

PLEASE TYPE

_____ County, Colorado <input type="checkbox"/> District Court Court address: Phone Number: <hr/> In Re: Petitioner: Respondent/Co-Petitioner:	▲ COURT USE ONLY ▲
Attorney or Party Without Attorney (Name and Address): Phone Number: E-mail: FAX Number: Atty.Reg.#:	Case Number: Division Courtroom
AFFIDAVIT OF ARREARS	

I, _____, declare under oath that:

1. The type of support ordered is
 - child support
 - maintenance
 - other (specify): _____

2. The amount of support ordered to be paid each month is \$_____.

3. The support payment has not been timely made and: (check applicable statement)
 - a. (if payments were to be made into the court registry or Family Support Registry)
The full payment was not received by the registry on or before the due date of _____.
 - b. (if payments were to be made to the Obligee directly)
I did not receive the full payment on or before the due date of _____.

4. If any modifications have been made to the Support Order complete the following:
 - a. Effective date of any modification: _____
 - b. Amount of any modification: \$_____

5. Total child support due (_____ payments due x \$_____) \$_____
 - a. Total amount of child support paid - \$_____
 - b. Total principal of amount of child support due \$_____
 - c. One twenty-fourth of Line 5b \$_____ + interest at ____%
(12% unless otherwise agreed)

6. Total maintenance due (_____ payments due x \$_____)
 - a. Total amount of maintenance paid - \$_____
 - b. Total principal amount of maintenance due \$_____
 - c. One twenty-fourth of Line 6b \$_____ + interest at ____%
(8% unless otherwise agreed)

Attach a copy of the payment record maintained by the Family Support Registry, if payment is ordered through the Family Support Registry, or detail period(s) on a separate sheet of paper of the time when the arrears accrued for child support and for maintenance.

I declare under penalty of perjury that I have read this affidavit and the statements contained are true to the best of my knowledge.

Date: _____

Obligee

My Commission expires : _____

Notary Public/Deputy Clerk of Court

CERTIFICATE OF SERVICE

I certify that on _____ (date) I sent the original and one copy of this Affidavit of Arrears to the COURT, by United States Mail, first class postage prepaid, addressed as follows:

AND

I certify that I sent a copy of the Affidavit of Arrears to the Obligor by United States Mail, first class postage prepaid addressed as follows:

Signature