

\_\_\_\_\_  
My Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

	<b>Pre-trial Order</b>
_____ Petitioner	_____ Case Number
v.	_____ Judge
_____ Respondent	_____ Commissioner

The matter before the court is a pre-trial conference on a Petition to Modify Child Support.

The conference was held on \_\_\_\_\_ (date).

Petitioner

was present     was not present

was represented by \_\_\_\_\_

was not represented.

Respondent

was present     was not present

was represented by \_\_\_\_\_

was not represented.

Office of Recovery Services



(8) The following issues are certified for trial:

- Grounds to modify
- Amount of income
- Application of the child support guidelines
- Monthly support amount
- Arrears
- Emancipation
- Child tax exemption
- Medical expenses
- Daycare expenses
- Health insurance
- Costs and attorney fees
- Other (describe) \_\_\_\_\_

(9)  The court further orders:

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\_\_\_\_\_ Sign here ► \_\_\_\_\_  
Date Recommended by Commissioner \_\_\_\_\_

\_\_\_\_\_ Sign here ► \_\_\_\_\_  
Date Approved by Judge \_\_\_\_\_

### Certificate of Service

I certify that I served a copy of this document on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Petitioner or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Respondent or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Child Support Division, if applicable)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Sign here ► \_\_\_\_\_

Date \_\_\_\_\_

Typed or Printed Name \_\_\_\_\_