

FILED

2015 JUN 4 AM 11 39

BRENDA DESHIELDS
CLERK AND RECORDER

IN THE CIRCUIT COURTS OF BENTON COUNTY, ARKANSAS
NINETEENTH JUDICIAL DISTRICT WEST
DOMESTIC RELATIONS

STANDING ORDER OF THE COURT
(Effective June 4, 2015)

All parties to any and all litigation pending before this Court shall be bound by the terms and provisions of this Standing Order effective immediately on the time and date of the filing of a complaint with the clerk of the appropriate court or on the time and date of actual notice of the complaint or petition having been filed.

The purpose of this Order is to mandate the preservation of the *status quo* with either party having the right to a prompt hearing to have the Standing Order vacated or modified.

IT IS HEREBY ORDERED:

1. Neither party shall injure, threaten or harass the other or encourage or solicit other persons to so act.
2. If property rights are at issue, neither party shall sell, agree to sell, mortgage, pledge or otherwise dispose of or destroy any of the property to which the parties own an interest except in the ordinary course of business.
3. If the rights or custody of children are at issue, neither party shall remove or consent to the removal of any child of the parties from the State of Arkansas without prior permission of this Court. However, in the normal

course of family activities, the child(ren) may be taken on short term out of state trips without permission of the Court.

4. Neither party shall cancel health insurance, automobile insurance, or other casualty or property damage insurance, cell phones, utilities or other necessities of life without permission of this Court.

STANDING ORDER FOR INCOME WITHHOLDING


Pursuant to Section 1(b)(3) of Act 1095 of 1991 of the General Assembly of the State of Arkansas, effective July 1, 1991, all support orders issued by this court shall include a provision for immediate implementation of income withholding from the wages of the non-custodial parent, absent a specific finding of good cause not to require immediate withholding.

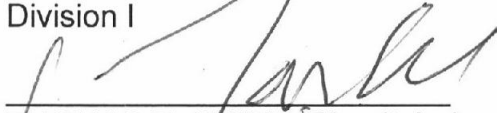
Further, all orders or decrees which contain a provision for the implementation of income withholding shall be accompanied at the time of filing with the Clerk of the court a completed current information sheet in the form as shown on "Exhibit A" attached hereto, and funds equal to cost of service of lawful notice to the employer of the non-custodial parent by certified mail per *Ark. Code § 9-14-222(c)*. The party presenting the decree or order for filing, being either the custodial or non-custodial parent, shall be responsible for payment of the cost of this notice.

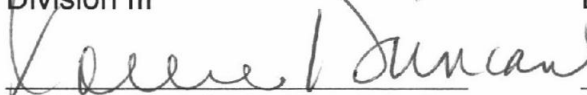
NOTICE


The willful violation of this Order may result in punishment by fine or imprisonment or both.

SO ORDERED this 4th day of June, 2015.


ROBIN GREEN, Circuit Judge
Division I


THOMAS E. SMITH, Circuit Judge
Division III


XOLLIE DUNCAN, Circuit Judge
Division V


BRAD KARREN, Circuit Judge
Division II


JOHN R. SCOTT, Circuit Judge
Division IV


DOUG SCHRANTZ, Circuit Judge
Division VI

CONFIDENTIAL INFORMATION
FOR USE ONLY BY THOSE AUTHORIZED BY
Arkansas Code Annotated 9-14-205

Custodial Parent/Custodian: _____

Residential Addr: _____
(Street) (City) (St) (Zip)

Mailing Addr: _____
(Street or PO Box) (City) (St) (Zip)

Phone Numbers: (Home) _____ (Cell) _____

Social Security Number: _____ DOB: _____

Driver's License Number: (State) _____ (Number) _____

Employer's Name or Business: _____

Address: _____ City: _____

State: _____ Zip Code: _____

Non-Custodial Parent: _____

Residential Addr: _____
(Street) (City) (St) (Zip)

Mailing Addr: _____
(Street or PO Box) (City) (St) (Zip)

Phone Numbers: (Home) _____ (Cell) _____

Social Security Number: _____ DOB: _____

Driver's License Number: (State) _____ (Number) _____

Employer's Name or Business: _____

Address: _____ City: _____

State: _____ Zip Code: _____

Children's Names and Birth Dates:

Name: _____	DOB: _____	SSN: _____
Name: _____	DOB: _____	SSN: _____
Name: _____	DOB: _____	SSN: _____
Name: _____	DOB: _____	SSN: _____

Print or Type preparer's name: _____

Docket Number _____

OCSE Case Number _____

Style of Case _____

Exhibit A