

Income Withholding For Support Cover Letter

42 U.S.C. 666(b), RCW 26.23.060, and RCW 74.20A.080

TO: 001234567891011

DEPT. OF SERVICES FOR THE BLIND
3411 S ALASKA ST
SEATTLE WA 98118

DATE: January 2, 2015
RE: Emmett Smith
AKA:
AKA:
SSN: 123-45-6789
ACCOUNT NUMBER: **IN** 1234567
CASE NUMBER: 123456

The Division of Child Support (DCS) is collecting child support for the noncustodial parent (parent) named above. The enclosed order/notice: **Is a new order/notice.** **Amends (changes) a previously serviced order/notice.**
 Terminates (stops) withholding. **Is a one-time lump-sum payment request.**

If you are located outside Washington State and the requirements listed in the letter conflict with the laws of the state where the parent works, follow the laws of the state where the parent works.

DCS summarized your responsibilities below. See pages 2 and 3 for more details. If you employ or otherwise pay the parent for personal or contracted services, you must comply with the items marked below.

Immediately begin withholding \$ 50.00 per month from all of the parent's disposable earnings. See page 2 for information about disposable earnings.

- Do not withhold more than 50 percent of the parent's disposable earnings in any pay period.
- If you do not pay the parent on a monthly basis, see the enclosed order/notice for alternative withholding methods.
- Include the parent's case number and account number (listed above) on all payments and correspondence.
- Send all support payments to DCS by one of the following methods **within seven days** of withholding.
 - On line at: www.dconline.dshs.wa.gov
 - Electronic Funds Transfer/Electronic Data Interchange (EFT/EDI).
 - You can find formatting information at www.dshs.wa.gov/pdf/esa/dcs/UserGuide.pdf.
 - Remit EFT/EDI payments to Bank Routing number 125000105, checking account number 123456789.
 - For more information about EFT payments, call 800-468-7422.
 - Mail to: WASHINGTON STATE SUPPORT REGISTRY
PO BOX 45868
OLYMPIA WA 98504-5868

Enroll the parent's children in a medical insurance program, if available. See the enclosed **National Medical Support Notice** for details and requirement.