

## **CRIMINAL NON-SUPPORT OBLIGEE QUESTIONNAIRE**

Please answer the following questions as accurately as possible. Except for privileged personal information (i.e., address, phone number, social security number), your answers may be provided to the defendant and/or defendant's attorney as part of the pretrial discovery process.

Defendant's Full Name			
Victim's Full Name			
Victim's Address	City	State	ZIP Code
Victim's Home Phone	Victim's Cell Phone		

1. Do you currently have someone other than ORS helping you pursue child support collection from the defendant? (For example, a private attorney, Legal Services, Legal Aid, a private collection agency, or other.)  Yes  No  
If yes, who?

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2. Has someone in the past (other than ORS) helped you collect child support from the defendant?  
 Yes  No  
If yes, who?

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3. Please list any legal actions that you have pursued or been involved in with the defendant that may involve child support. (For example, establishment of parentage, divorce proceedings, establishment of a child support award, modification of child support, change in custody of the child, settlement agreements regarding child support.) Please send copies of documents from these proceedings which are in your possession.

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4. To your knowledge, does the defendant have an attorney representing him/her on your child support case?  Yes  No  
If yes, who?

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5. Employment History

- a. Are you (Victim) currently employed:  Yes  No  
If yes, complete the following:

Employer Name		Work Phone	
Job Title/Occupation	Approximate Monthly Gross Wages \$ _____	Length of Employment	

- b. Briefly describe your employment history. (For each period of employment indicate: Work place/Occupation/Approximate Salary/and dates of employment.)

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6. During what time period were you and the defendant married or living together?

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7. How have your financial circumstances changed since the time of your divorce or separation from the defendant?

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8. What is your present marital status?  Married  Single

If married, complete the following:

- a. Spouse's Name: \_\_\_\_\_  
b. Is your spouse employed?  Yes  No  
If yes, spouse's monthly gross wages: \$ \_\_\_\_\_  
c. Does your spouse have a monthly child support obligation?  Yes  No  
d. Do you have any other children with your new spouse?  Yes  No

What changes have occurred since the time of your divorce/separation from the defendant?

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9. Are you now or have you been on public assistance at any time since the birth of the children in question?  Yes  No

If yes, please list the time periods and types of assistance received.

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10. Have you received any other assistance (help with rent, Sub-for-Santa, cash gifts, etc.)?

Yes  No

If yes, what type of assistance, from whom (i.e., Church, family, friends, boyfriend or girlfriend, spouse, etc.), how much, and how often?

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11. Please list the children you have with the defendant:

Name	Date of Birth	Name	Date of Birth
Name	Date of Birth	Name	Date of Birth
Name	Date of Birth	Name	Date of Birth
Name	Date of Birth	Name	Date of Birth

12. Do you have children with anyone other than the defendant?  Yes  No

If yes, list names, ages, whether those children live with you and indicate if the noncustodial parent is ordered to pay support.

<u>Name</u>	<u>Age</u>	<u>Does child live with you?</u>	<u>NCP ordered to pay support?</u>
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

13. Amount of support the defendant was originally ordered to pay per month: \$ \_\_\_\_\_

14. Has your child support amount been modified in any way (either through the Court or by personal agreement)?  Yes  No  
If yes, when and to what amount?

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15. Have you had physical and legal custody of all of the above children since their birth?  
 Yes  No  
If no, explain in detail, with dates, places, and other information:

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16. List any time periods that any of your children resided with the defendant:

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17. List any time periods that any of your children resided with anyone other than you or the defendant (i.e., grandparents or other relatives, foster care, etc.), and indicate the name address and phone number of the person with whom they lived:

<u>Name of individual or place</u>	<u>Address</u>	<u>Phone Number</u>

18. Have you or your children resided exclusively in the state of Utah during the period of time that the defendant has failed to pay child support?  Yes  No  
If no, explain:

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19. Do you have any extraordinary expenses for any of the children listed above (e.g., braces, medical, counseling, etc.)?  Yes  No

If yes, specify:

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20. Have the children you have with the defendant suffered any significant deprivation in any significant way as a result of the defendant's failure to pay child support? (For example, clothing, food, shelter, medical, dental, school needs, etc.)?  Yes  No

If yes, please specify:

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21. Do you know the defendant's address and/or telephone number?  Yes  No

If yes, please provide the information:

Address	Telephone Number
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22. Provide the Defendant's physical description:

Height	Weight	Hair Color	Eye Color	Race
Noticeable scars or tattoos				

23. Do you know where the defendant is currently employed, and where the defendant has worked in the past?  Yes  No

If yes, please indicate where and when.

<u>Current Employer?</u>	<u>Employer Name</u>	<u>Timeframe Employed</u>
<input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Yes <input type="checkbox"/> No		

24. How has the defendant earned a living in the past? What kind of work skills and education does he/she have?

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25. Is the defendant married?  Yes  No

26. Does the defendant have any other children?  Yes  No  
If yes, how many? \_\_\_\_\_ Please provide names, ages, and names of the mothers, if known:

<u>Name</u>	<u>Age</u>	<u>Name of Mother</u>

27. Has the defendant ever told you that he/she would not pay child support?  Yes  No  
If yes, please state when and what was said (where you were, who was present, etc.):

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28. Has the defendant ever told you that he/she would begin paying child support?  
 Yes  No  
If yes, please state the details of the conversation as accurately as possible (what was said, where you were at, who else was present, etc.):

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29. When did you last see the defendant?

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30. Does the defendant visit the children?  Yes  No

31. Has the defendant provided any cash or gifts to the children which s/he might consider child support?  Yes  No  
If yes, please specify:

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32. Have you received any money directly from the defendant since you opened your case with the Office of Recovery Services that you have not reported to them?  Yes  No  
If yes, when and how much?

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33. Has the defendant provided help in other ways to you or the children (e.g., paying for activities, purchasing vehicles, making a house payment or tuition payment)?  Yes  No  
If yes, please provide a description:

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34. Does the defendant have any physical or mental disabilities?  Yes  No  
If yes, please explain:

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35. Please provide the name, address, and phone number of any close relatives or friends of the defendant:

<u>Name</u>	<u>Address</u>	<u>Telephone Number</u>	<u>Relationship</u>

36. Please describe anything you may know about the defendant's current lifestyle and/or assets that may have a bearing on his/her ability to pay child support (e.g., make, model, year and color of vehicle(s), personal property or recreational vehicles, beneficiary or trust, retirement account or pension, etc.):

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37. Please provide any additional remarks or concerns:

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**\*\*\* PLEASE ATTACH A PICTURE OF THE DEFENDANT IF AVAILABLE \*\*\***

I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signed on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_.  
(Date) (Month) (Year) (City and State or Country)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature