



- \_\_\_\_\_ d. The payment of extraordinary expenses of the child, if any;
- \_\_\_\_\_ e. Child care expenses if any;
- \_\_\_\_\_ f. Transportation expenses, if any.

\_\_\_\_\_  
[Attorney for (Petitioner)(Respondent)] (GAL)\*

CERTIFICATE OF SERVICE

The above signature hereby certifies that a true and accurate copy of the above and foregoing was mailed/faxed/hand-delivered on \_\_\_\_\_ to \_\_\_\_\_.