

(county where original action was filed)

_____,
(name of person listed as plaintiff
in original action) Plaintiff,

Case No. CI _____
(case number assigned by clerk of court)

vs.

**ORDER
CHILD SUPPORT
CONTEMPT**

_____,
(name of person listed as
defendant in original action) Defendant.

ON _____, this matter came on for hearing pursuant to an Order to Show Cause/Contempt Citation which was entered by the court. The court, having fully reviewed the evidence, finds as follows:

1. The plaintiff, _____:
 appeared with/by counsel, _____
 appeared pro se
 did not appear.

2. The defendant, _____:
 appeared with/by counsel, _____
 appeared pro se
 did not appear.

3. _____ waives his/her right to court-appointed counsel.

OR

_____ is represented by _____.

4. _____ ADMITS to being in willful contempt.

OR

_____ DENIES being in willful contempt.

5. The Order to Show Cause was _____ was not duly served upon

_____.

6. On _____, the court entered an order directing _____ to pay:

(Check boxes that apply:)

the sum of \$ _____ per month as child support;

_____ % of childcare expenses;

_____ % of health care costs over \$ _____.

7. The records of the Nebraska Child Support Payment Center reflect that a current delinquency of \$ _____ for child support exists as of _____, and that the last payment in the amount of \$ _____ was made on _____.

8. There is currently owing on childcare costs the sum of \$ _____.

9. There is currently owing on health care costs the sum of \$ _____.

10. _____ is capable of employment and has an earning capacity of \$ _____ per hour.

OR

_____ is gainfully employed at _____ earning the sum of \$ _____ per hour.

OR

_____ is unemployed.

At the conclusion of the evidence, THE COURT ORDERS as follows:

A. _____ is found in willful contempt for failing to pay:

child support.

childcare expenses. Judgment is entered against _____

in the amount of \$ _____ for unpaid childcare expenses.

health care expenses. Judgment is entered against _____

in the amount of \$ _____ for unpaid health care expenses.

OR

_____ is not found in willful contempt.

B. _____ is hereby sentenced to _____ days in the _____ County Jail, beginning on _____.

C. _____ may purge himself/herself of the contempt on child support by:

Paying \$ _____ by _____.

Paying \$ _____ on the 1st day of _____, 20_____, and paying \$ _____ on the first day of each subsequent month for a total of _____ consecutive months.

_____ may purge himself/herself of the contempt on childcare expenses by:

Paying \$ _____ by _____.

Paying \$ _____ on the 1st day of _____, 20_____, and paying \$ _____ on the first day of each subsequent month for a total of _____ consecutive months.

_____ may purge himself/herself of the contempt on health care expenses by:

Paying \$ _____ by _____.

Paying \$ _____ on the 1st day of _____, 20_____, and paying \$ _____ on the first day of each subsequent month for a total of _____ consecutive months.

D. Execution of the sentence is deferred so long as the purge payments as ordered are timely paid.

E. If any payments are not paid as ordered, _____ is ordered to report immediately to the _____ County Jail to serve the above sentence. If he/she fails to report immediately to jail as ordered, the person receiving the child support shall submit an affidavit stating that the child support ordered to be paid under the purge plan has not been paid, and request a bench warrant. A bench warrant or capias shall then be issued for the arrest, and upon arrest, _____ shall serve the sentence, unless purge payments are paid current.

F. All purge amounts for child support are to be paid to the
**Nebraska Child Support Payment Center,
PO Box 82600, Lincoln NE 68501-2600.**

The Nebraska Child Support Payment Center is ordered to distribute monies received in this case in accordance with the purge plan. The clerk of the

_____ County District Court shall accept payment on behalf of _____ in order to facilitate his/her release from custody under the terms of this order.

G. All purge amounts for childcare expenses and health-care expenses shall be paid to the **Clerk of the District Court** of _____ County, Nebraska.

H. _____ is ordered to comply with automatic wage withholding.

I. _____ is to pay the costs of this action in the amount of \$ _____ to the **Clerk of the District Court** by _____.

Dated: _____.

BY THE COURT:

Judge