

INTER-AGENCY RECIPROCAL ROUTING FORM

FROM:

SDSI at

TO:

Reciprocals Office

Provincial Court at

Supreme Court at

FMPE at

SDSI at

PURPOSE:

Support / Variation Hearing

Provisional / Variation Hearing

Enrollment / Enforcement

Other:

Date Sent (YYYY MMM DD)	Office Code and Worker Number	Received Stamp Here
Contact at Sending Office		
Fax Number	Phone Number	
Our File	Your File	

<p>Incoming Support (Maintenance) Order <input type="checkbox"/></p> <p><input type="checkbox"/> 1 certified copy of order</p> <p><input type="checkbox"/> Case Information form</p> <p><input type="checkbox"/> Transmittal form</p> <p><input type="checkbox"/> Family search report</p> <p><input type="checkbox"/> ISO Bulletin # _____</p> <p><input type="checkbox"/> Statement of arrears (if to FMPE)</p> <p><input type="checkbox"/> IF foreign order</p> <p><input type="checkbox"/> Notice of Registration</p> <p><input type="checkbox"/> Currency certificate</p> <p><input type="checkbox"/> Foreign translation</p>	<p>Outgoing Support (Maintenance) Order <input type="checkbox"/></p> <p><input type="checkbox"/> 3 cert. copies of order</p> <p><input type="checkbox"/> Case Information form and, if for enforcement, where to send payments</p> <p><input type="checkbox"/> Address of Respondent</p> <p><input type="checkbox"/> Family search report (if for enforcement)</p> <p><input type="checkbox"/> ISO form O, Request for enforcement</p> <p><input type="checkbox"/> If to UK, New Zealand, or Australia, special documents</p> <p><input type="checkbox"/> Other</p>	<p>Incoming Provisional Support Application <input type="checkbox"/> Attached <input type="checkbox"/></p> <p><input type="checkbox"/> Legislation of recip. jurisdiction</p> <p><input type="checkbox"/> 3 copies of Support (or Variation) Application, or Provisional Order</p> <p><input type="checkbox"/> If for variation, 3 cert. copies of order being varied</p> <p><input type="checkbox"/> Certified / sworn evidence, transcripts, exhibits, if any</p> <p><input type="checkbox"/> Foreign translation</p> <p><input type="checkbox"/> Currency certificate</p> <p><input type="checkbox"/> Family search report</p> <p><input type="checkbox"/> ISO Bulletin # _____</p> <p><input type="checkbox"/> Other</p>	<p>Outgoing Provisional Support Application <input type="checkbox"/> Attached <input type="checkbox"/></p> <p><input type="checkbox"/> 3 cert. copies of Provision Order and/or Support (or Variation) Application</p> <p><input type="checkbox"/> Case Information form</p> <p><input type="checkbox"/> Address of respondent</p> <p><input type="checkbox"/> where to send payments</p> <p><input type="checkbox"/> Certified / sworn evidence, transcripts, exhibits, if any</p> <p><input type="checkbox"/> If for variation, 3 cert. copies of order being varied</p> <p><input type="checkbox"/> Other:</p>
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Notes: (Briefly note any unusual factors, urgency or requirements) (Identify Family Search file numbers for confidential respondent information)