IN THE DISTRICT COURT OF _____ COUNTY
STATE OF OKLAHOMA

_____
Plaintiff

VS.   District Court Case Number _____

_____
Defendant

_____

AFFIDAVIT OF ARREARS FOR CHILD SUPPORT

I, _____ , declare under oath that I am a recipient of
child support:

1. The amount of support order to be paid each_____is $_____
                                                      (frequency)
2. Date and Amount of Last Payment   _____ $_____
                                               (date)
3. Total Past Due Support Owed To Date $_____
      (include all previous judgment balances)

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

Subscribed under oath before me on

My Commission expires:

                                        _____
                                        Notary Public or Court. Clerk

       Any past due amount may become a lien against all real or personal property of the obligor.

FGN, IF AVAILABLE_____

INSTRUCTIONS FOR COMPLETING THE AFFIDAVIT OF ARREARS FOR CHILD SUPPORT FORM

Purpose. This form is required pursuant to 43 O.S. Section 11 2.A, 43 O.S. Section 120 and 43 O.S. Section 413. The Affidavit of Arrears for Child Support form must be completed by the attorney who prepares the order or by the obligee if neither party is represented by counsel. The form must be signed by the obligee. The form must be submitted and incorporated as a part of all child support orders.

Distribution of form. The original copy shall be filed with the child support order and remain in the court file. The court clerk cannot accept and file the child support order unless this form is incorporated with the order. The district court clerk will submit a copy of this form to the State Case Registry.

STYLE:

Enter the county in which the order was entered.

Enter the Plaintiffs name as it appears on the order.

Enter the Defendant's name as it appears on the order.

Enter the District Court Case Number as it appears on the order. AFFIDAVIT OF ARREARS FOR CHILD SUPPORT:

Enter the name of the obligee (recipient of child support).

1. Enter the frequency of payment-monthly, biweekly, semi-monthly, or weekly. Enter

the current child support amount.

2. Enter the date of the last payment received and the amount of that last payment.

3. Enter the total past due support still owed after receipt of the last payment. Include all

previous judgment balances still owing.

DATE:

Enter the date this form is signed by the obligee. OBLIGEE:

The signature of the obligee (recipient of child support).

NOTARY PUBLIC:

Enter notary public information and signature of the notary public or court clerk.

FGN:

Enter IV-D Case Number if available. (DHS/CSED employees only.)