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**THE STATE OF NEW HAMPSHIRE  
SUPERIOR COURT**

\_\_\_\_\_ **County** **Case No.** \_\_\_\_\_

**In the matter of** \_\_\_\_\_

**PETITION FOR MODIFICATION**

1. Your Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Residence Address \_\_\_\_\_  
Town/City County State

2. Other Party's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Residence \_\_\_\_\_ Address \_\_\_\_\_  
Town/City County State

3. What type of case resulted in the present court order (divorce, paternity action, etc.)? And, what court issued the order?

\_\_\_\_\_

4. What present orders do you want the court to change? (Be specific and include date of order if possible.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. What do you want the new orders to say?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
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6. Why should the court change the present orders? (List each reason separately.)

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7. Please check one of the following regarding public assistance:

No public assistance (AFDC/TANF) is now being or has within the last 6 months been provided, nor is medical assistance (Medicaid) presently being provided, for the minor children of the parties.

The N.H. Department of Health and Human Services is providing or has provided within the last 6 months public assistance (AFDC/TANF) and/or medical assistance (Medicaid) for any minor child of the parties. If this is checked, you must mail copies of this petition and the personal data sheet to the Department at:

OCS Legal Office  
6 Hazen Drive  
Concord, NH 03301

8. By filing this petition, you are asking that the court:

A. Modify the present orders as listed above.

B. Other (list):

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C. Grant any other orders which may be appropriate.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Sign in front of Notary Public or Justice of the Peace)

\_\_\_\_\_  
Attorney (if any)

\_\_\_\_\_  
Attorney's Address

Type or print clearly.

State of New Hampshire

\_\_\_\_\_ County

The person signing this petition appeared and signed it before me and took oath that the statements in this petition are true, to the best of his or her knowledge and belief, and that he/she has mailed copies of the petition and personal data sheet to OCS (if required under paragraph 7).

\_\_\_\_\_ Date

\_\_\_\_\_ Notary Public/Justice of the Peace