

**CHILD SUPPORT PROCESSES
OPTIONS FOR CANADA**

APPENDIX D

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
DIVISION OF CHILD SUPPORT (DCS)

NOTICE AND FINDING OF FINANCIAL RESPONSIBILITY

(RCW 26.16, RCW 26.18, RCW 26.21, RCW 26.23, RCW 74.20, RCW 74.20A, WAC 388-11, WAC 388-14)

TO: RE:
SSN:

This notice sets the amount of child support that you must pay. Reply to the Division of Child Support (DCS) within 20 days (if we served you this notice in Washington State) or within 60 days (if we served you this notice outside Washington State) after you receive this notice.

If you do not reply, this notice will become a final child support order. We will enforce this notice as stated in the Enforcement section on page 4.

Our records show that your social security number is _____.

CHILD SUPPORT AND INCOME

We believe you owe child support for the children listed below.

Names	Birth Dates	Social Security Numbers
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

We set the following child support amount for you

- \$ _____ current monthly child support based on:
 - _____ children under age 12 at \$ _____ per month for each child.
 - _____ children age 12 or older at \$ _____ per month for each child.
 - Additional expenses, credits, deviations, or limitations as shown on the attached *Washington State Child Support Schedule* work sheet \$ _____.
- \$ _____ total past-due child support for the periods:

Your first current child support payment is due on _____. Future payments are due on the _____ day of each following month.

We based your child support on your share of the combined monthly net income of \$ _____. (You can find this amount on line 4 of the enclosed *Washington State Child Support Schedule* work sheet.) We based your share of the combined monthly net income on:

1. Your actual known net income.
2. Imputed (estimated) net income. We estimated your income because we have incomplete income information.
3. The Approximate Median Net Income Chart (listed in the *Washington State Child Support Schedule*). We used this chart because we do not have your current income information.
4. 0 Your employment status. We know that you are unemployed or underemployed because you are complying with a family reunification plan. Therefore, we did not impute income to you.

NOTE: If any of your children are in foster care and you are unemployed or underemployed because you are complying with a family reunification plan, we should not impute income to you. If this is the case and DCS marked box 2 or 3 above, contact the Support Enforcement Officer (SEO) named on page 5.

Our records show that your employer is _____

You must pay the current child support amount by the date listed on page 1. Pay this amount each month unless:

1. You and one of our representatives both sign an *Agreed Settlement* for a different amount and a different due date.
2. An administrative order sets a new amount and a different due date.
3. A state or tribal court order sets a new amount and a different due date.

Any unpaid current child support becomes a past-due debt. We will collect this debt from you.

HEALTH INSURANCE

You must provide health insurance coverage for the children listed on page 1 if both of the following are true:

1. Health insurance is available through your employer or union. (If your children are eligible for Indian Health Services, it satisfies this requirement.)
2. The premium you must pay to cover your children is not more than 25 percent of your basic child support obligation. (See line 7 on the enclosed *Washington State Child Support Schedule* work sheet.)

If health insurance is available through your employer or union, you must enroll the children listed on page 1 and provide us with proof of coverage within 20 days after you receive this notice.

If health insurance is not available now through your employer or union, you must provide us with proof that the insurance is not available within 20 days after you receive this notice.

If health insurance is not available now through your employer or union, it may become available later. If so, you must enroll your children and provide us proof of enrollment immediately after insurance is available.

FOSTER CARE

If your children are in foster care, you may have to pay costs associated with a family reunification plan. A court order or voluntary placement agreement may require this plan. We credit these costs against your current child support amount. If we marked the box below, you received credit. If we did not mark the box below and you pay family reunification costs, contact the Support Enforcement Officer (SEO) on page 5.

Your children are in foster care. We lowered your monthly child support payment by \$ _____.
The current support amount listed on page 1 reflects this reduction. We based this amount on your family reunification plan costs. If your family reunification plan costs end, your monthly child support payment may go back up.

You may have to pay family reunification plan costs in the future. If so, you may ask us to credit these costs against your current child support amount. If this happens, contact your SEO. Your SEO will help you request a prospective modification of your child support order. If you get your child support order modified, we will apply a credit effective the date you asked for a modification.

IF YOU AGREE WITH THE AMOUNTS STATED

You must contact the Support Enforcement Officer (SEO) named on page 5 and arrange to pay both current and past-due child support. **If you cannot pay the amounts stated in this notice in full, contact the SEO to negotiate a payment amount.** You must do so within 20 days (if we served this notice on you in Washington State) or 60 days (if we served this notice on you outside Washington State) after you receive this notice.

Within 20 days (regardless of where we served this notice on you) after you receive this notice, you must provide the name and address of your health insurance company, the policy/group number, and proof that the policy covers the children listed in this notice. If health insurance is not now available through your employer or union, you must provide proof that insurance is not available.

IF YOU DISAGREE WITH THE AMOUNTS STATED

You can try to settle disputes with us or negotiate a payment amount for past-due child support without an adjudicative proceeding (hearing). You may do this by meeting with the Support Enforcement Officer (SEO) handling your case. Active negotiations with the SEO suspend the 20 days (if we served this notice on you in Washington State) or 60 days (if we served this notice on you outside Washington State) you have to ask for a hearing. The 20 or 60 days you have to ask for a hearing begin again on the day negotiations with the SEO end.

If you cannot or do not want to try to settle your dispute with the SEO, you may ask for a hearing. If you want a hearing, you must file a written objection. **If you do nothing, the child support and health insurance obligations become final.**

You have 20 days (if we served this notice on you in Washington State) or 60 days (if we served this notice on you outside Washington State) after you receive this notice to ask for a hearing.

Unless the custodial parent named in this notice now receives a public assistance grant for the children named on page 1, the following applies to your case:

1. The custodial parent is a party to this notice.
2. DCS may not accept a settlement for an amount less than the amount proposed in this notice without the custodial parent's approval.
3. If you object to this notice, the custodial parent may participate in resulting negotiations and hearings.

If you want a hearing, complete and return the following forms to our field office listed on page 5. (Include your most recent pay statement and your last two federal income tax returns.)

1. The *Washington State Child Support Schedule* work sheet.
2. The *Objection/Request for Adjudicative Proceeding*, DSHS 09-277.
3. The *Statement of Resources and Expenses*, DSHS 18-097.

You may ask for a late hearing. However, we will enforce the child support and health insurance obligations listed in this notice after the 20 or 60 days that you have to respond. We may not refund money collected from you.

You may obtain a child support order in a state or tribal court (if eligible) at any time.

1. If you file an action in a state or tribal court, you must serve notice on the Attorney General's office and the other party to your child support order. You also must tell us of your action.
2. A court action may not affect the debt owed under this notice for the periods before you file a petition for a court order.

YOUR RESPONSIBILITIES

After you receive this notice, you must:

1. Make all child support payments to the Washington State Support Registry (WSSR). We will not give you credit if you make payments to anyone else. Make all payments payable to WSSR and mail to:

WASHINGTON STATE SUPPORT REGISTRY
PO BOX 45868
OLYMPIA WA 98504-5868

2. Include your social security number and account number IN _____ on all payments and correspondence.
3. Complete and return the enclosed *Health Insurance Information*, DSHS 18-455.
4. Tell us if your address changes.
5. Tell us immediately if a court or child support agency from another state asks you to make child support payments to them.

ENFORCEMENT

We may take any of the following actions to enforce your child support and health insurance obligations.

1. Send your employer a *Notice of Payroll Deduction* or *Order to Withhold and Deliver* for up to 50 percent of your disposable earnings. (Disposable earnings are that amount left after mandatory deductions such as taxes.)
2. File liens against, seize, and sell your real estate, vehicles, or any other real or personal property.
3. Refer any past-due child support debt to the Internal Revenue Service for withholding from tax refunds.
4. Report any past-due child support to credit reporting agencies.

5. Take other withholding actions.
6. Send your employer or union a *Notice of Enrollment*. This notice requires your employer or union to enroll your children in a health insurance plan and to withhold the premium from your pay.

RCW 26.18, RCW 26.23, and RCW 74.20A permit us to take these actions even if you are not behind in your child support payments. We may take these actions without further notice to you.

We have the right to establish and enforce your child support order because:

1. Your children have received public assistance. Or,
2. You or the custodial parent requested our services. Or,
3. Your court order requires us to set your child support amount. Or,
4. Your court order does not set your child support amount.

See the enclosed *Responsible Parent's Rights and Responsibilities*, DSHS 16-107, for more information.

DISCLOSABLE INFORMATION

We have some or all of the following information:

1. The custodial parent's social security number and residence address.
2. Your dependent children's residence address.

To request any of the above information, write to our field office listed below. State the reason you want the information.

Date

Authorized Representative
DIVISION OF CHILD SUPPORT

If you have questions, contact:
DIVISION OF CHILD SUPPORT

TTY/TDD services available for the speech or hearing impaired.

No person, because of race, color, national origin, creed, religion, sex, age, or disability, shall be discriminated against in employment, services, or any aspect of the program's activities.

In reply, refer to:
Case #
