

**The 18th Judicial District, Iberville, Pointe Coupee & West Baton Rouge Parishes
State of Louisiana**

Spousal Support/Child Support Arrearages

(Note: Use separate sheet for insurance, medical and other expenses ordered)

Date of last hearing at which award was made: _____
Date

Effective date of award: _____
Date

Amount of award: \$ _____
Amount

Amount payable when: _____
Time

Item Number	Due Date	Amount Date	Date Paid	Amount Paid	Check Number	Accrued Arrearage
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
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21.						
22.						
23.						
24.						
25.						
26.						
27.						
28.						
29.						
30.						
Totals						

Last arrearage judgment date: _____
Date

Number of prior findings of contempt: _____
Number

Balance due on prior arrearages as of date of filing this action: _____
Amount