

DOMESTIC SUPPORT OBLIGATION WORKSHEET

("DSO Worksheet")

PLEASE PRINT CLEARLY

DEBTOR: Today's Date:

CODEBTOR:

CASE NO. -BKC-

Are either Debtor responsible for a *Domestic Support Obligation* described in schedule E of and provided for an 11 U.S.C. § 507 (a)(3)? Yes No

If your answer is **NO**, you merely have to sign below.

If your answer is **YES**, please complete all questions below and sign.

What is your current marital status? Married Divorced Separated
Widowed SINGLE

Name and information of person receiving support:

Name:
Address:

City:

If yes, is the payment deducted from your paycheck? Yes No

What State Agency:

Agency Name:
Account Number:
Address:
Address:
City: State Zip

Debtor: X _____

Codebtor: X _____