

_____, Case No. _____
(name of plaintiff in original action) Plaintiff,

vs.

_____,
_____,
(name of defendant(s) in original action) Defendant(s).

**COMPLAINT FOR
MODIFICATION OF
CHILD SUPPORT
(Decrease)**

I, _____, without the assistance of an attorney, state
(your full name)
that the following is true:

1. On _____ the court ordered _____
(date of the most recent order setting child support) (name of payor)
to pay child support for the below listed child(ren):

(name of child) (child's year of birth)

(name of child) (child's year of birth)

(name of child) (child's year of birth)

(name of child) (child's year of birth)

Additional children are listed on a separate page.

Pursuant to the Nebraska Child Support Guidelines, child support payments were
to begin on the 1st day of _____, and continue on the first
(month and year the most recent order setting child support became effective)
day of each subsequent month thereafter in the amounts set forth:

_____ per month for _____ children
(support amount) (number of children)

_____ per month for _____ children
(support amount) (number of children)

_____ per month for _____ children
(support amount) (number of children)

_____ per month for one child
(support amount)

2. There has been a material change in circumstances since the date the Order was entered.
3. _____ is eligible for a Modification of
(name of payor)
the Child Support Order within the meaning of the Nebraska Child Support Guidelines and Nebraska Statutes.
4. Application of the Nebraska Child Support Guidelines to
_____ 's current income would decrease the
(name of payor)
monthly child support obligation by 10% or more, and by not less than \$25 per month.
5. The material change in _____ 's circumstances
since the date of the most recent order setting child support is as follows: _____

Check All That Apply

employment income has been substantially reduced.

is unemployed.

is disabled.

only income is Supplemental Security Income (SSI).

cannot get a job.

other:

6. The change in _____'s financial circumstances
(name of payor)
has lasted for three months and can reasonably be expected to last for an
additional six months.

WHEREFORE, I ask that this court modify the child support obligation entered
on _____, and decrease the monthly child support obligation
(date of the most recent order setting child support)
to an amount consistent with the Nebraska Child Support Guidelines, and for
such other relief as the court deems appropriate.

Signature: _____ Date: _____
Printed Name: _____
Street Address/P.O. Box: _____
City/State/ZIP Code: _____
Telephone Number: _____
*Email address: _____

*[Nebraska Supreme Court Rule § 2-208](#) requires individuals who are not
attorneys and representing themselves to provide their email address. The court
will use the email address to send notices from the court about this case **except** for
items that require another type of service as directed by statute or Nebraska
Supreme Court Rule.

If you no longer have email capability or if your email or other contact
information changes, you must complete a [Change of Contact Information Form](#).

By checking this box, I am letting the court know that I do not have the ability
to receive emails. The reason I cannot receive email is: _____
