

CHILD SUPPORT RECOVERY UNIT
<CSRU address line 1>
<CSRU address line 2>
<CSRU city, state, ZIP>

Iowa Department of Human Services

**Notice of CSRU Services
Cover Letter**

<PAYEE/PAYOR NAME>
<PAYEE/PAYOR ADDRESS LINE 1>
< PAYEE/PAYOR ADDRESS LINE 2>
<CITY, STATE, ZIP>

Date: <Date>

Dear < Payee/Payor Name>:

Welcome to the Child Support Recovery Unit (CSRU). Your support payments have been transferred to the Collection Services Center (CSC) for processing. Please see the attached notice for more information.

If you have any questions specifically about this notice, please contact the worker listed below.

Thank you,
<CSRU Worker Name>
Child Support Recovery Unit
Phone: <CSRU phone>
FAX#: <FAX #>
