

Español

Instrucciones para completar la petición de modificación de una orden de apoyo existente

1. Este formulario funciona mejor en el navegador Edge. Para abrir Edge en una computadora con Windows, presione la tecla Windows, escriba "Edge" y selecciónelo. Si necesita instalar Edge, visite <https://www.microsoft.com/en-us/edge>
2. Por favor, complete el formulario completo. Si una pregunta no se aplica, por favor indique N/A. Si se desconoce la respuesta a una pregunta, indique "desconocido"/"unknown."
3. Una vez hecho esto, guarde o descargue una copia.
4. Envíe el archivo por correo electrónico a LancoIntake@pacs.com

Gracias.

Instructions for completing the petition for modification of an existing support order

1. This form works best in the Edge browser. To open Edge on a Windows computer, press the Windows key, type "Edge" and select it. If you need to install Edge, please visit <https://www.microsoft.com/en-us/edge>
2. Please complete the entire form. If a question doesn't apply, please indicate N/A. If the answer to a question is unknown, please indicate "unknown."
3. Once done, save or download a copy.
4. Email the file to LancoIntake@pacses.com

Thank you.

vs.

Número de Caso de PACSES:

2. El demandante tiene derecho a aumentar disminuir dejar sin efecto restablecer otro esta orden dados los siguientes cambios concretos y significativos en las circunstancias:

POR LO TANTO, el demandante solicita al Tribunal que se modifique la orden de manutención actual.

Demandante

Abogado del Demandante

Confirmando que las declaraciones realizadas en la presente demanda son verdaderas. Entiendo que el delito de falso testimonio está sujeto a las sanciones de 18 Pa. C.S. Sección 4904 relacionadas con la falsificación no jurada a las autoridades.

Fecha

Demandante

In the Court of Common Pleas of LANCASTER County, Pennsylvania

vs.

Plaintiff

Defendant

) Docket Number:

)

) PACSES Case Number:

)

) Other State ID Number:

**PETITION FOR MODIFICATION
OF AN EXISTING SUPPORT ORDER**

1. The petition of _____ respectfully represents that on _____, an Order of
Court was entered for the support of _____

A true and correct copy of the order is attached to this petition.



Service Type

Form OM-501 12/16
Worker ID



v.

PACSES Case Number:

2. Petitioner is entitled to increase decrease termination reinstatement
 other of this Order because of the following material and substantial change(s) in
circumstance:

WHEREFORE, Petitioner requests that the Court modify the existing order for support.

Petitioner

Attorney for Petitioner

I verify that the statements made in this complaint are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. § 4904 relating to unsworn falsification to authorities.

Date

Petitioner



Service Type

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Form OM-501 12/16
Worker ID

CONFERENCE INFORMATION SHEET

CASE NUMBER: _____

DATE: _____

DEFENDANT

NAME _____
ADDRESS _____
TELEPHONE # _____
EMAIL ADDRESS _____
SOCIAL SECURITY # _____
DATE OF BIRTH _____
EMPLOYER NAME _____
EMPLOYER ADDRESS _____
EMPLOYER TELEPHONE # _____
ATTORNEY (filing party only): _____
ATTORNEY TELEPHONE NUMBER _____

PLAINTIFF

NAME _____
ADDRESS _____
TELEPHONE # _____
EMAIL ADDRESS _____
SOCIAL SECURITY # _____
DATE OF BIRTH _____
EMPLOYER NAME _____
EMPLOYER ADDRESS _____
EMPLOYER TELEPHONE # _____
ATTORNEY (filing party only): _____
ATTORNEY TELEPHONE NUMBER _____

ADDITIONAL INFORMATION

MODIFICATION PETITION FILED BY: _____
REASON MODIFICATION PETITION FILED: _____

