

## **NOTICE**

The Child Support Recovery Unit is beginning an action to establish support for the child(ren) named in the attached legal Notice. It is important that you read all of the attached documents very carefully to find out when and how you should respond to this legal action.

Failure to provide the requested information may result in a support obligation being set based on the information available and may not be based on actual income. If you have any questions, call the child support office listed below.

## **AVISO**

La Child Support Recovery Unit (Unidad de Recuperación de mantenimiento de niños) esta iniciando acción para establecer apoyo de dicho niño(s) cuyo nombre aparece en el Aviso Legal adjunto. Es importante que lean todo el documento adjunto con mucho cuidado para saber cuando y como se deberá responder a la acción legal.

Fallar en proporcionar la información pedida puede resultar en que una obligación de mantenimiento sea formulada basandose en la información disponible y puede no estar basada en el ingreso actual. Si se tienen preguntas al respecto, llamar la oficina de child support cuyos numeros de telefono y direccion aparecen a continuación.

## **THÔNG CÁO**

Đơn Vị Đòi Tiền Cấp Dưỡng Cho Con ( The Child Support Recovery Unit ) bắt đầu thưa kiện để xác minh cho việc cấp dưỡng cho con (các con) có tên trong bản Thông Cáo về luật pháp đính kèm. Rất là quan trọng rằng bạn đọc rất cẩn thận hết tất cả những tài liệu đính kèm để tìm ra khi nào và cách nào bạn phải trả lời về việc thưa kiện này.

Sự thiếu sót cung cấp tin tức đòi hỏi có thể đưa đến kết quả của sự bắt buộc cấp dưỡng dựa trên tin tức có thể có được và có thể không dựa trên căn bản tiền lương (lợi tức) có thật. Nếu bạn có bất cứ câu hỏi nào bạn hãy gọi văn phòng cấp dưỡng cho con liệt kê dưới đây.

Case Number: \_\_\_\_\_

**Notice of Support Debt: Foster Care  
- Chapter 252C**

**Foster Care Recovery Unit  
Iowa Department of Human Services**

Payor: \_\_\_\_\_  
Children: \_\_\_\_\_  
\_\_\_\_\_  
Date Prepared: \_\_\_\_\_

Docket No. \_\_\_\_\_  
County: \_\_\_\_\_  
CSC No. \_\_\_\_\_

**This is your legal notice that the Foster Care Recovery Unit is starting an action to establish child support and medical support for the named children. As a respondent, you have certain rights to contest and challenge this action. Be sure to read the information listed after this section for your time limits and steps for contesting.**

Iowa Code chapters 252C and 252E give Iowa the authority to establish child support and medical support.<sup>1</sup> Iowa has personal jurisdiction over you.<sup>2</sup> Entry of a support order in Iowa will not violate 28 USC section 1738B.<sup>3</sup>

Your child(ren) are currently or were previously in foster care placement. As a result of public assistance or medical assistance provided to your child(ren), we intend to establish a support order requiring you to provide support as follows:

- Child Support** We intend to create an order requiring you to pay child support for the period of time that the children are in foster care.
- Accrued Support** We intend to create an order requiring you to pay accrued support. This includes past public assistance paid out by the State of Iowa or any other state for children in foster care placement.
- Medical Support** We intend to create an order for medical support<sup>4</sup>, under Iowa Code chapter 252E.

**How is Child Support Figured?** The amount of support is based on the Child Support Guidelines under Iowa Code sections 598.21B and 252B.7A. **Please complete and return the enclosed financial statement to the office address listed in this notice within 10 days of the date of this request.**

If you do not send in your financial statement or proof of income, an order will be entered without your input. The entry of this support order does not stop us or any caretaker from seeking current, accrued, and/or medical support by any legal method, without showing a substantial change of circumstances.

**How is Medical Support Set?** Medical support is either health care coverage or cash medical support. Health care coverage includes private health insurance plans (obtained through an employer or purchased privately) and public coverage (like Title 19 or *hawk-i*). We review your financial information to determine what medical support to include in the order. There are several steps to identify the appropriate type of medical support. The requirement to include medical support in orders and the steps we use to determine the appropriate medical support are outlined in Iowa Code chapter 252E.

We look first to see if you have an available health benefit plan. You may provide a plan through a stepparent. If you do not have an available health benefit plan and you do not consent to provide a plan due to cost or accessibility, we may seek an order for you to pay cash medical support.

- You may be required to attend a parenting class.<sup>5</sup>

**Contesting this Notice** If you wish to discuss or contest this action, you may ask for a conference with the office listed below. You may ask for a court hearing even if you do not ask for a conference.

If you do not ask for a conference or a court hearing within the time limits below, a support order will be entered. Before we prepare an order, we will provide to you in person, or by mail<sup>6</sup>, a worksheet showing how we calculated the amount of support.

**Your Rights and Responsibilities** To ask for a conference, contact us *within 10 days* of service of this notice.

The conference is an informal meeting in which you may ask questions and share information about your income. What should you bring?

- A completed financial statement,
- Proof of your income, and
- Information about health benefit plans available to you and the named children. We need to know:
  - If the plans are accessible to the children;
  - The cost of available plans (prices for single, family, employee + one);
  - The people included in the plan (self, spouse, number of children).

Once we get your request, we will send you a letter with the date, time, and place of the conference. After the conference, you will get a new written notice showing the results of the conference. A *Second Notice of Support Debt and Finding of Financial Responsibility (Second Notice)*<sup>7</sup> will be issued if there are any changes. You may ask for a court hearing if you disagree with the results of the conference as stated in the Second Notice.

**Right to Request a Court Hearing** To ask for a court hearing, send us a written request. It is helpful to list why you disagree with the action and send any information that supports your reason. When we get your written request, we will ask the court to schedule a hearing. If you do not come to the hearing, the court may enter an order without your input.

You must ask for a court hearing by the latest of the following dates:

- **Within 30 days** from the date of service of this notice.
- **Within 10 days** from the date of the conference.
- **Within 30 days** from the date of issuance of the Second Notice.

**If we do not get a request for a court hearing within these time limits, we will ask the court to enter an order as stated in this notice at the amounts recommended in the guideline worksheet.** We may try to collect support through:

- Income withholding,
- Garnishment,
- Liens,
- Income tax setoff,
- Levy of accounts at financial institutions, or
- Any other way to collect allowed by law, including sanctions of licenses and passports.

**You must notify us of any change in your address, employment or medical coverage.**

**Waiver of Rights** You may give up your rights and the time limits to request a conference and court hearing. If you wish to give up these rights, contact us. You may sign the order to show that you were served with this notice and gave up your rights and time limits for requesting a conference and court hearing.

If you have any questions, visit or telephone us. You may also choose to hire an attorney at your own expense. If you do, tell your attorney about getting this notice right away.

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FCRU Worker Name  
Foster Care Recovery  
PO Box 9132  
Des Moines, IA 50306-9132

Phone: \_\_\_\_\_

Copy to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<sup>1</sup> The authority is defined in Iowa Code chapters 252C, 252E, and Iowa Code sections 232.4 and 234.39, and further defined in 28 USC 1738B, Iowa Code chapter 252K, if applicable and 441 IAC 95,98,99.

<sup>2</sup>  because notice of this child support action was personally served on the Respondent in Iowa.

because you lived in Iowa.

because you lived in Iowa with the child(ren) from approximately \_\_\_\_\_ through \_\_\_\_\_.

because you lived in Iowa from approximately \_\_\_\_\_ through \_\_\_\_\_, and provided prenatal expenses or support for the child(ren).

because you caused the child(ren) to live in Iowa through the following action(s): \_\_\_\_\_

because you had sexual intercourse in Iowa with the other parent which may have resulted in the conception of the following child(ren):

<b>Child</b>	<b>Time Period of Possible Conception</b>
_____	_____ Through _____
_____	_____ Through _____
_____	_____ Through _____
_____	_____ Through _____
_____	_____ Through _____

because you claimed to be the other parent either through the declaration of paternity registry maintained by the Iowa Department of Public Health according to Iowa Code section 144.12A, or by completing a paternity affidavit according to Iowa Code section 252A.3A.

because you have enough minimum contacts with the State of Iowa which are: \_\_\_\_\_

<sup>3</sup>  We are not aware of any separate action for dissolution of marriage or child support, affecting you and the child(ren) named herein, which has started or which is pending in Iowa or another state.

A separate action for dissolution of marriage or child support involving the Respondent and the same child(ren) has begun and the action is pending under Docket # \_\_\_\_\_ in the State of \_\_\_\_\_, \_\_\_\_\_ County. We may continue, however, because this action complies with 28 USC section 1738B or Iowa Code chapter 252K.

We know of the following support order(s) involving the Respondent as payor and the named child(ren):

<b>State</b>	<b>County</b>	<b>Docket Number</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

28 USC section 1738B and Iowa Code chapter 252K prevents us from entering a new support order that covers the same time period as an existing order for support from another state.

However, no individual contestant to the orders or the child(ren) currently live in any of the states that issued a support order. When this happens, a tribunal with jurisdiction must enter a new support order according to Iowa Code section 252K.207.  However, any order listed above is for current support which has been either suspended

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or terminated, and/or is for past support for a different time period than the support obligation established in this action. There may be arrears under the existing orders listed above, but they are not at issue in this action.

□ Neither the Respondent nor the caretaker has told us, and we are unaware of, any existing child support orders with the Respondent as payor and the named child(ren).

<sup>4</sup> Based on Iowa Code chapter 252E, you may be ordered to get health care coverage for the child(ren). It has to be available when the order is entered, or in some limited circumstances becomes available later. If there is no health care coverage available, you may be ordered to pay cash medical support. There are exceptions to providing cash medical support as listed in Iowa Code chapter 252E:

- Due to the amount of the payor's net monthly income, a minimum order amount applies under the medical support table (see the child support guidelines);
- No health benefit plan is available and there is no income subject to income withholding;
- The obligation is changing through a cost of living alteration;
- The payor receives Family Investment Plan (FIP) assistance or Title 19 or lives with a child receiving FIP, Title 19 or *hawk-i*.

<sup>5</sup> The Department of Human Services must approve this class. You must send us proof that you went to the class within 90 days after the order is entered. If you do not send proof, your support amount may be changed. After the 90 days, we may also ask you to send proof that you continue to go to class as ordered by the court.

<sup>6</sup> sent to your last known address.

<sup>7</sup> It will be given to you in person, or sent by regular mail to your last known address or your attorney's last known address.