



RESULTS OF HARDSHIP REQUEST/REVIEW

Four horizontal lines for address or contact information.

Date Notice Prepared: _____
Case Number: # _____
Worker: _____

Dear _____:

The Child Support Recovery Unit (CSRU) received your request for an amendment to the income withholding amount due to hardship on _____. We reviewed your case and the information you provided. Based on our review, your request has been:

[] GRANTED. Your income provider will be notified to start withholding \$_____ per _____. This amount will stay in place until _____. If our records show on _____ that you have an income provider and are paying towards your past due support, we will send you a notice of review asking you to verify that you still qualify for an amendment of your income withholding amount.

[] DENIED because:

- [] Your gross income is over the poverty level guidelines.
[] A current support obligation is billing.
[] The amount currently being withheld is the same as the calculated hardship amount.
[] CSRU records show you do not have an income provider.
[] Your request for an amendment due to hardship was already granted on _____.
[] Your previous amendment of your income withholding amount ended because you did not send in a written request with proof of your income. You may request an amendment of your income withholding amount due to an existing hardship again on or after _____.

For questions, see contact information at the bottom of this page.

Sincerely,

Child Support Recovery Unit

Tel. _____

Fax. _____

**Policy Regarding Discrimination, Harassment,
Affirmative Action and Equal Employment Opportunity**

The Iowa Department of Human Services (DHS) policy on non-discrimination, harassment, affirmative action, and equal employment can be viewed on the DHS website at the bottom of the page at: dhs.iowa.gov.
