State of Alabama Unified Judicial System

Form CS-19

Rev. 7/92

NOTICE & SUMMONS WITHHOLDING FOR SUPPORT

Case Number

COURT OF COUNTY, ALABAMA

pursuant to Rule

(Date)

o n

IN THE ___

NOTICE TO

YOU ARE HEREBY NOTIFIED THAT LEGAL PROCEEDINGS HAVE BEEN BROUGHT AGAINST YOU BY THE PLAINTIFF LISTED ON THE ATTACHED PETITION AND THAT UNDER THE PROVISIONS OF §§ 30-3-62 AND 25-4-152, CODE OF ALABAMA 1975, AN INCOME WITHHOLDING ORDER FOR SUPPORT MUST BE ISSUED BY THIS COURT UNLESS YOU OR YOUR ATTORNEY REQUEST A HEARING IN WRITING ON THIS MATTER WITHIN TEN (10) DAYS AFTER THIS NOTICE AND SUMMONS AND PETITION WERE DELIVERED TO YOU.

IF YOU NEED READ THE ATTACHED PETITION AND OTHER RELATED DOCUMENTS CAREFULLY. ASSISTANCE WITH THIS PROCEEDING, YOU SHOULD CONSULT A LAWYER.

If you request a hearing, at such hearing, you may contest the issuance of a Withholding Order for Support on the basis of mistake of fact only.

Your written request for a hearing must be filed with the Clerk of the Court within ten (10) days after this Summons and Petition were delivered to you. Indicate on your written request your current mailing address. Additionally, a copy of your written request should be mailed to the plaintiff's attorney at the address shown on the attached Petition.

If you request a hearing, you will be notified of the date and time of the hearing.

receipt

You are further notified that any Withholding Order issued by the court will not be served on your employer/the Department of Industrial Relations and will not take effect unless:

- (1) You are currently delinquent or you become delinquent in a dollar amount equal to one month of support payments; or,
- The plaintiff or you file an affidavit with the court requesting that the withholding order take effect at an (2) earlier date: or.
- The court otherwise orders that the withholding order take effect at an earlier date. (3)

This service by certified mail of this Notice and Summons is initiated upon the written request of

4.1(c) of the Alabama Rules of Civil Procedure.

Date

Clerk

By:_____

RETURN ON SERVICE:

Certified mail

received i n this office (Return receipt hereto attached).