### **EXCEPTIONS TO RECOMMENDATION OF SUPPORT HEARING OFFICER**

# **INSTRUCTION SHEET**

# USE THIS FORM IF YOU DISAGREE WITH THE HEARING OFFICER'S RECOMMENDED SUPPORT ORDER

These instructions are meant to give you general information and not legal advice.

1. If you do not agree with the Recommendation of the Support Hearing Officer, you can file Exceptions.

THE PROPOSED ORDER WILL BE IN EFFECT UNTIL YOUR EXCEPTIONS ARE DECIDED. Exceptions MUST be filed by the date given on the Proposed Order. If you do not object by filing Exceptions, the Master's Recommendation will become a final court order.

- 2. Fill in the Domestic Relations Information Sheet (located separately on the Domestic Relations Division's website) with as much information as you have.
- 3. Complete, date, and sign the Support Exceptions (detailed instructions included).
- 4. There is no cost to file the Exceptions.
- 5. Make nine copies of the completed Support Exceptions. A copy machine is available at the Clerk's office at a cost of \$.25 per page.
- 6. File the original *AND* four (4) copies of the completed Support Exceptions and one copy of the Domestic Relations Information Sheet within 10 days of the proposed order by mailing or hand-delivering them in person to:

Clerk of Family Court 11<sup>th</sup> Floor 1501 Arch Street Philadelphia PA 19102

- 7. Mail one copy of the Support Exceptions to the Hearing Officer and one copy to the opposing party. Keep the last copy for yourself.
- 8. After you file the Support Exceptions, you will receive a notice of an Exceptions hearing in the mail.

- 9. At the Exceptions hearing, you must fully explain to the Judge specifically why you disagree with the Hearing Officer's Proposed Order. See the brochure "Child Support in Philadelphia County" for additional information about this process.
- 10. You may want to take the Notes of Testimony from the Hearing Officer's Hearing. If you want to take them, ask the Clerk how to order them. They must be ordered *within 10 days of filing the Exceptions*. The cost for the Notes of Testimony cannot be waived. There is a \$50 deposit and there will be an additional fee after the notes of testimony have been prepared. Payment is made by money order or cashier's check to the Clerk of Courts Office 1501 Arch Street 11<sup>th</sup> Floor, Philadelphia, PA 19102.

### TERMS THAT ARE USED IN THE EXCEPTIONS:

PLAINTIFF Person who is filing complaint

DEFENDANT Person against whom you are filing

#### HOW TO FILL IN THE SUPPORT EXCEPTIONS:

## HEADING (CAPTION).

Fill in the names of the plaintiff and defendant in the heading of the complaint. The Court will give the Support Complaint a PACSES number and put it on the copy that is mailed to you.

# LINE 1.

Fill in your name, and circle whether you are the Plaintiff or Defendant in the support action.

#### LINE 2.

Fill in the name of the Hearing Officer who signed the Recommended Order and the month, date, and year of the Recommended Order.

### LINE 3.

Fill in the last day you are permitted to file Exceptions. This deadline is given on the front page of the written recommendation of the Hearing Officer.

## LINE 4.

In the last paragraph, explain why you do not agree with the Proposed Order. You should be specific. For example, you may disagree with the Hearing Officer because you believe that the Hearing Officer did not:

- Properly calculate income and expenses;
- Consider special circumstances of the child;
- Correctly determine the earning capacity;
- Consider the other party's available additional income.

Your exceptions will be granted only if there is a mistake in calculating income or in considering all relevant and necessary expenses. The Support Guidelines are assumed to be correct, so it is not appropriate to file exceptions based on your disagreement with the Support Guidelines.

SIGN AND DATE THE SUPPORT EXCEPTIONS.

SIGN AND DATE THE VERIFICATION THAT THE STATEMENTS ARE TRUE.

# COURT OF COMMON PLEAS OF PHILADELPHIA COUNTY

	: FAMILY COURT DIVISION
Plaintiff	
v.	: PACSES NO.
Defendant	_ : :
	SUPPORT EXCEPTIONS
1. I,	, am the Plaintiff/Defendant in this case.  (circle one)
2. I (you namr e)	, hereby disagree with the Proposed Order of Support of
(name of Hearing Officer who signed	, Esq., Support Hearing Officer, which was entered on Order)
	  -
3. The last day I am allowed to	file Exceptions is,, 20
4. My Exceptions to the Propos	ed Order are as follows:
WHEREFORE, I reques	t that my Exceptions be granted.
Date:	Signature:

# **VERIFICATION**

I,	, verify that the statements made in the foregoing Support Exceptions
are true and correct. I under	stand that false statements herein are made subject to the penalties of
18 Pa.C.S.A. § 4904, relatin	g to unsworn falsification to authorities.
Date	Signature: