

<input type="checkbox"/> District Court _____ County, Colorado Court Address: _____	<b>▲ COURT USE ONLY ▲</b>
In re: <input type="checkbox"/> The Marriage of: <input type="checkbox"/> The Civil Union of: <input type="checkbox"/> Parental Responsibilities concerning: _____ Petitioner: and Co-Petitioner/Respondent:	
Attorney or Party Without Attorney (Name and Address):  Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg. #: _____	Case Number:  Division _____ Courtroom _____
<b>STIPULATION REGARDING CHILD SUPPORT MODIFICATION</b>	

**The parties stipulate and agree to the following Stipulation Regarding Child Support Modification:**

1. The  Petitioner  Co-Petitioner/Respondent is currently paying \$ \_\_\_\_\_ child support per month pursuant to  an agreement between the parties **or**  prior court order.
  
2. The parties stipulate and agree that the  Petitioner  Co-Petitioner/Respondent shall pay child support pursuant to the Colorado Child Support Guidelines, §14-10-115, C.R.S. in the amount of \$ \_\_\_\_\_, due and payable by \_\_\_\_\_ (date), commencing on \_\_\_\_\_ (date).
  
3. This amount will continue until further Order of the Court. Payments shall be mailed to:  
 Obligee **or**  Family Support Registry (P.O. Box 2171 Denver, CO 80201-2171).  
**Note:** Both parties have entered into a written agreement however; if a payment is missed a wage assignment will be established.
  
4. The Child Support Worksheet and the parties' Sworn Financial Statements are filed with this Stipulation.
  
5. The parties have \_\_\_\_\_ minor child(ren).

Full Name of Child	Present Address	Sex	Date of Birth

6. Other Information:

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7.  If applicable. We have provided a copy of this Stipulation (JDF 1404) to the Office of Child Support Enforcement, as they are involved in our case.

The parties request that this **Stipulation Regarding Child Support Modification** be entered as an Order of this Court.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

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### SIGNATURE

<hr/>		
(Printed name of Petitioner)	Signature of Petitioner	Date
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City	State	Zip Code
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Home Phone	Cell Phone	

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Petitioner's Attorney Signature, if any

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(Printed name of Co-Petitioner/Respondent)	Signature of Co-Petitioner/Respondent	Date
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City	State	Zip Code
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Home Phone	Cell Phone	

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Co-Petitioner/Respondent's Attorney Signature, if any