

South Carolina Department of Social Services

ORDER/NOTICE TO WITHHOLD INCOME FOR CHILD SUPPORT

NOTICE OF AN ORDER TO WITHHOLD INCOME FOR CHILD SUPPORT

Original Amended Termination Date: _____
 State/Tribe/Territory: _____
City/Co./Dist./Reservation: _____
 Non-Governmental Entity or Individual: _____
Case Number: _____

_____) RE: _____
Employer's/Withholder's Name Employee's/Obligor's Name (Last, First, MI)
_____) _____
Employer's/Withholder's Address Employee's/Obligor's Social Security Number
_____) _____
Employee's/Obligor's Case Identifier
_____) _____
Obligee's Name (Last, First, MI)
_____) _____
Employer's/Withholder's Federal EIN Number (if known)

Order Information: This document is based on the support or withholding order from _____.

You are required by law to deduct these amounts from the employee's/obligor's income until further notice:

- \$ _____ per _____ current child support;
- \$ _____ per _____ past due child support – Arrears greater than 12 weeks? Yes No
- \$ _____ per _____ current cash medical support;
- \$ _____ per _____ past due cash medical support;
- \$ _____ per _____ spousal support;
- \$ _____ per _____ past due spousal support;
- \$ _____ per _____ other (specify) _____ ;

for a total of \$ _____ per _____ to be forwarded to the payee below.

You do not have to vary your pay cycle to be in compliance with the support order. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

- \$ _____ per weekly pay period. \$ _____ per semimonthly pay period (twice a month)
- \$ _____ per biweekly pay period (every two weeks). \$ _____ per monthly pay period.

Remittance Information: When remitting payment, provide the pay date/date of withholding and the case identifier.

If the employee's/obligor's principal place of employment is _____, begin withholding no later than the first pay period occurring _____ days after the date of _____. Send payment within _____ working days of the pay date/date of withholding. The total withheld amount, including your fee, may not exceed _____ % of the employee's/obligor's aggregate disposable weekly earnings.

If the employee's/obligor's place of employment is not _____, for limitations on withholding, applicable time requirements, and any allowable fees, follow the laws and procedures of the employee's/obligor's principal place of employment (see No. 3 and No. 9, **Additional Information to Employers and Other Withholders**).

Make Check Payable to: _____ Send Check to: _____
If remitting payment by EFT/EDI, call _____ before first submission. Use this FIPS code: _____
Bank Routing Number: _____ Bank Account Number: _____

IF THIS IS AN ORDER/NOTICE TO WITHHOLD:

Print Name: _____
Title of Issuing Officer: _____
Signature and Date: _____
 IV-D Agency Court
 Attorney with authority under state law to issue order/notice

IF THIS IS A NOTICE OF AN ORDER TO WITHHOLD:

Print Name: _____
Title: (if appropriate) _____
Signature and Date: _____
 Attorney Individual Private Entity

Note: Non-IV-D attorneys, individuals and non-governmental entities must submit a Notice of an Order to Withhold and include a copy of the income withholding order unless, under a state's law, an attorney in that state may issue an income withholding order. In that case, the attorney may submit an Order/Notice to Withhold and include a copy of the state law authorizing the attorney to issue an income withholding order/notice.

Important: The person completing this form is advised that the information on this form may be shared with the obligor.

Additional Information to Employers and Other Withholders

If checked, you are required to provide a copy of this form to your employee/obligor. If your employee works in a state that is different from the state that issued this order, a copy must be provided to your employee/obligor even if the box is not checked.

- 1. **Priority:** Withholding under this Order or Notice has priority over any other legal process under state law (or tribal law, if applicable) against the same income. If there are federal tax levies in effect, please notify the contact person listed below. (See number 10 below.)
- 2. **Combining Payments:** You may combine withheld amounts from more than one employee's/obligor's income in a single payment to each agency/party requesting withholding. You must, however, separately identify the portion of the single payment that is attributable to each employee/obligor.
- 3. **Reporting the Paydate/Date of Withholding:** You must report the paydate/date of withholding when sending the payment. The paydate/date of withholding is the date on which the amount was withheld from the employee's wages. You must comply with the law of the state of employee's/obligor's principal place of employment with respect to the time periods within which you must implement the withholding and forward the support payments.
- 4. **Employee/Obligor with Multiple Support Withholdings:** If there is more than one Order or Notice against this employee/obligor and you are unable to honor all support Orders or Notices due to federal, state or tribal withholding limits, you must follow the state or tribal law/procedure of the employee's/obligor's principal place of employment. You must honor all Orders or Notices to the greatest extent possible. (See number 9 below.)
- 5. **Termination Notification:** You must promptly notify the Child Support Enforcement (IV-D) Agency and/or the contact person listed below when the employee/obligor no longer works for you. Please provide the information requested and return a complete copy of this Order or Notice to the Child Support Enforcement (IV-D) agency and/or the contact person listed below. (See number 10 below.)

Employee/Obligor No Longer Works For: _____
Employee's/Obligor's Name: _____ **Case Identifier:** _____
Date of Separation From Employment: _____
Last Known Home Address: _____
New Employer/Address: _____

- 6. **Lump Sum Payments:** You may be required to report and withhold from lump sum payments such as bonuses, commissions or severance pay. If you have any questions about lump sum payments, contact the Child Support Enforcement (IV-D) agency.
- 7. **Liability:** If you have any doubts about the validity of the Order or Notice, contact the agency or person listed below under number 10. If you fail to withhold income as the Order or Notice directs, you are liable for both the accumulated amount you should have withheld from the employee's/obligor's income and any other penalties set by state or tribal law/procedures.

- 8. **Anti-discrimination:** You are subject to a fine determined under state or tribal law for discharging an employee/obligor from employment, refusing to employ or taking disciplinary action against any employee/obligor because of a child support withholding.

- 9. **Withholding Limits:** For state orders, you may not withhold more than the lesser of: 1) the amount allowed by the Federal Consumer Credit Protection Act (15 U.S.C. § 1673(b)); or 2) the amounts allowed by the state of the employee's/obligor's principal place of employment. The federal limit applies to the aggregate disposable weekly earnings (ADWE). ADWE is the net income left after making mandatory deductions such as: state, federal, local taxes, Social Security taxes, statutory pension contributions and Medicare taxes. The Federal CCPA limit is 50% of the ADWE for child support and alimony, which is increased by 1) 10% if the employee does not support a second family; and/or 2) 5% if arrears greater than 12 weeks.

For tribal orders, you may not withhold more than the amounts allowed under the law of the issuing tribe. For tribal employers who receive a state order, you may not withhold more than the amount allowed under the law of the state that issued the order.

Child(ren)'s Names and Additional Information: _____

- 10. If you or your employee/obligor have any questions, contact _____
 by telephone at _____ by fax at _____
 or by internet at _____.

South Carolina Department of Social Services

1a ORDER/NOTICE TO WITHHOLD INCOME FOR CHILD SUPPORT
 NOTICE OF AN ORDER TO WITHHOLD INCOME FOR CHILD SUPPORT

Original Amended Termination # 1b Date: # 1c
 State/Tribe/Territory: # 1d
City/Co./Dist./Reservation: # 1e
 Non-Governmental Entity or Individual: # 1f
Case Number: # 1g

2a) RE: # 3a
Employer's/Withholder's Name Employee's/Obligor's Name (Last, First, MI)
2b) # 3b
Employer's/Withholder's Address Employee's/Obligor's Social Security Number
2c) # 3c
Employee's/Obligor's Case Identifier
2d) # 3d
Employer's/Withholder's Federal EIN Number (if known) Obligor's Name (Last, First, MI)

Order Information: This document is based on the support or withholding order from (State/Tribe) # 4

You are required by law to deduct these amounts from the employee's/obligor's income until further notice:

\$ # 5a per # 5b current child support; # 13
\$ # 6a per # 6b past due child support - Arrears greater than 12 weeks? Yes No
\$ # 7a per # 7b current cash medical support;
\$ # 8a per # 8b past due cash medical support;
\$ # 9a per # 9b spousal support;
\$ # 10a per # 10b past due spousal support;
\$ # 11a per # 11b other (specify) # 11c ;
for a total of \$ # 12a per # 12b to be forwarded to the payee below.

You do not have to vary your pay cycle to be in compliance with the support order. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

\$ # 14a per weekly pay period. \$ # 14c per semimonthly pay period (twice a month)
\$ # 14b per biweekly pay period (every two weeks). \$ # 14d per monthly pay period.

Remittance Information: When remitting payment, provide the pay date/date of withholding and the case identifier.

If the employee's/obligor's principal place of employment is # 15, begin withholding no later than the first pay period occurring # 16 days after the date of # 17. Send payment within # 18 working days of the pay date/date of withholding. The total withheld amount, including your fee, may not exceed # 19 % of the employee's/obligor's aggregate disposable weekly earnings.

If the employee's/obligor's place of employment is not # 20, for limitations on withholding, applicable time requirements, and any allowable fees, follow the laws and procedures of the employee's/obligor's principal place of employment (see No. 3 and No. 9, Additional Information to Employers and Other Withholders).

Make Check Payable to: # 21(Payee and Case Identifier) Send Check to: # 22
If remitting payment by EFT/EDI, call # 23a before first submission. Use this FIPS code: # 23b
Bank Routing Number: # 23c Bank Account Number: # 23d

IF THIS IS AN ORDER/NOTICE TO WITHHOLD:

IF THIS IS A NOTICE OF AN ORDER TO WITHHOLD:

Print Name Title of Issuing Officer Signature and Date
Signature and Date (if required by state or trial law)
Print Name Title: (if appropriate) Signature and Date:
IV-D Agency Court Attorney Individual Private Entity
Attorney with authority under state law to issue order/notice

Note: Non-IV-D attorneys, individuals and non-governmental entities must submit a Notice of an Order to Withhold and include a copy of the income withholding order unless, under a state's law, an attorney in that state may issue an income withholding order. In that case, the attorney may submit an Order/Notice to Withhold and include a copy of the state law authorizing the attorney to issue an income withholding order/notice.

Important: The person completing this form is advised that the information on this form may be shared with the obligor.

Additional Information to Employers and Other Withholders

If checked, you are required to provide a copy of this form to your employee/obligor. If your employee works in a state that is different from the state that issued this order, a copy must be provided to your employee/obligor even if the box is not checked.

- 1. **Priority:** Withholding under this Order or Notice has priority over any other legal process under state law (or tribal law, if applicable) against the same income. If there are federal tax levies in effect, please notify the contact person listed below. (See number 10 below.)
- 2. **Combining Payments:** You may combine withheld amounts from more than one employee's/obligor's income in a single payment to each agency/party requesting withholding. You must, however, separately identify the portion of the single payment that is attributable to each employee/obligor.
- 3. **Reporting the Paydate/Date of Withholding:** You must report the paydate/date of withholding when sending the payment. The paydate/date of withholding is the date on which the amount was withheld from the employee's wages. You must comply with the law of the state of employee's/obligor's principal place of employment with respect to the time periods within which you must implement the withholding and forward the support payments.
- 4. **Employee/Obligor with Multiple Support Withholdings:** If there is more than one Order or Notice against this employee/obligor and you are unable to honor all support Orders or Notices due to federal, state or tribal withholding limits, you must follow the state or tribal law/procedure of the employee's/obligor's principal place of employment. You must honor all Orders or Notices to the greatest extent possible. (See number 9 below.)
- 5. **Termination Notification:** You must promptly notify the Child Support Enforcement (IV-D) Agency and/or the contact person listed below when the employee/obligor no longer works for you. Please provide the information requested and return a complete copy of this Order or Notice to the Child Support Enforcement (IV-D) agency and/or the contact person listed below. (See number 10 below.)

Employee/Obligor No Longer Works For: _____
Employee's/Obligor's Name: _____ **Case Identifier:** _____
Date of Separation From Employment: _____
Last Known Home Address: _____
New Employer/Address: _____

- 6. **Lump Sum Payments:** You may be required to report and withhold from lump sum payments such as bonuses, commissions or severance pay. If you have any questions about lump sum payments, contact the Child Support Enforcement (IV-D) agency.
- 7. **Liability:** If you have any doubts about the validity of the Order or Notice, contact the agency or person listed below under number 10. If you fail to withhold income as the Order or Notice directs, you are liable for both the accumulated amount you should have withheld from the employee's/obligor's income and any other penalties set by state or tribal law/procedures.

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- 8. **Anti-discrimination:** You are subject to a fine determined under state or tribal law for discharging an employee/obligor from employment, refusing to employ or taking disciplinary action against any employee/obligor because of a child support withholding.

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- 9. **Withholding Limits:** For state orders, you may not withhold more than the lesser of: 1) the amount allowed by the Federal Consumer Credit Protection Act (15 U.S.C. § 1673(b)); or 2) the amounts allowed by the state of the employee's/obligor's principal place of employment. The federal limit applies to the aggregate disposable weekly earnings (ADWE). ADWE is the net income left after making mandatory deductions such as: state, federal, local taxes, Social Security taxes, statutory pension contributions and Medicare taxes. The Federal CCPA limit is 50% of the ADWE for child support and alimony, which is increased by 1) 10% if the employee does not support a second family; and/or 2) 5% if arrears greater than 12 weeks.

For tribal orders, you may not withhold more than the amounts allowed under the law of the issuing tribe. For tribal employers who receive a state order, you may not withhold more than the amount allowed under the law of the state that issued the order.

Child(ren)'s Names and Additional Information: # 29

- 10. If you or your employee/obligor have any questions, contact _____ # 30a
 by telephone at _____ # 30b _____ by fax at _____ # 30c
 or by internet at _____ # 30d _____ .

**Child Support Enforcement Program
Action Transmittal**

**U.S Department of
Health and Human Services
Administration for Children and Families
Office of Child Support Enforcement
Washington, D.C. 20447**

Transmittal No. OCSE-AT 04-05

Date: July 15, 2004

To: **State and Tribal Agencies Administering Child Support Enforcement Plans Under Title IV-D of the Social Security Act and Other Interested Individuals**

Subject: Revised Federal Order/Notice to Withhold Income for Child Support and Notice of an Order to Withhold Income for Child Support

Attachment: Attached is a copy of the **revised** Federal standardized income withholding form, as required by Section 324 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193). The attachment includes the standardized forms titled, "Other/Notice to Withhold Income for Child Support" and "Notice of an Order to Withhold Income for Child Support" (Order/Notice); the instructions for completing the forms, and a sample numbered copy of the Order/Notice to use as a guide with the instructions.

Statutory Reference: 42 U.S.C. 652(a)(11) and 42 U.S.C. 654(9)(E)

Background: The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193) mandated that state IV-D agencies adopt the Uniform Interstate Family Support Act (UIFSA). It also required that states transmit orders and notices for income withholdings to employers (and other dept holders) using uniform formats prescribed by the Secretary of Health and Human Services no later than October 1, 1998. The UIFSA enables states to use direct income withholding as an immediate remedy in interstate child support cases. All state IV-D agencies have adopted UIFSA. While the Uniform Interstate Family Support Act (UIFSA) compels a state employer to honor a withholding order sent directly from another state or Indian tribe, tribes are not subject to UIFSA. However, the Full Faith and Credit for Child Support Order Act (FFCCSOA) required tribes to enforce valid child support orders.

In March, 2002, the U.S. General Accounting Office (GAO) completed a review of the income withholding form and published recommendations to change the Order/Notice guidance and form. Their recommendations were: to require all parties, except state agencies, to send a copy of the income withholding order or other documents authorizing income withholding when sending a notice to employers; to allow employers to request the document(s) authorizing income withholding when Order/Notices are not sent by state agencies; and to specify who should sign the form to clearly distinguish when the form is being sent by a state agency from when it is being sent as a notice by private firms or others.

The Office of Child Support Enforcement (OCSE) established a task group to incorporate GAO's recommendations and conduct meetings with stakeholders in the child support enforcement community. The task group held meetings with the National Council of Child Support Directors, all of the tribes operating IV-D programs, and the Child Support Council. The Child Support Council represents the private collection agencies. Written comments were submitted by representatives from the American Payroll Association and the Department of Defense. All of the comments were considered and a draft of the revised Order/Notice was published for comments in October, 2003 and in March, 2004.

To ensure consistency, the revised Order/Notice should be used by public and private entities immediately. With the publication of the Final Rule for Tribal Child Support Enforcement Programs on March 30, 2004 (69 FR 16638), tribes that operate IV-D programs are required to use the Federal Order/Notice. The revisions to the Order/Notice reflect the mandate for use of the form by tribes and provide instructions on processing the orders/notices and the Consumer Credit Protection Act withholding limits.

The revisions of the instructions clarify how to complete the Order/Notice and what documentation is required when submitting the Order/Notice for collection. Another significant clarification in the instructions is that non-government entities or individuals must submit a Notice to Withhold Income for Child Support and a copy of the withholding order. Throughout the Order/Notice and instructions, modifications are made to include tribal child support enforcement requirements. Please note that our tribal child support enforcement communities have income-withholding laws that may differ from state laws.

**Explanation
of Changes:**

State and local IV-D agencies, tribunals/courts, individuals and private agencies are able to submit the Order/Notice to employers for wage withholding. The revised Order/Notice was reorganized to provide space for tribunal/court information (i.e., stamps) in addition to the tribunal/court case number. The Remittance Information was reworded to provide clear guidance for an employer to remit payments as prescribed in the underlying order of the tribunal/court.

The instructions for "case number" (1g, 3c, 22) state that, for IV-D cases, this must be a IV-D case number. To facilitate the tracking of information related to a case, the IV-D case number/identifier should be identical to the one submitted on the Federal Case Registry, which is a 15-character alphanumeric field, allowing all characters except asterisk and backslash, and with all characters in uppercase.

Children's names have been moved to the back of the form near the bottom of the page, on the line entitled, "Children's Names and Additional Information."

Although we received comments suggesting the removal of children's names, several users of the form rely on children's names to ensure they have not received a duplicate order for the obligor. The instructions to complete the form provide detailed descriptions of the information needed for an employer to process the Order/Notice.

The signature lines have been revised. The individual signing the Order/Notice must indicate what type of entity (government or non-government) he or she represents. Please note that, in some instances, copies of the withholding order and state law must be provided so that the employer can process the Order/Notice.

Please complete the form carefully when processing. If you have any questions, please contact your ACF regional office.

Effective Date: Immediately.

Sherri Z. Heller, Ed.D.
Commissioner
Office of Child Support Enforcement

INSTRUCTIONS TO COMPLETE DSS FORM 27126

The Order/Notice to Withhold Income for Child Support (Order/Notice) or Notice of an Order to Withhold Income for Child Support (Notice) is a standardized form used for income withholding in tribal, intrastate, interstate and intergovernmental cases. Please note that information provided on this form may be shared with the obligor. When completing the form, please include the following information.

The following information in numbers 1a-1g refers to the government agency, non-government entity or individuals completing and sending this form to the employer.

- 1a. Check whether this is an Order/Notice to Withhold Income for Child Support or a Notice of an Order to Withhold Income for Child Support. Attorneys, individuals and non-governmental entities must submit a Notice of an Order to Withhold and include a copy of the income withholding order unless, under a state's law, an attorney in that state may issue an income withholding order/notice. In that case, the attorney may submit an Order/Notice to Withhold and include a copy of the state law authorizing the attorney to issue an income withholding order/notice.
- 1b. Check the appropriate status of the Order of Notice.
- 1c. Date this form is completed and/or signed.
- 1d. Name of the state, tribe or territory sending this form. This must be a governmental entity.
- 1e. Name of the county, city, district or reservation sending this Order or Notice, if appropriate. This must be a governmental entity.
- 1f. Check and indicate the non-governmental entity or individual sending this Order or Notice. Complete this item only if a non-governmental entity or individual is submitting this Order or Notice.
- 1g. Identifying case number used by the entity or individual sending this Order or Notice. In a IV-D case, this must be the IV-D case number.

The following information in numbers 2 and 3 refers to the obligor, obligor's employer and case identification.

- 2a. Employer's/withholder's name.
- 2b-c. Employer's/withholder's mailing address, city and state. (This may differ from the Employee's/Obligor's work site.)
- 2d. Employer's/withholder's nine-digit federal employer identification number (FEIN) if available. Include three-digit location code.
- 3a. Employee's/obligor's last name, first name and middle initial.
- 3b. Employee's/obligor's Social Security number (if known).
- 3c. The case identifier used by the order issuing state or tribe for recording payments. (Should be the same as No. 21.) In a IV-D case, this must be the IV-D case number.
- 3d. Custodial parent's last name, first name and middle initial (if known).

ORDER INFORMATION

The following information in numbers in 4-14e refers to the dollar amount taken directly from the child support order.

4. Name of the state or tribe that issued the support order.
- 5a-b. Dollar amount to be withheld for payment or current child support, time period that corresponds to the amount in No. 6a (such as month, week, etc.).
- 6a-b. Dollar amount to be withheld for payment of past-due child support, time period that corresponds to the amount in No. 6a (such as month, week, etc.).
- 7a-b. Dollar amount to be withheld for payment of current cash medical support, as appropriate, based on the underlying order, time period that corresponds to the amount in No. 7a (such as month, week, etc.).

- 8a-b. Dollar amount to be withheld for payment of past due cash medical support, if appropriate, based on the underlying order and the time period that corresponds to the amount in No. 8a (such as month, week, etc.).
- 9a-b. Dollar amount to be withheld for payment for spousal support (alimony), if appropriate, based on the underlying order, time period that corresponds to the amount in No. 9a (such as month, week, etc.).
- 10a-b. Dollar amount to be withheld for payment of past due spousal (alimony), if appropriate, based on the underlying order, time period that corresponds to the amount in No. 10a (such as month, week, etc.).
- 11a-c. Dollar amount to be withheld for payment of miscellaneous obligations, if appropriate, based on the underlying order, time period that corresponds to the amount in No. 11a (e.g., month, week, etc.) and description of the miscellaneous obligation.
- 12a. Total of No. 5a, No. 6a, No. 7a, No. 8a, No. 9a, No. 10a and No. 11a.
- 12b. Time period that corresponds to the amount in No. 12a (e.g., month).
- 13. Check this box if arrears greater than 12 weeks.
- 14a. Amount an employer should withhold if the employee is paid weekly.
- 14b. Amount an employer should withhold if the employee is paid every two weeks.
- 14c. Amount an employer should withhold if the employee is paid twice a month.
- 14d. Amount an employer should withhold if the employee is paid once a month.

REMITTANCE INFORMATION

- 15. The state, tribe or territory from which this Order/Notice or Notice of an Order is sent.
- 16. Number of days in which the withholding must begin pursuant to the issuing state's or tribe's laws/procedures.
- 17. The effective date of the income withholding.
- 18. Number of working days within which an employer or other withholder of income must remit amounts withheld pursuant to the issuing state's law.
- 19. The percentage of income that may be withheld from the employee's/obligor's income. For state orders, you may not withhold more than the lesser of: 1) the amount allowed by the Federal Consumer Credit Protection Act (15 U.S.C. 1673(b)); or 2) the amounts allowed by state of the employee's/obligor's principal place of employment. The federal limit applies to the aggregate disposable weekly earnings (ADWE). ADWE is the net income after making mandatory deductions such as: state, federal, local taxes, Social Security taxes, statutory pension contributions and Medicare taxes.

For tribal orders, you may not withhold more than the amounts allowed under the law of the issuing tribe. For tribal employers who receive a state order, you may not withhold more than the amounts allowed under the law of the state that issued the order.

- 20. The state, tribe or territory from which the Order or Notice is sent.
- 21. Name of the State Disbursement Unit, individual, tribunal/court or tribal child support enforcement agency specified in the underlying income withholding order to which payments are required to be sent. This form may not indicate a location other than that specified by an entity authorized under state or tribal law to issue an income withholding order. Please include the case identifier used to record payment (should be the same as 3c). In a IV-D case, this must be the IV-D case number.
- 22. Address of the State Disbursement Unit, tribunal/court, tribal child support enforcement agency or individual identified in No. 21. This information is shared with the obligor. Be sure to safeguard confidential addresses.

Complete only for EFT/EDI transmission.

- 23a. Telephone number of contact to provide EFT/EDI instructions.

- 23b. Federal Information Process Standard (FIPS) code for transmitting payments through EFT/EDI. The FIPS code is five characters that identify the state, county or tribe. It is seven characters when it identifies the state, county and a location within the county. It is necessary for centralized collections.
- 23c. Receiving agency's bank routing number.
- 23d. Receiving agency's bank account number.

IV-D agencies, courts and attorneys (with authority to issue an income withholding order/notice) sending an Order/Notice to Withhold Income for Child Support must complete number 24a-e.

- 24a. Print name of the government official authorizing this Order or Notice to Withhold.
- 24b. Print title of the government official authorizing this Order or Notice to Withhold.
- 24c. Signature of government official authorizing this Order/Notice to Withhold and date of signature. This line may be optional only if the Withholding Order/Notice includes the name and title of a government official (line 24a, 24b) and a signature of the official (line 24-c) is not required by state or tribal law. Provide a signature if required by state or tribal law.
- 24d. Check the appropriate box to indicate whether a child support enforcement agency (IV-D) or court is authorizing this Order or Notice for withholding.
- 24e. Check the box if you are an attorney with authority to issue an order or notice under state law.

Attorneys, individuals and private entities sending a Notice of an Order to Withhold Income for Child Support complete number 25a-d.

- 25a. Print name of the individual or entity sending this Notice.
- 25b. Print title of the individual sending this Notice, if appropriate.
- 25c. Signature of the individual sending this Notice and date of signature.
- 25d. Please check the appropriate box to indicate whether you are an attorney, individual or private entity sending this Notice of an Order.

The following information refers to federal, state or tribal laws that apply to issuing an income withholding order/notice or notice of an order to the employer. Any state or tribal specific information may be included in space provided.

- 26. Check the box if the state or tribal law requires the employer to provide a copy of the Order or Notice to the employee.
- 27. Use this space to provide additional information on the penalty and/or citation for an employer who fails to comply with the Order or Notice. The law of the obligor's principal place of employment governs the penalty.
- 28. Use this space to provide additional information on the penalty and/or citation for an employer, who discharges, refuses to employ or disciplines an employee/obligor as a result of the Order or Notice. The law of the obligor's principal place of employment governs the penalty.
- 29. Use this space to provide the child(ren)'s name(s) in the support order and/or additional information regarding this income withholding Order or Notice of an Order.

Please provide the following contact information to the employer. Employers may need additional information to process the Order or Notice.

- 30a. Name of the contact person sending the Order or Notice of an Order that an employer and/or employee/obligor may call for information regarding the Order or Notice of an Order.
- 30b. Telephone number for the contact person whose name appears in No. 30a.
- 30c. Fax number for the person whose name appears in No. 30a.
- 30d. Internet address for the person whose name appears in No. 30a.

If the employer is a Federal Government agency, the following instructions apply.

- Serve the Order or Notice of an Order upon the governmental agent listed in 5 CFR part 581, appendix A.
- Sufficient identification information must be provided in order for the obligor to be identified. It is, therefore, recommended that the following information, if known and if applicable, be provided:
 - (1) Full name of the obligor; (2) date of birth; (3) employment number, Department of Veterans Affairs claim number or civil service retirement claim number; (4) component of the government entity for which the obligor works and the official duty station or worksite; and (5) status of the obligor, e.g., employee, former employee or annuitant.
 - You may withhold from a variety of incomes and forms of payment, including voluntary separation incentive payments (buy-out payments), incentive pay and cash awards. For a more complete list see 5 CFP 581.103.

The Paperwork Reduction Act of 1995

This information collection is conducted in accordance with 45 CFR 303.100 of the child support enforcement program. Standard forms are designed to provide uniformity and standardization for interstate case processing. Public reporting burden for this collection of information is estimated to average one hour per response. The responses to this collection are mandatory in accordance with 45 CFR 303.7. This information is subject to state and federal confidential requirements; however, the information will be filed with the tribunal and/or agency in the responding state and may, depending on State law, be disclosed to other parties. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.