

Rule Summary and Fiscal Analysis (Part A)**Department of Job and Family Services**

Agency Name

Child Support

Division

Ben Anderson

Contact

30 East Broad St 31st Floor ODJFS Office of Legal Services Columbus OH 43215-3414

Agency Mailing Address (Plus Zip)

614-466-4605

Phone

614-752-8298

Fax

Benjamin.Anderson@jfs.ohio.gov

Email

5101:12-55-03.1

Rule Number

AMENDMENT

TYPE of rule filing

Rule Title/Tag Line

Identification of default and notice to obligor of default and potential action.**RULE SUMMARY**

1. Is the rule being filed consistent with the requirements of the RC 119.032 review? **Yes**

2. Are you proposing this rule as a result of recent legislation? **No**

3. Statute prescribing the procedure in accordance with the agency is required to adopt the rule: **119.03**

4. Statute(s) authorizing agency to adopt the rule: **3125.25**

5. Statute(s) the rule, as filed, amplifies or implements: **3123.021, 3123.022, 3123.03, 3123.061, 3123.07, 3123.21**

6. State the reason(s) for proposing (i.e., why are you filing,) this rule:

Five year review. Additionally to incorporate federal statutory changes under 42 U.S.C. 666 relating to the administration of the child support program.

7. If the rule is an AMENDMENT, then summarize the changes and the content

of the proposed rule; If the rule type is RESCISSION, NEW or NO CHANGE, then summarize the content of the rule:

This rule describes how at the end of each month, the support enforcement tracking system (SETS), upon identifying that an obligor appears to meet the default criteria and the case meets the automatic income withholding criteria, issues a JFS 04047, "Order/Notice to Withhold Income for Child and Spousal Support" (rev. 12/2002), to the obligor's current employer and the obligor.

The revision date of the JFS 04047, "Order/Notice to Withhold Income for Child and Spousal Support" (rev. 5/2012) has been updated.

8. If the rule incorporates a text or other material by reference and the agency claims the incorporation by reference is exempt from compliance with sections 121.71 to 121.74 of the Revised Code because the text or other material is **generally available** to persons who reasonably can be expected to be affected by the rule, provide an explanation of how the text or other material is generally available to those persons:

This rule incorporates one or more dated references to an ODJFS form or forms. Each cited ODJFS form is dated and is generally available to persons affected by this rule via the "Info Center" link on the ODJFS web site (<http://jfs.ohio.gov/>) in accordance with ORC 121.75(E).

This rule incorporates one or more references to the Ohio Revised Code (ORC). This question is not applicable to any incorporation by reference to the ORC because such reference is exempt from compliance with ORC 121.71 to 121.74 pursuant to ORC 121.76(A)(1).

9. If the rule incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material electronically, provide an explanation of why filing the text or other material electronically was infeasible:

Not applicable.

10. If the rule is being **rescinded** and incorporates a text or other material by reference, and it was **infeasible** for the agency to file the text or other material, provide an explanation of why filing the text or other material was infeasible:

Not Applicable.

11. If **revising** or **refiling** this rule, identify changes made from the previously

filed version of this rule; if none, please state so. If applicable, indicate each specific paragraph of the rule that has been modified:

The JFS 04047 and JFS 07083 forms associated with the rule change were not available for public viewing. They have now been attached to this document for public viewing and comment. Revision date of the JFS 04049 has been updated to match the most up to date version of the form.

12. 119.032 Rule Review Date: 11/1/2012

(If the rule is not exempt and you answered NO to question No. 1, provide the scheduled review date. If you answered YES to No. 1, the review date for this rule is the filing date.)

NOTE: If the rule is not exempt at the time of final filing, two dates are required: the current review date plus a date not to exceed 5 years from the effective date for Amended rules or a date not to exceed 5 years from the review date for No Change rules.

FISCAL ANALYSIS

13. Estimate the total amount by which *this proposed rule* would **increase / decrease either **revenues / expenditures** for the agency during the current biennium (in dollars): Explain the net impact of the proposed changes to the budget of your agency/department.**

This will have no impact on revenues or expenditures.

0.00

No impact on current budget.

14. Identify the appropriation (by line item etc.) that authorizes each expenditure necessitated by the proposed rule:

Not applicable.

15. Provide a summary of the estimated cost of compliance with the rule to all directly affected persons. When appropriate, please include the source for your information/estimated costs, e.g. industry, CFR, internal/agency:

No new costs.

16. Does this rule have a fiscal effect on school districts, counties, townships, or

municipal corporations? **No**

17. Does this rule deal with environmental protection or contain a component dealing with environmental protection as defined in R. C. 121.39? **No**

S.B. 2 (129th General Assembly) Questions

18. Has this rule been filed with the Common Sense Initiative Office pursuant to R.C. 121.82? **No**

19. Specific to this rule, answer the following:

A.) Does this rule require a license, permit, or any other prior authorization to engage in or operate a line of business? **No**

B.) Does this rule impose a criminal penalty, a civil penalty, or another sanction, or create a cause of action, for failure to comply with its terms? **No**

C.) Does this rule require specific expenditures or the report of information as a condition of compliance? **No**

<County_Name> County CSEA, Issuing Agency
<CSEA_Address_1>
<CSEA_Address_2>
<CSEA_City>, <CSEA_State> <CSEA_ZIP>

Telephone Number:
Toll Free Number:
Fax Number:

<CSEA_Local_Phone_No>
<CSEA_800_No>
<CSEA_Fax_No>

<TPN_Name>
<TPN_Address_1> <TPN_Suite>
<TPN_Address_2>
<TPN_City>, <TPN_State> <TPN_ZIP>
<TPN_Country>

INCOME WITHHOLDING FOR SUPPORT

[<ORG>] **ORIGINAL INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT (IWO)**
 [<AMD>] **AMENDED IWO**
 [] **LUMP SUM PAYMENT**
 [] **TERMINATION of IWO**

Date: <Print_Date>

[**X**] Child Support Enforcement (CSE) Agency [] Court [] Attorney [] Private Individual/Entity (Check One)

NOTE: This IWO must be regular on its face. Under certain circumstances you must reject this IWO and return it to the sender (see IWO instructions <http://www.acf.hhs.gov/programs/cse/newhire/employer/publication/publication.htm> - forms). If you receive this document from someone other than a State or Tribal CSE agency or a Court, a copy of the underlying order must be attached.

State/Tribe/Territory	<u>Ohio</u>	Remittance Identifier (include w/payment)	<u><Case_No></u>
City/County/Dist./Tribe	<u><County_Name></u>	Order Identifier:	<u><Order_No></u>
Private Individual/Entity		CSE Agency Case Identifier	<u><Case_No></u>

<p><u><TPN_Name></u></p> <p>Employer/Income Withholder's Name</p> <p><u><TPN_Address_1> <TPN_Suite></u></p> <p>Employer/Income Withholder's Address</p> <p><u><TPN_Address_2></u></p> <p><u><TPN_City>, <TPN_State> <TPN_ZIP></u></p> <p><u><TPN_Country></u></p> <p>Employer/Income Withholder's FEIN <u><TPN_FEIN></u></p> <p><u><Data_Entry1></u></p> <p>Bureau of Workers' Compensation Claim Number</p>	<p>RE: <u><Obligor_First_Name><Obligor_Middle_Initial><Obligor_Last_Name></u></p> <p>Employee/Obligor's Name (Last, First, Middle)</p> <p><u><Obligor_SSN></u></p> <p>Employee/Obligor's Social Security Number</p> <p><u><Obligee_First_Name><Obligee_Middle_Initial><Obligee_Last_Name></u></p> <p>Custodial Party/Obligee's Name (Last, First, Middle)</p>
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<p>Child(ren)'s Name(s) (Last, First, Middle)</p> <p><u><Child_Last_Name>, <Child_First_Name> <Child_Middle_Name></u></p> <p><u><Child_Last_Name>, <Child_First_Name> <Child_Middle_Name></u></p> <p><u><Child_Last_Name>, <Child_First_Name> <Child_Middle_Name></u></p> <p><u><Child_Last_Name>, <Child_First_Name> <Child_Middle_Name></u></p> <p><u><Child_Last_Name>, <Child_First_Name> <Child_Middle_Name></u></p> <p><u><Child_Last_Name>, <Child_First_Name> <Child_Middle_Name></u></p>	<p>Child(ren)'s Birth Date</p> <p><u><Child_DOB></u></p> <p><u><Child_DOB></u></p> <p><u><Child_DOB></u></p> <p><u><Child_DOB></u></p> <p><u><Child_DOB></u></p> <p><u><Child_DOB></u></p>
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ORDER INFORMATION: This document is based on the support or withholding order from **Ohio**. You are required by law to deduct these amounts from the employee/obligor's income until further notice. See the **Additional Information** section for specific provisions of Ohio law.

\$ <u><Current_Child_Support></u>	Per MONTH current child support
\$ <u><Past-Due_Child_Support></u>	Per MONTH past-due child support - Arrears greater than 12 weeks? [<u><GT12></u>] Yes [<u><LT12></u>] No
\$ <u><Current_Medical_Support></u>	Per MONTH current cash medical support
\$ <u><Past-Due_Medical_Support></u>	Per MONTH past-due cash medical support
\$ <u><UNEM_IW_Amount></u>	Per MONTH sub-total (for withholding from unemployment benefits ORC §3121.07)
\$ <u><Current_Spousal_Support></u>	Per MONTH current spousal support
\$ <u><Past-Due_Spousal_Support></u>	Per MONTH past-due spousal support
\$ <u><Other_Obligation(s)></u>	Per MONTH other (must specify) <u><Other_Obligation(s)_Description></u>

for a **Total Amount to Withhold** of \$ <Total_Monthly_Obligation> per **MONTH**.

AMOUNTS TO WITHHOLD: You do not have to vary your pay cycle to be in compliance with the *Order Information*. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

\$ <u><IW_Weekly_Amount></u> per weekly pay period	\$ <u><IW_SM_Amount></u> per semimonthly pay period (twice a month)
\$ <u><IW_BW_Amount></u> per biweekly pay period (every two weeks)	\$ <u><Total_Monthly_Obligation></u> per monthly pay period

\$ **Lump Sum Payment:** Do not stop any existing IWO unless you receive a termination order.

REMITTANCE INFORMATION: If the employee/obligor's principal place of employment is **Ohio**, you must begin withholding no later than the first pay period that occurs **14** days after the date of <Print_Date>. Send payment within **7** working days of the pay date. If you cannot withhold the full amount of support for any or all orders for this employee/obligor, withhold up to **50%** of disposable income for all orders. See the **Additional Information** section for specific provisions of Ohio law. If the employee/obligor's principal place of employment is not **Ohio**, obtain withholding limitations, time requirements, and any allowable employer fees at http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact_map.htm for the employee/obligor's principal place of employment.

For electronic payment requirements and centralized payment collection and disbursement facility information (State Disbursement Unit [SDU]), see http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact_map.htm.

Include the **Remittance Identifier** with the payment and if necessary this FIPS code: <CSEA FIPS Code>.

Remit payment to SDU: Ohio Child Support Payment Central (CSPC) at P.O. Box 182394, Columbus, Ohio 43218-2394. If you are an employer that employs more than 50 employees, please see the **Additional Information** section for specific provisions of Ohio law.

- ☐ **Return to Sender [Completed by Employer/Income Withholder].** Payment must be directed to an SDU in accordance with 42 USC §666(b)(5) and (b)(6) or Tribal Payee (see Payments to SDU below). If payment is not directed to an SDU/Tribal Payee or this IWO is not regular on its face, you *must* check this box and return the IWO to the sender.

Signature of Judge/Issuing Official (if required by State or Tribal law): **Not required by Ohio law**

Print Name of Judge/Issuing Official: <Primary_Worker_Name>

Title of Judge/Issuing Official: **Authorized Representative**

Date of Signature: <Print_Date>

If the employee/obligor works in a State or for a Tribe that is different from the State or Tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.

- ☐ If checked, you are required to provide a copy of this form to the employee/obligor.

ADDITIONAL INFORMATION FOR EMPLOYERS AND OTHER INCOME WITHHOLDERS

State-specific contact and withholding information can be found on the Federal Employer Services website located at:

http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/contact_map.htm

Priority: Withholding for support has priority over any other legal process under State law against the same income (USC 42 §666(b)(7)). If a Federal tax levy is in effect, please notify the sender. See the **Additional Information** section for specific provisions of Ohio law.

Combining Payments: When remitting payments to an SDU or Tribal CSE agency, you may combine withheld amounts from more than one employee/obligor's income in a single payment. You must, however, separately identify each employee/obligor's portion of the payment. See the **Additional Information** section for specific provisions of Ohio law.

Payments To SDU: Employer/income withholder must send child support payments payable by income withholding to the appropriate SDU. If this IWO instructs the employer/income withholder to send a payment to an entity other than an SDU (e.g., payable to the custodial party, court, or attorney), the employer/income withholder must check the box above and return this notice to the sender. Exception: If this IWO was sent by a Court, Attorney or Private Individual/Entity and the initial order was entered before January 1, 1994 or the order was issued by a Tribal CSE agency, the employer/income withholder must follow the payment instructions on this form.

Reporting the Pay Date: You must report the pay date when sending the payment. The pay date is the date on which the amount was withheld from the employee/obligor's wages. You must comply with the law of the State (or Tribal law if applicable) of the employee/obligor's principal place of employment regarding time periods within which you must implement the withholding and forward the support payments.

Multiple IWOs: If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to Federal, State, or Tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support. Follow the State or Tribal law/procedure of the employee/obligor's principal place of employment to determine the appropriate allocation method. See the **Additional Information** section for specific provisions of Ohio law.

Lump Sum Payments: You may be required to notify a State or Tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold. See the **Additional Information** section for specific provisions of Ohio law.

Liability: If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by State or Tribal law/procedure.

Anti-discrimination: You are subject to a fine determined under State or Tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO.

Withholding Limits: You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (CCPA) (15 U.S.C. 1673(b)); or 2) the amounts allowed by the State or Tribe of the employee/obligor's principal place of employment (see REMITTANCE INFORMATION). Disposable income is the net income left after making mandatory deductions such as: State, Federal, local taxes; Social Security taxes; statutory pension contributions and Medicare taxes. The Federal limit is 50% of the disposable income if the obligor is supporting another family and 60% of the disposable income if the obligor is not supporting another family. However, those limits increase 5% - to 55% and 65% - if the arrears are greater than 12 weeks. If permitted by the State, you may deduct a fee for administrative costs. The combined support amount and fee may not exceed the limit indicated in this section. For Tribal IWOs, you may not withhold more than the amounts allowed under the law of the issuing Tribe. For Tribal employers/income withholders who receive a State IWO, you may not withhold more than the lesser of the limit set by the law of the jurisdiction in which the employer/income withholder is located or the maximum amount permitted under section 303(d) of the CCPA (15 U.S.C. 1673 (b)). Depending upon applicable State law, you may need to also consider the amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.

Arrears greater than 12 weeks? If the *Order Information* does not indicate that the arrears are greater than 12 weeks, then the Employer should calculate the CCPA limit using the lower percentage.

OMB Expiration Date – 05/31/2014. The OMB Expiration Date has no bearing on the termination date of the IWO; it identifies the version of the form currently in use.

Additional Information:

ORDER INFORMATION: In accordance with Ohio Revised Code (ORC) section 3121.03, you are required to: Implement the withholding no later than the first pay period that occurs after 14 business days following the date the notice was mailed, and are required to continue the withholding at the intervals specified in the notice until further notice from the court or child support enforcement agency (CSEA); and send the amount withheld immediately but not later than 7 business days after the date the obligor is paid. Withholding under this order is binding until further notice from the court or CSEA.

PRIORITY: In accordance with ORC section 3121.034, except for deductions from lump sum payments made in accordance with section 3121.0311 of the Revised Code, withholding in accordance with this notice has priority over any other legal process under the law of this state against the same income.

WITHHOLDING LIMITS: In accordance with section 3121.037, you may not withhold an amount for support and other purposes, including the fee described below, that exceeds the maximum amounts permitted under section 303(b) of the "Consumer Credit Protection Act," 1673(b).

EMPLOYEE/OBLIGOR WITH MULTIPLE SUPPORT WITHHOLDINGS: In accordance with ORC section 3121.034, when two or more withholding notices are received by a payor, the payor shall comply with all of the requirements contained in the notices to the extent that the total amount withheld from the obligor's income does not exceed the maximum amount permitted under section 303(b) of the "Consumer Credit Protection Act," 1673(b), withhold amounts in accordance with the allocation set forth below, notify each court or CSEA that issued one of the notices of the allocation, and give priority to amounts designated in each notice as current support in the following manner:

- If the total of the amounts designated in the notices as current support exceeds the amount available for withholding under section 303(b) of the "Consumer Credit Protection Act," 1673(b), the payor shall allocate to each notice an amount for current support equal to the amount designated in that notice as current support multiplied by a fraction in which the numerator is the amount of income available for withholding and the denominator is the total amount designated in all of the notices as current support.
- If the total of the amounts designated in the notices as current support does not exceed the amount available for withholding under section 303(b) of the "Consumer Credit Protection Act," 1673(b), the payor shall pay all of the amounts designated as current support in the notices and shall allocate to each notice an amount for past-due support equal to the amount designated in that notice as past-due support multiplied by a fraction in which the numerator is the amount of income remaining available for withholding after the payment of current support and the denominator is the total amount designated in all of the notices as past-due support.

EMPLOYERS WITH 50 OR MORE EMPLOYEES: In accordance with ORC section 3121.19, if you are an employer that employs more than 50 employees, you are required to submit withholding amounts to the state via electronic transfer and combine all of the payments to be forwarded in one payment. The payment shall clearly identify: each employee/obligor covered by the payment; each child support case number covered by the payment; and the portion of the payment attributable to each employee/obligor and case number.

COMBINING PAYMENTS: In accordance with ORC section 3121.20, a payor required to withhold a specified amount from the income of more than one obligor under a withholding notice and to forward the amounts withheld or deducted to the office of child support may combine all of the amounts to be forwarded in one payment if the payment is accompanied by a list that clearly identifies all of the following: Each obligor covered by the payment; each child support case, numbered as provided on the withholding or deduction notice, that is covered by the payment; and the portion of the payment attributable to each obligor and each case number.

LUMP SUM PAYMENTS: In accordance with ORC section 3121.037, no later than the earlier of 45 days before a lump sum payment is to be made or, if the obligor's right to the lump sum payment is determined less than 45 days before it is to be made, the date on which that determination is made, the payor notify the child support enforcement agency administering the support order of any lump sum payment of any kind of \$150 or more that is to be paid to the obligor, hold each lump sum payment of \$150 or more for 30 days after the date on which it would otherwise be paid to the obligor and, on order of the court or agency that issued the support order, pay all or a specified amount of the lump sum payment to the office of child support.

NOTIFICATION OF TERMINATION OF EMPLOYMENT: In accordance with ORC section 3121.037, you must promptly notify the CSEA administering the support order, in writing, within 10 business days after the date of any situation that occurs in which the payor ceases to pay income to the obligor in an amount sufficient to comply with the order, including termination of employment, layoff of the obligor from employment, any leave of absence of the obligor from employment without pay, termination of workers' compensation benefits, or termination of any pension, annuity, allowance, or retirement benefit. Include with the notification:

- The obligor's last known address and telephone number; the obligor's date of birth, social security number, and case number; if known, the name, telephone number, and business address of any new employer or income source.
- Identify any types of benefits other than personal earnings the obligor is receiving or is eligible to receive as a benefit of employment or as a result of the obligor's termination of employment, including, but not limited to, unemployment compensation, workers' compensation benefits, severance pay, sick leave, lump sum payments of retirement benefits or contributions, and bonuses or profit-sharing payments or distributions, and the amount of the benefits.

FEF: In accordance with ORC section 3121.18, a payor ordered to withhold a specified amount from the income of an employee under a withholding notice may deduct from the income of the person, in addition to the amount withheld for purposes of support, a fee of the greater of \$2 or an amount not exceeding 1% of the amount withheld as a charge for its services in complying with the withholding notice.

EFT: For EFT/EDI instructions, contact CSPC at 1-888-965-2676 or go to:

http://jfs.ohio.gov/OCS/employers/CSPC_Overview.stm#Employers

Employer's Name: <TPN_Name> Employer FEIN: <TPN_FEIN>
Employee/Obligor's Name: <Obligor_First_Name> <Obligor_Middle_Initial> <Obligor_Last_Name>
Case Identifier: <Case_No> Order Identifier: <Order_No>

NOTIFICATION OF EMPLOYMENT TERMINATION OR INCOME STATUS: See the **Additional Information** section for specific provisions of Ohio law. If this employee/obligor never worked for you or you are no longer withholding income for this employee/obligor, an employer must promptly notify the CSE agency and/or the sender by returning this form to the address listed in the Contact Information:

- ☐ This person has never worked for this employer or received periodic income.
☐ This person no longer works for this employer or receives periodic income.

Please provide the following information for the employee/obligor:

Termination date: _____ Last known phone number: _____

Date of birth: _____ Social Security number: _____

Last known address: _____

Final payment date to SDU/Tribal Payee: _____ Final payment amount: _____

New employer/income source's name (if known): _____

New employer/income source's telephone number (if known): _____

New employer/income source's address: _____

CONTACT INFORMATION

To employer: If the employer/income withholder has any questions, contact <Primary Worker Name> by phone at <CSEA 800 No>, by fax at <CSEA Fax No>, by email or website at: _____

Send termination notice and other correspondence to: **<County_Name> County CSEA, <CSEA_Address_1>, <CSEA_Address_2>, <CSEA_City>, <CSEA_State> <CSEA_ZIP>**

To employee/obligor: If the employee/obligor has questions, contact <Primary Worker Name> by phone at <CSEA 800 No>, by fax <CSEA Fax No>, by email or website at _____

IMPORTANT: The person completing this form is advised that the information may be shared with the employee/obligor.

<County Name> County CSEA
 <CSEA Address 1>
 <CSEA Address 2>
 <CSEA City, State, ZIP>

Telephone Number: <CSEA Local phone #>
 Toll Free Number: <CSEA 800 #>

<Addressee Name>
 <Address 1>
 <Address 2>
 <City, State, and Zip>

**NOTICE TO OBLIGOR
 OF DEFAULT AND POTENTIAL ACTION
 (Revised Code 3123.03 through 3123.062)**

Obligor:	<obligor's first and last names>	Date:	<print date>
SSN:	<obligor's SSN>	Order Number:	<order #>
Obligee:	<obligee's first and last names>	Case Number:	<case number>

PURPOSE OF THIS NOTICE

As determined by the court or <County Name> County Child Support Enforcement Agency (CSEA), you are in default of your support order. According to Section 3121.01 of the Ohio Revised Code (ORC), default is failure to pay an amount equal to or greater than one month's support. You will remain in default until your arrearage balance equals zero. As of <print date>, the total amount of arrearage you owe is <total arrearage>. Arrearage is the total of your unpaid support.

If you are currently in an active bankruptcy, the CSEA will continue to take appropriate enforcement actions as authorized by 11 U.S.C. section 362; this notice serves as a statement of your account and is not a demand for payment.

IF YOU OWE CURRENT SUPPORT AND YOU FAIL TO PAY YOUR OBLIGATION IN FULL AND ON TIME, ANY ARREARAGE ACCRUING DUE TO PAYMENTS MISSED AFTER THE DATE OF THIS NOTICE WILL BE ADDED TO YOUR ARREARAGE AND WILL BE SUBJECT TO COLLECTION WITHOUT FURTHER NOTICE.

In accordance with ORC 3123.021, upon a determination of default, the CSEA is required to immediately issue an income withholding or deduction notice that includes a payment on arrearages. If a payment on arrearage does not already exist, one will be added to your order. Pursuant to ORC 3123.21 the arrearage payment collected with each payment of current support shall equal at least twenty percent (20%) of the current support payment unless determined otherwise at an administrative or court hearing.

Collection will be as follows:

\$<monthly child support obligation>	per month for child support
\$<monthly spousal support obligation>	per month for spousal support
\$<monthly medical support obligation>	per month for medical support
\$<monthly other obligations>	per month for other support obligations
\$<monthly arrears re-payment>	per month for arrearages
\$<monthly processing charge>	per month for processing charges

For a Total of \$<total amount> per month

Withholding may be imposed against income, including but not limited to, personal earnings, workers' compensation benefits, unemployment benefits, pensions, government benefits, insurance proceeds, lottery prize awards, lump sum payments and any other payments in money. A withholding or deduction notice will apply to all current and subsequent payors and financial institutions and will not be discontinued solely because the obligor pays any arrearage.

The court or CSEA may issue one or more notices requiring withholding or deduction of wages or assets of the obligor, or one or more administrative or court orders imposing other appropriate enforcement actions. The withholding or deduction notices issued under Chapter 3121 of the ORC, as well as the additional enforcement actions under Section 3123.22 of the Revised Code, are enforceable by the court.

PURSUANT TO SECTION 3123.22 OF THE OHIO REVISED CODE, PARTIAL PAYMENT ON THE TOTAL ARREARAGE DOES NOT PREVENT THE CSEA FROM TAKING ADDITIONAL ENFORCEMENT ACTIONS TO COLLECT ALL THE ARREARAGE. THESE ACTIONS, UPON EXHAUSTION OF ALL RIGHTS TO CONTEST THIS NOTICE, INCLUDE, BUT ARE NOT LIMITED TO:

Reporting your arrearage amount to a credit-reporting agency. This may affect your credit rating;

Imposing a lien on your real and personal property;

Referring your support case to a collection agency;

Restricting and withdrawing money from any account held by you at any financial institution (e.g. checking accounts, savings accounts, etc.);

Proposing suspension of any professional license you hold. This enforcement method can also be used if you fail to comply with a warrant or subpoena issued by the court or CSEA with respect to a proceeding to enforce a child support order;

Suspending your driver's license or restricting the renewal of your driver's license by the Bureau of Motor Vehicles. This enforcement method can also be used if you fail to comply with a warrant or subpoena issued by the court or CSEA with respect to a proceeding to enforce a child support order;

Suspending your recreational license (e.g., hunting, fishing, trapping, etc.) or restricting access to a recreational license. This enforcement method can also be used if you fail to comply with a warrant or subpoena issued by the court or CSEA with respect to a proceeding to enforce a child support order.

YOUR RIGHT TO AN ADMINISTRATIVE HEARING

You, the obligor, have the right to contest the determination of default through an Administrative Mistake of Fact Hearing. Mistake of Fact means an error in the amount of current or overdue support or in the identity of the obligor.

You may also dispute the new arrearage payment. If disputing the new arrearage payment, you must provide evidence at the hearing that household expenditures, income variables, extraordinary health care issues or other reasons exist for a deviation from the new arrearage payment.

You can request an administrative hearing no later than seven (7) business days after the date of this notice to determine if a mistake of fact was made in this notice or to dispute the arrearage payment proposed by this notice. The last page of this form is used to request an administrative hearing.

ADMINISTRATIVE HEARING

If you request a hearing regarding this notice, the CSEA shall conduct an administrative hearing no later than ten (10) days after the CSEA receives your request. The CSEA will send you and the obligee written notice of the date, time, place, and purpose of the hearing at least five (5) days before the administrative hearing is conducted. The notice will also indicate that you may present testimony and evidence at the hearing. After the hearing, the CSEA will issue the administrative determination.

COURT HEARING

After the CSEA issues the administrative determination, you can file a written motion for a court hearing to determine whether a mistake of fact still exists in the administrative determination. You must file the motion no later than seven (7) business days after the date of the CSEA determination.

To determine if a mistake of fact still exists in the administrative determination, the court will hold a hearing on the request as soon as possible, but no later than ten (10) days after the request is filed. If you request a court hearing, no later than five (5) days before the date on which the court hearing is to be held, the court will send you and the obligee written notice by ordinary mail of the date, time, place, and purpose of the court hearing. The hearing will be limited to the matters addressed in the administrative determination. Upon the conclusion of the hearing, the court shall make its determination. The determination is final and enforceable.

REQUEST FOR AN ADMINISTRATIVE MISTAKE OF FACT HEARING

I am requesting that the Child Support Enforcement Agency (CSEA) conduct an Administrative Mistake of Fact Hearing.

Your Name	Order Number
Address	CSEA Case Number
Phone Number	Name of Obligee

Reason for Hearing:

- ☐ There is an error in the amount of current support or arrearage listed on this notice.
- ☐ I am not the obligor on this support case.
- ☐ I am disputing the new arrearage payment. I will provide evidence at the hearing that household expenditures, income variables, extraordinary health care issues, and/or other reasons exist for a deviation from the new arrearage payment.

Your Signature

Date Mailed

This document must be received by the CSEA within seven business days of <print date>. If your request is not received within the seven (7) business days, your request will be denied.

Return this document to:

<County Name> County CSEA
<CSEA Address 1>
<CSEA Address 2>
<CSEA City, State, ZIP>

000033

ACTION: Refiled

DATE: 01/07/2013 1:39 PM

JFS 07083 (Rev. 12/2002)

PICKAWAY COUNTY CSEA
P O BOX 191

CIRCLEVILLE OH 43113-0191

(614) 474-5437
1-448-448-6448

NATE FARMER
360 WATER ST

ADA OH 12345-0000

Date: January 16, 2002
Case Number: 6000000015

NOTICE TO OBLIGOR REGARDING DEFAULT AND 20% PAYMENT ON ARREARS

Obligor's Name: NATE FARMER
Obligor's SSN: 360-11-1111

Obligee's Name: MARY FARMER
Order Number: 00AD360

WHY YOU WERE GIVEN THIS NOTICE

The Pickaway County CSEA has identified that you are in default of the current support order. The CSEA's records indicate that you owe \$2,891.63 as of 12/31/2001. Pursuant to 45CFR303.100, the CSEA is required to immediately issue an income withholding order that includes payment on the arrears. The monthly support obligation in this case did not contain an ordered payment on arrears and so, in accordance with ORC 3123.21, the CSEA has included in the income withholding order a payment of 20% of the current support as payment on arrears.

Please note that the arrears identified in this notice only include child and/or spousal support arrears. There may be other arrears (such as medical, genetic testing reimbursement, school fees, etc.) which are also owed by you but are not addressed in this notice. The other arrears are still owed.

A withholding or deduction of an amount from income or assets applies to all of your current and subsequent payors and financial institutions in which you have an account. Any withholding or deduction requirement and related notice described in ORC 3121.03 or any court order described in ORC sections 3121.03, 3121.04, 3121.08, and 3121.12 that is issued will not be discontinued solely because you pay any arrearages.

NOTICE OF WITHHOLDING

An Income/Financial Withholding has been issued in the amount of \$495.71. This amount represents the following ordered payments:

\$404.99	Current Support.
\$81.00	Additional 20% of Current Support if there is not an order for Past Due Support payments.
\$0.00	Medical Support.
\$9.72	Other. (This amount can include processing charges, fees for genetic test reimbursement, payments for court costs, filing fees, attorney fees, etc. Please review your support orders for details.)

YOUR RIGHT TO AN ADMINISTRATIVE HEARING

You are entitled to request an administrative hearing no later than 7 days after the date of this notice to determine if a mistake of fact was made in the notice. "Mistake of Fact" means an error in the amount of current or overdue support or in the identity of the alleged obligor. You can also provide evidence at this hearing that household expenditures, income variables, extraordinary health care issues and other reasons exist for a deviation from the 20% arrearage payment. The next page of this form is used to request an administrative hearing. The contents of this notice are final and enforceable by a court, but you may file a request for administrative hearing as indicated earlier in this paragraph.

As a result of being in default, a second form, the Advance Notice to Obligor of Default and Potential Action (JFS 04049), will be or may have already been issued to you which explains the possible enforcement techniques that can be used to enforce the support order that are in addition to income withholding. The Advance Notice to Obligor of Default and Potential Action also contains language regarding your right to request a Mistake of Fact Hearing. You may request a Mistake of Fact Hearing based on the Advance Notice to Obligor of Default and Potential Action and/or on this Notice. Please note that the amount of back support owed may be different on the two notices because each notice will specify the back support as of the date the individual notice was printed.

ADMINISTRATIVE HEARING

If you request an administrative hearing regarding this notice, the child support enforcement agency (CSEA) shall conduct an administrative hearing no later than 10 days after the date on which you file the request for the hearing. If we receive a request for an administrative hearing within seven (7) days of the mailing date of this notice and a second request for an administrative hearing within seven (7) days of the mailing date of the JFS 04049 (Advanced Notice to Obligor of Default and Potential Action), the issues will be combined and addressed in a single hearing.

The agency will send you and the obligee written notice of the date, time, place, and purpose of the hearing at least 5 days before it is conducted. The notice to you and the obligee also will indicate that you may present testimony and evidence at the hearing only in regard to the issue of whether a mistake of fact was made in the advance notice.

At the hearing, the CSEA shall determine whether a mistake of fact was made in the Notice. If it determines that a mistake of fact was made, the CSEA shall determine the provisions that should be changed and shall send its determination to you and the obligee.

COURT HEARING

If you detect a mistake of fact in the Administrative Hearing determination, you are entitled to file a written motion for a court hearing to determine whether a mistake of fact still exists no later than 7 days after the date of the Administrative Hearing determination.

To determine if a mistake of fact still exists in the Addendum to Withholding Notice or the Administrative Hearing determination, the court will hold a hearing on the request as soon as possible, but no later than 10 days after the request is filed. If you request a court hearing, no later than 5 days before the date on which the court hearing is to be held, the court will send you and the obligee written notice by ordinary mail of the date, time, place, and purpose of the court hearing. The hearing will be limited to a determination of whether there is a mistake of fact in the advance notice or the corrected advance notice.

If, at a hearing, the court determines a mistake of fact in the Addendum to Withholding Notice or the Administrative Hearing determination, the court will notify the CSEA to correct the notice.

REQUEST FOR AN ADMINISTRATIVE MISTAKE OF FACT HEARING

☐ I am requesting that the CSEA conduct an Administrative Mistake of Fact Hearing as I believe there is an error in the amount of current or overdue support or in the identity of the obligor or as I am requesting a deviation from the 20% arrearage payment.

Obligor_____
Obligee_____
Order Number_____
CSEA Case Number_____
Your Signature_____
Date Mailed_____
Your Address

This document must be received by the CSEA within 7 days of the mailing date on the first page.

Return this document to:

PICKAWAY COUNTY CSEA
P O BOX 191
CIRCLEVILLE OH 43113-0191

000033

JFS 07083 (Rev. 12/2002)
Case Number: 6000000015



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