



Request From The Payor To Suspend Support – Cover Letter

Date: _____

Case Number: _____

Enclosed is form 470-5348, *Request From the Payor to Suspend Support*.
Because the Unit is not currently enforcing your order, you must also complete
the enclosed form 470-0188, Application for Nonassistance Support Services.

Please read the *Procedures for Suspending, Satisfying and Reinstating Child Support Obligations (Comm. 240)*. This document explains the requirements to suspend an obligation, gives you information you need to complete your request and tells you about being barred from future requests for suspension.

Return the completed request to the office listed below. We will use the information you give us to determine if we can suspend the support order. If you have any questions about the suspension process or how to fill out the forms, please contact your local office at the number listed below.

Child Support Recovery Unit (CSRU)

Worker Name: _____

Telephone: _____



Request From the Payor to Suspend Support

Part 1. Necessary Party Information

Payor Information (person ordered to pay support)

| | | | | |
|-----------------------|--|--------|--------------------|------------|
| ▶ First Name | | Middle | ▶ Last | |
| ▶ Street Address | | ▶ City | | ▶ State |
| | | | | ▶ Zip Code |
| Your Telephone Number | | | Your Email Address | |

Payee Information (person entitled to receive support)

| | | | | | |
|----------------------------|--|--------|--------------------|---------|------------------|
| ▶ First Name | | Middle | ▶ Last | | Telephone Number |
| ▶ Street Address | | ▶ City | | ▶ State | ▶ Zip Code |
| ▶ Employer Name (if known) | | | ▶ Employer Address | | |

List any other adult entitled to receive support for the child now, or in the past. This includes any caretaker with whom the child is living, regardless whether the person wants our services.

| | | | | | |
|------------------|--|--------|--------|---------|------------------|
| ▶ First Name | | Middle | ▶ Last | | Telephone Number |
| ▶ Street Address | | ▶ City | | ▶ State | ▶ Zip Code |

✓ If there are other adults entitled to receive support, list them on the back of this page. Use the same format as above.

Part 2. Court Order Information *(List all orders for the same payor, payee, and children for whom you want support suspended.)*

| | | | |
|----------------------|--|--------------|----------|
| ▶ Court Order Number | | ▶ Date Filed | ▶ County |
| ▶ Court Order Number | | ▶ Date Filed | ▶ County |

- ✓ If there are more orders, list them on the back of this page. Use the same format as above.
- ✓ The Unit can only suspend support owed under certain types of Iowa orders, and the state of Iowa must have jurisdiction to suspend the order.
- ✓ **Note: All current support obligations that are for the same payor (person ordered to pay), payee (person entitled to receive support), and child must be suspended. List all of the orders to be suspended that involve the same parties.**



Part 3. Children Whose Support Should be Suspended

| | | | |
|------------------------------|-------------|--|---------------------|
| ▶ Name (first, middle, last) | ▶ Birthdate | ▶ Child currently living with (Select <u>only one</u>) <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other _____ | Date Child Moved In |
| ▶ Name (first, middle, last) | ▶ Birthdate | ▶ Child currently living with (Select <u>only one</u>) <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other _____ | Date Child Moved In |
| ▶ Name (first, middle, last) | ▶ Birthdate | ▶ Child currently living with (Select <u>only one</u>) <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other _____ | Date Child Moved In |

✓ The child must have lived with you for more than sixty days in a row.
 ✓ If there are more children, list them on the back of this page. Use the same format as above.
 ✓ If you select 'Other' for the person with whom the child lives, state the person's name and relationship to the child.

Part 4. Types of Support to be Suspended

By asking for a suspension of the orders listed in part 2, you are asking the court to end the ongoing support including:

- Child support
- Medical support (owed by either party)

NOTE: Asking for a suspension does not change the amount of past-due support. CSRU continues to enforce and collect on the unpaid balance by any means allowed by law.



Part 5. Certification Signature

By signing this, I state that the children live in the same household as the person ordered to pay support or a caretaker who does not want CSRU services, that the children have lived in that household for more than sixty consecutive days, and are expected to live there for at least six months.

I listed all orders affecting the same payor, payee, and children for whom support should be suspended. I understand that if I do not tell the Unit about additional orders, support enforcement of those orders could continue.

I read the *Procedures for Suspending, Satisfying and Reinstating Child Support Obligations (Comm. 240)*. I understand unless I meet certain limited exceptions, I will be barred from future requests for suspension for two years as described in 252B.20(1)(d) and 282B.20A(1)(f). I understand that if I have any questions about the process, I can call my local office, or consult an attorney. I understand the CSRU attorney does not represent me.

I read the information above and take full responsibility for the information I provided on this request form.

Signature of person making the request

Date

Relationship to the children

CSC case number

- ✓ You must sign your name and date the form.
- ✓ List your relationship to the children for whom you are requesting suspension.
- ✓ To ask for the suspension, you are required by law to declare by affidavit under penalty of perjury (punishment for lying) that:
 - The child is currently residing with you or a caretaker who does not want CSRU services, and has been for **more than sixty consecutive days**.
 - There is no order in effect regarding legal custody, physical care, visitation, or other parenting time for the child.
 - It is reasonably expected that the basis for suspension will continue for not less than six months.
 - The child for whom support is ordered is not receiving public assistance pursuant to chapter 239B, 249A, or a comparable law of another state or foreign country, unless you are considered to be a member of the same household as the child for the purposes of public assistance eligibility.