Form CS 5

Notice of appeal against Commissioner's decision to accept application for formula assessment of child support

Section 100, Child Support Act 1991

In the Family Court	FAM No:
at[place]	
	[full name]
	[address]
	[occupation]
	Appellant
Commission	ner of Inland Revenue
]	Respondent
	(including whether it is made with or without naffidavit or affirmation, the name of the illed.]
This document is filed by	
[name and address for service, and, in number of the acting lawyer.]	f filed by lawyers, the name and telephone

[full na	me]		
object to the Commissioner's decision under section 17(1) of the Act to accept an application for formula assessment of child support. Attached is a copy of the Commissioner's notification that the application has been accepted.			
[full name of child]	[full name of custodian]		
I objected to the Commissioner on against the Commissioner's decision to acceasessment of child support.			
The Commissioner disallowed the objection	n on[date]		
Take notice that I intend to appeal to the Fadecision to accept the application for formular respect of			
[full name of child]	[full name of custodian]		
on the ground(s) that—			
[select the option/s that applies]	most of a qualifying shild		
the application was not made in respect of a qualifying child.			

the application was not made by an eligible applicant.

the application required the payment of child support by a person who was not liable to pay child support under the Act in respect of the child.

I say:
[set out sufficient information to inform the Court of the facts relied on in support of the application]
Signature of appellant
Date

	Family Court
	at[place]
and	l
To	the respondent
Thi	s notice of appeal is filed by
who	[full name] ose address for service is
••••	[address]