



information or access to the information as to the cost of the coverage. Affiant has subpoenaed the information from the employer.

\_\_\_\_ 5. Affiant states there is no health insurance available through either parent's employer. The attached child support calculation includes a cash medical payment to be paid in addition to the child support order by the obligor in this case.

\_\_\_\_ 6. Affiant states there is no health insurance available through either parent's employer. Affiant further states that the parties' children are covered by a state medical card with \_\_\_\_\_ as the custodian of the children. The attached child support calculation includes a cash medical payment to be paid in addition to the child support by the obligor in this case.

\_\_\_\_ 7. Affiant states he/she has no knowledge as to whether there is health insurance available through the other parent's  employer  private health insurance  spouse. The attached child support calculation provides for child support and a cash medical payment to be paid by the obligor if there is no coverage.

#### OATH OF AFFIANT

I hereby swear or affirm that the answers above are true, complete and accurate. I understand that falsification of this document may result in a contempt of court finding against me which could result in a jail sentence and fine, and that falsification of the document may also subject me to criminal penalties for perjury (R.C. 2921.11).

\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Date

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My commission expires \_\_\_\_\_