

# INSTRUCTIONS FOR COMPLETING THE WAIVER OF NOTICE ON TERMINATION OF CHILD SUPPORT

This document may be used by the person receiving the child support (obligee) if that person agrees that the child support should be terminated for the reason stated in the Application and Affidavit to Obtain Termination of Child Support, and may be filed at the same time the application and affidavit is filed. By signing this form, the obligee is waiving the right to have the clerk of the district court send further notice of the request to have child support terminated.

## Heading – will be the same as the heading in the original action.

- Choose the county in the drop down box below the blank.
- Enter the original case number assigned by the clerk of the court.
- Enter the full name of the plaintiff of the original action filed.
- Enter the full name of the defendant of the original action filed.

IN THE DISTRICT COURT OF \_\_\_\_\_ COUNTY, NEBRASKA

a.  Choose the county  b.

c.  Case No.

(name of plaintiff in original action) Plaintiff,

vs.

d.

(name of defendant in original action) Defendant.

**WAIVER OF NOTICE ON  
TERMINATION OF  
CHILD SUPPORT**

## BODY OF WAIVER OF NOTICE ON TERMINATION OF CHILD SUPPORT

- In the first blank, enter the first, middle, and last names of the person to whom the child support is being paid.

e.  I, , am the recipient for  
(your full name)

- Next you will see four options, each describing a possible reason for terminating child support. Check the reason that applies to your situation.

f.  The child is now 19 years old.  
 The child has married.  
 The child has died.  
 The child has been emancipated by court order.

- In the second paragraph, enter the full name of the child for whom support is to be terminated.

g.  I waive notice and all objections I may have to the termination  
support of .  
(child's name)

## Signature Section

- h. Sign your name.
- i. Enter the date.
- j. Print your name.
- k. Enter your street address or P.O. Box.
- l. Enter the city, state, and zip code of your address.
- m. Enter your telephone number with area code
- n. Enter your email address (if any).

h. Signature: \_\_\_\_\_ Date: \_\_\_\_\_ i.

of Person Receiving Child Support

j. Printed Name: \_\_\_\_\_ k.

Street Address/P.O. Box: \_\_\_\_\_ l.

City/State/ZIP Code: \_\_\_\_\_

m. Telephone Number: \_\_\_\_\_ n.

\*Email address: \_\_\_\_\_

- o. Carefully read the statement.
  - i. Check the box if you do not have the ability to receive emails.
  - ii. You must give the reason you don't have the ability to receive emails on the line provided.

i. \*Nebraska Supreme Court Rule § 2-208 requires individuals who are not attorneys and representing themselves to provide their email address. The court will use the email address to send notices from the court about this case **except** for items that require another type of service as directed by statute or Nebraska Supreme Court Rule.

If you no longer have email capability or if your email or other contact information changes, you must complete a [Change of Contact Information Form](#).

By checking this box, I am letting the court know that I do not have the ability to receive emails. The reason I cannot receive email is: \_\_\_\_\_

ii. \_\_\_\_\_