AGREEMENT TO CHANGE A	Docket No.	Commonwealth of Massachusetts The Trial Court Probate and Family Court
IN THE MATTER OF: and		 Division

INSTRUCTIONS:

- → If this Agreement changes a judgment, then the signatures of Party A and Party B must be notarized (see last page of this form).
- If this Agreement changes a child's primary residence or custody, this Agreement must state whether any terms in the prior final judgment or temporary order relating to child support, health, dental, vision, or life insurance coverage for the child(ren) are also being changed or if they remain in effect. All provisions not modified here shall remain in the full force and effect.
- If this Agreement changes child support and the parties deviate from Guidelines, this Agreement must include specific facts that justify departure from the Guidelines.
- → If this Agreement terminates child support support upon a child reaching age 18, this Agreement must acknowledge that G.L. c. 208, § 28 or G.L. c. 209C, § 9 is not applicable. A copy of G.L. c. 208, § 28 or G.L. c. 209C, § 9 can be located at:
- → Please initital <u>each page</u> of this agreement and provide page numbers where indicated.

The parties agree as follows:

Date:	Date:			
Signature of Party A	Signature of Party B (Print name)			
(Print name)				
(Address) (Apt, Unit, No. etc.)	(Address)	(Apt, Unit, No. etc.		
(City/Town) (Zip) (Zip)	(City/Town)	(State) (Zip)		
Primary Phone:	Primary Phone:			
nformation on Attorney for Party A, if any	Information on Attorney for Party	y B, if any		
Attorney for Party A (if any)	Attorney for Party B (if any)			
(Address) (Apt, Unit, No. etc.)	(Address)	(Apt, Unit, No. etc.)		
(City/Town) (State) (Zip)	(City/Town)	(State) (Zip)		
(City/Town) (State) (Zip) Primary Phone #:		(State) (Zip)		

Initial here Party A _____

IN THE MATTER OF:		_ and		
	-	REQUIREMENT (hange a judgment only)		
State of		County of		
On this day of	, 20	, before me, the undersigned Notary Public personally		
appeared		(name of document signer), proved to me through satisfactory		
evidence of identification, which were		, to be the person whose name is signed on the		
preceding or attached document in my prese	ence.			
		Official Signature and Seal of Notary		
		(Print name)		
		My Commission Expires		
(1		REQUIREMENT hange a judgment only)		
State of	·	County of		
On this day of	, 20	, before me, the undersigned Notary Public personally		
		(name of document signer), proved to me through satisfactory		
evidence of identification, which were		, to be the person whose name is signed on the		
preceding or attached document in my prese	ence.			
		Official Signature and Seal of Notary		
		(Print name)		

My Commission Expires

page ____ of ____

^{Initial here} Party A _____ Party B _____