

FORM PACKET

I WANT TO REGISTER A CHILD SUPPORT OR SPOUSAL SUPPORT ORDER ISSUED BY ANOTHER STATE OR TRIBE

Use this packet to ask an Alaska court to register a child support or spousal support order from another state, U.S. territory, or tribe. Consider asking the child support enforcement agency in your area for help instead of trying to do this on your own. Every state has its own child support enforcement agency that can help you enforce or modify your order in Alaska.

See <https://www.acf.hhs.gov/css/parents/find-local-child-support-office> for state and tribal child support agency contacts.

<i>Form Number</i>	<i>Form Name</i>
WHAT IS INCLUDED IN THIS PACKET?	
<u>DR-341</u>	Instructions
<u>DR-342</u>	Petition
<u>DR-343</u>	Confidential Information Sheet
<u>DR-344</u>	Notice of Registration
<u>DR-345</u>	Request for Hearing
<u>TF-710</u>	Request to Appear by Telephone
OTHER INFORMATION	
<u>State and Tribal Child Support Agency Contacts</u>	If you need help with your case, first consider asking the child support enforcement agency in your state. Every state has its own agency to help you enforce or change your order.
<u>Family Law Self-Help Center</u>	For help filling out these forms, visit the Family Law Self-Help Center's website at: https://courts.alaska.gov/shc/family/index.htm . Or call (907) 264-0851 in Anchorage and outside Alaska, or (866) 279-0851 (toll free in Alaska except Anchorage). A facilitator can explain court procedure and help you with the forms. The facilitators cannot give you legal advice.

November 2022 Alaska Court System

Forms in this packet are on the court's website: <http://www.courts.alaska.gov/index.htm>

Person Filing Petition

Full Name: _____ Email: _____

Mailing Address: _____ Phone: _____

I authorize the court to email me court documents in this case to the email address above.

NOTE: If for any reason you do not wish the other parent to know your physical address, you still must provide a mailing address so the court and the other parent can serve you by mail.

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA AT _____

Petitioner (person filing this petition),
vs.

Respondent (other party's full name)

CASE NO. _____ CI
(Court will assign number)

**PETITION TO REGISTER SUPPORT
ORDER FROM ANOTHER STATE¹**
(AS 25.25.601-.609)

- I ask the court to register the attached support order so the order can be:
 enforced in Alaska modified* enforced in Alaska and modified.*
 *To modify, I understand I must file a separate motion to modify (form [DR-361](#)).
- I have attached two copies of the order to be registered and any past modifications of the order. One copy of each has been certified by the court that issued the order.
- I swear or affirm that the amount of support past due is \$ _____
- Information about obligor (person who owes support):
 Full name: _____
 Mailing address: _____
 Employer (if known): _____
 Employer's address (if known): _____
 Other sources of income (if known): _____

 Location and description of obligor's property in Alaska that is not exempt from execution² (if known): _____
- Name and address of obligee (person support is owed to): _____

 Support payments must be sent to the obligee the following agency that collects support for the obligee (name and address): _____

¹ "State" means a state of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the United States Virgin Islands, or any territory or insular possession subject to the jurisdiction of the United States; the term "state" includes an Indian nation or tribe. AS 25.25.101(26)

² "Property" means anything the obligor owns, including money. To find out what is "not exempt from execution" look at the *Judgment Debtor Booklet* ([CIV-511](#)), available on the court's website.

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6. **REQUIRED ATTACHMENTS.** I am attaching the following items:
(Check each box to indicate that you completed and attached the item.)

- Confidential Information Sheet--Support Order from Another State ([DR-343](#)).
- Two copies of the order to be registered and any modifications of the order.
(One copy of the original order and one copy of any modification of the order must be certified by the court that issued the order.)
- Notice of Registration of Foreign Support Order (form [DR-344](#)) with everything filled in except the case number, the date of registration in paragraph 1, the clerk's signature and date signed, and the clerk's certificate of distribution.
- Request for Hearing (form [DR-345](#)) with only the caption filled in (court location and name of petitioner and respondent).
- One of the following: (Check the box for the method you want the court to use to serve notice on the respondent.)
 - First Class Mail - a 9 x 12 envelope addressed to the respondent.
(Do **not** put a return address on the envelope.)
 - Certified Mail - a 9 x 12 envelope addressed to the respondent with postal forms and adequate postage for restricted delivery, return receipt requested.
(Do **not** put a return address on the envelope.)
 - Process Server - *Service Instructions* for a process server (form [CIV-615](#)).
- An envelope with postage addressed to me so the court can mail a copy of the notice to me.

_____ Date

Signature of Petitioner³ or Attorney
(Only sign in front of a court clerk or notary.)

Print Name

Attorney Bar Number

Subscribed and sworn to or affirmed before me at _____, Alaska
on _____.

(SEAL)

Clerk of Court, Notary Public or other
person authorized to administer oaths
My commission expires: _____

³ If not an attorney, wait to sign until you are in front of a notary or clerk of court.
Also, a minor parent (under age 18) can sign this petition. AS 25.25.302 and AS 25.20.010.
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Notice to Clerk: This form must be kept in a confidential envelope or file. If a registered support order is modified, this document must be sent to CSED with the new order.

**CONFIDENTIAL INFORMATION SHEET –
SUPPORT ORDER FROM ANOTHER STATE¹**

(Attach to [DR-342](#), Petition to Register Support Order from Another State)

Alaska Court Location: _____

Alaska Case Number: _____

1. Name of Obligor (*person who owes support*): _____

2. Obligor's Social Security Number:^{*2} _____

I do not know the obligor's social security number and I am unable to get it.

I certify that the above information is correct.

Date

Signature of Petitioner or Attorney

Print Name

Attorney Bar Number

¹ "State" means a state of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the U.S. Virgin Islands, or any territory or insular possession subject to the jurisdiction of the United States; the term "state" includes an Indian nation or tribe. AS 25.25.101(26).

² Disclosure of Social Security Numbers is mandatory under AS 25.25.602(a)(4)(A) and 42 U.S.C. 666(a)(13). The numbers may be used to insure compliance with the support order.

8. If you do **not** object to the registered order within the specified time then the order will be **confirmed**. This means that:
- a. the amount of past due support in paragraph 3 will be considered correct, and
 - b. you will **not** be allowed to challenge the order later about any matter you could have raised now.

9. Payments on this registered order must be made to:

If you have questions, contact the above person or office at: _____
 (telephone number)

_____	_____
Date	Clerk of Court/Deputy Clerk

	Type or Print Name

Clerk's Certificate of Distribution

I certify that the following documents:

- a copy of this notice (DR-344), and
- a request for hearing form ([DR-345](#)), and
- the petition to register (DR-342), and
- a copy of the other state's order, and
- any modification of that order

were sent or delivered to the **respondent** as noted below:

- by first class mail on _____
- by certified mail (at petitioner's request) on _____
- by personal service (at petitioner's request). The documents were delivered to a process server on _____

I also certify that on the same date, a copy of this notice (DR-344) was sent by first class mail to the **petitioner**.

By Clerk: _____

[Instruction: If you do not have one telephone number that covers the entire period noted above, list here all numbers and indicate the day and time to use them.]

I am incarcerated at _____.
The procedure for calling me at this facility is: _____

Date	Signature	Print name		
Daytime Telephone Number	Mailing Address	City	State	ZIP
Email Address*	Residence Address	City	State	ZIP

* I agree that the court can email me court documents instead of sending by regular mail.

NOTICE OF HEARING (COURT USE ONLY)

A hearing on the above matter will be held:

Date and time: _____ Judge: _____

Location: _____

By Clerk: _____

ORDER ON REQUEST TO APPEAR BY TELEPHONE (COURT USE ONLY)

The request to participate by telephone is

- DENIED.
- GRANTED.
 - Call **1-888-788-0099** at the scheduled hearing time.
Meeting ID: _____ Passcode: (N/A) _____ If you are placed on hold, please stay on the line—your case may be delayed by other cases.
 - The court will call you at the telephone number provided above. You must be available to take the call for up to 2 hours after the scheduled start time, because your case may be delayed by other cases.

Date	Judge
_____	_____
	Print Judge's Name

Clerk's Certificate of Distribution

I certify that on _____, a copy of this order was distributed to:

Petitioner Respondent

By Clerk: _____

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA
AT _____

)
)
)
)
)
)
)

CASE NO. _____

**REQUEST TO APPEAR
BY TELEPHONE**

I request that the court allow me _____ to participate by telephone in the trial or hearing set for: Date _____ Time _____.

The individual participating by telephone can be reached at the following number at the time of the scheduled hearing and at least 2 hours after: _____
(Area Code) (Phone Number)

I am making this request, because:

If I am a defendant in a criminal case, I waive my right to be physically present.

Signature: _____ Date: _____

Print Name: _____

Mailing Address: _____

Email Address*: _____ Phone: _____

* I agree that the court can email me court documents instead of using regular mail.

I certify that on _____ at _____ [date/time], I emailed mailed hand-delivered a copy of this request to: _____

[Send a copy of this request to all other parties in the case. List everyone served. Use extra pages if needed.]

Your signature: _____

ORDER

The request to participate by telephone is:

DENIED.

GRANTED.

Call **1-888-788-0099**. Meeting ID: _____ Passcode: (N/A) _____
If you are placed on hold, please stay on the line—your case may be delayed by other cases.

The court will call you at the telephone number provided above.
You must be available to take the call for up to two hours after the scheduled hearing time, because your case may be delayed by other cases.

Date

Judge

I certify that on _____,
a copy of this order was sent to

Type or Print Judge's Name

Clerk: _____