

**NOTICE OF REGISTRATION, OBJECTION,
AND ORDER**JD-FM-270 New 6-18
C.G.S. §§ 46b-377 to 46b-380

STATE OF CONNECTICUT

JUDICIAL BRANCH

FAMILY SUPPORT

MAGISTRATE DIVISION

www.jud.ct.gov

**Instruction to SES Officer requesting registration**

After receiving a request to register a single support order, complete this form and file it with the Letter of Transmittal Requesting Registration and accompanying documents.

Instructions to UIFSA Clerk

1. After an SES Officer files this form, together with a Letter of Transmittal Requesting Registration for a single support order and any accompanying documents, print a copy of these filings.
2. Sign this form and mail all documents to the obligor.
3. Keep a copy for the court file, and send a copy to SES for the IV-D file.
4. If the obligor returns an Objection, enter the appearance of the obligor, and schedule the matter for a hearing.
5. Send a file-stamped copy of the objection to the person or state agency to whom the support order is payable.
6. Notify all parties of the hearing date.

ADA NOTICE

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA.

Name of obligor	Address of obligor (Number, street, city, state, and zip code)			
Name of case				CT docket number
Court address		SES clerk's office address		
Initiating state/tribunal		Issuing state/tribunal		
Date of support order	Order amount	To be paid (Frequency)	Alleged arrearage	As of (Date)
Order is payable to CCSPC, PO Box 990031, Hartford, CT 06199-0031				Order registration date

NOTICE OF SUPPORT ORDER REGISTRATION

The initiating State/Tribunal listed above has sent a request that the State of Connecticut register the support order described above. A support order from another state/tribunal that is registered in Connecticut is enforceable by the State of Connecticut in the same manner as an order that was issued by the Connecticut courts, starting on the date that the order was registered.

Effective immediately, you must begin making your support payments to the CCSPC at the address listed above. Please make your check or money order payable to the Connecticut Centralized Child Support Processing Center (CCSPC), and place your name and social security number on each payment to ensure that you get credit for your payment.

Asking for a court hearing

If you want to ask the Connecticut court for a hearing to object to the validity or enforcement of this order, you must ask for the hearing within 20 days of when you received this notice. At this hearing, you may:

- Ask the court to vacate (throw out) the registration of the order;
- Tell the court if you have a defense to any allegation that you have not followed the registered order; or
- Object to the remedies asked for in the order or the amount of any alleged arrearages, which are listed above.

If you want to ask for a court hearing to object to the registration of this order, fill out the **Objection** section on page 2 of this notice, and return it to the Clerk of Court for the Family Support Magistrate Division of the Superior Court at the SES Clerk's Office address listed above.

If you do not object to the validity or enforcement of this order in a timely manner, this order will be confirmed in Connecticut, the order and any alleged arrearages will be enforced by the State of Connecticut, and you will not have another chance to object to the validity or enforcement of this order.

Please note:

You are required to make your support payments even if you choose to object to the validity or enforcement of this order. Only the court may stay (suspend) your obligation to pay.

If you choose to object to the validity or enforcement of this order, the objection hearing is not a chance for you to ask the court to modify (change) this order. If you want to ask the court to modify the order entered by the issuing State/Tribunal, please call Connecticut Support Enforcement Services at: 1-800-228-KIDS (5437).

Signed (UIFSA Clerk)	Print name	Date signed
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OBJECTION

Instructions to obligor

If you want to ask for a court hearing to object to the validity or enforcement of the registered support order described on page 1, complete the **Defenses** and the **Appearance** sections below, and return this form to the Clerk of the Court at the Court address listed on page 1 within 20 days of when you received this notice. The Clerk will schedule a court hearing, and tell you when to come to court.

Defenses (Section 46b-379 of the Connecticut General Statutes)

I ask the court for a hearing to object to the validity or enforcement of the registered support order for the following reason(s):

(“X” all that apply, and explain below)

- The issuing State/Tribunal lacked (didn't have) jurisdiction over me.
- The order was obtained by fraud.
- This order has been vacated, suspended, or modified by a later order.
- The issuing State/Tribunal has stayed this order because an appeal is being decided.
- I have a defense under Connecticut law to the remedies asked for in this order.
- I have already made full or partial payment of this order.
- The statute of limitations under section 46b-373 of the Connecticut General Statutes does not allow enforcement of some or all of the alleged arrearages.
- The order alleged to be the controlling order is not the controlling order.
- Other: (Describe other defense)

Explain your defense(s):

Signature (Self-represented obligor or attorney)	Print name	Date signed
Address of self-represented obligor or attorney	Phone number	

Appearance

Enter the Appearance of:

Name of obligor (If self-represented) or of attorney or law firm representing obligor	Phone number	Juris number (If attorney or law firm)
Mailing address of obligor (If self-represented) or of attorney or law firm		

Signature (Self-represented obligor or attorney)	Print name	Date signed
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Order (To be completed by the clerk of court)

It is ordered that:

By the Court (Judge or Family Support Magistrate)	Signed (UIFSA Clerk)	Date
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