

**AFFIDAVIT IN SUPPORT OF MOTION
REQUESTING AN INITIAL ORDER OF
ALIMONY OR SUPPORT**

JD-FM-303 New 1-24
C.G.S. § 46b-83; P.A. 23-7

For information on ADA accommodations, contact the Centralized ADA Office at 860-706-5310 or go to: www.jud.ct.gov/ADA/

STATE OF CONNECTICUT
JUDICIAL BRANCH
SUPERIOR COURT
www.jud.ct.gov



Instructions to person filling out this form (Affiant):

1. This affidavit must be filled out completely and given to the clerk along with your motion for initial orders of alimony or support.
2. Keep a copy of completed form with your records.
3. This affidavit may only be used in connection with an action (case) for annulment, dissolution of marriage (divorce) or civil union, legal separation, or custody of minor children. It cannot be used in an action for support or parentage.

Instructions to Clerk:

1. Upon receipt of this form, and the motion for initial orders of alimony or support, schedule for a hearing not later than sixty days from the date of filing.
2. In the event of a delay necessitated by a court closure or emergency experienced by a party, such hearing shall be rescheduled to a date that is not later than 14 days after the originally scheduled hearing date.

COURT USE ONLY
AFFSUPP

Judicial District	Address of court	
Name of case		Docket number

I, (*name*) _____, state under oath that:

1. This affidavit is made based on my own personal knowledge, and I understand the obligation of an oath.
2. I am over 18 years of age and competent to testify to the matters stated in this affidavit.
3. I am a party to the above case.
4. I, the moving party in the motion(s) accompanying this affidavit, have insufficient funds to meet my reasonable needs or the reasonable needs of the minor children of the parties.
5. The other party is not providing sufficient funds to me to meet such reasonable needs.
6. I reasonably believe that the other party has sufficient means or earning capacity to provide sufficient funds.

I certify under the penalties of perjury that the statements above and on any attached document are true, complete, and accurate to the best of my knowledge and belief. **I understand that willful misrepresentation of any of the information provided will subject me to sanctions and may result in criminal charges being filed against me.**

Signature (<i>Affiant</i>)	Print name	Date
Signature (<i>Notary, Commissioner of Superior Court, Assistant Clerk, Other Proper Officer under Section 1-24 of the Connecticut General Statutes</i>)	Print name	Date