

NOTICE OF DELINQUENCY

To:

You are hereby notified that:

1. You were ordered to pay " child support " spousal support (check all that apply) in the amount of \$_____ per_____.
2. This support order ends:

" when the minor child(ren) of the parties reach(es) the age of 18, or 20 while enrolled in secondary school, marries, dies, or becomes otherwise emancipated;

" on _____ (write in the specific date.)
3. This support was ordered by the _____ Court of _____ County (write in the name of the court and the county that issued the order) in case number _____ (write in the case number) on _____ (write in the date).
4. You have been delinquent for _____ months. The total amount of delinquency is \$_____. The arrearage stated in this notification is the amount due as of this date. I am entitled to receive any additional arrearage which may accrue.
5. In addition to the payments for current support and arrearage, you may be charged an additional \$2.00 per payment for administrative fees.
6. The **total amount to be deducted including arrearage** is \$ _____ per _____. This amount will decrease to \$ _____ when all support arrearage has been paid. The maximum amount to be deducted shall not exceed the amounts allowed in Sec. 303. B of the Consumer Credit Protection Act, 15 U.S.C. Sec 1673 (b).
7. A copy of this Notice of Delinquency will be provided to your employer or employers, along with a copy of the Income Deduction Order.
8. You may apply to the Court to contest the enforcement of the Income Deduction Order once the Notice of Delinquency has been served. The support will continue to be deducted from your income until the Court enters an order granting your application.
9. The enforcement of the Income Deduction Order may be contested only if you believe that there is a mistake regarding the amount of support that you are required to pay, the amount of arrearage that you owe, or if you are not the person who is required to make the payments.
10. You are required to notify me, within seven (7) days, of your current address, your current employer, and your employer's address.

(Your signature)
(Print your name)
(Your address)

If you require materials in alternate format, please notify the Family Law Information Center as soon as possible.