

INCOME WITHHOLDING NOTICE FOR SUPPORT

**ORIGINAL INCOME WITHHOLDING NOTICE FOR SUPPORT
AMENDED INCOME WITHHOLDING NOTICE FOR SUPPORT
ONE-TIME NOTICE - LUMP SUM PAYMENT
TERMINATION OF INCOME WITHHOLDING NOTICE FOR SUPPORT**

Date Notice Delivered: _____

Child Support Enforcement (CSE) Agency	Court	Attorney	Private Individual/Entity	(Check One)
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NOTE: If you receive this document from someone other than a State or Tribal Child Support Enforcement agency or a court, a copy of the underlying order that contains a provision authorizing income withholding must be attached. Or if under [State law](#) an attorney in that State, or if under Tribal law a Tribal legal representative, may issue an Income Withholding Notice, the attorney or Tribal legal representative must include a copy of the State or Tribal law authorizing the attorney or Tribal legal representative to issue an Income Withholding Notice.***

State/Tribe/Territory _____ IV-D Case Identifier _____
 City/County/Dist./Tribe _____ Order Identifier _____
 Private Individual/Entity _____ Judge Identifier _____

Employer/Payor Withholder's Name	RE:	Employee/Obligor's Name (Last, First, MI)
Employer/Payor Withholder's Address		Employee/Obligor's Social Security Number (if known)
Employer/Payor Withholder's Tel: & Fax:		Custodial Party/Obligee's Name (Last, First, MI)
Employer/Payor Withholder's Email:		
Employer/Income Withholder's Federal EIN		
Child's Name (Last, First, MI)	Child's Birth Date	
_____	_____	
_____	_____	
_____	_____	

NOTICE INFORMATION: This is a Notice to Withhold Income For Support based upon an Order for Support, entered by the Honorable Judge _____ Circuit Court of _____ County, IL, on _____. By law, you are required to deduct the following amounts from the above named employee's/obligor's income until _____, even if this Notice is not issued by your State. [See Uniform Interstate Family Support Act.](#)

- \$ _____ per _____ current child support
- \$ _____ per _____ past-due child support of \$ _____ Arrears greater than 12 weeks? Yes
- \$ _____ per _____ current cash medical support
- \$ _____ per _____ past-due cash medical support
- \$ _____ per _____ current spousal support
- \$ _____ per _____ past-due spousal support
- \$ _____ per _____ day care expenses as ordered
- \$ _____ per _____ for child support Delinquency of \$ _____ pursuant to [750 ILCS 28/ 20\(a\)\(2\)](#)
- \$ _____ per _____ for post majority enforcement of \$ _____ pursuant to [750 ILCS 28/32](#)

Total \$ _____ per _____ to be forwarded to the payee below.

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

- \$ _____ per weekly pay period
- \$ _____ per semimonthly pay period (weekly times 2.1665)
- \$ _____ per biweekly pay period (weekly times 2)
- \$ _____ per monthly pay period (weekly times 4.333)
- \$ _____ **ONE-TIME 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 within the State of Illinois you must begin withholding no later than the first pay period that occurs 14 days after this document is received. You must send payment within 7 business days after the date the amount would (but for the duty to withhold income) have been paid or credited to the obligor. If the employee/obligor's principal place of employment is not the State of Illinois you must comply with guidelines pursuant to your state law.

State information can be seen at http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/iw_matrix.htm

PAYMENT INFORMATION: Each payment must be accompanied with the following information

FIPS code: _____
Case Number: _____
Name of Employee: _____
Pay period and payment date payment withheld pursuant to [750 ILCS 28/35](#): _____

For EFT/EDI instructions contact Illinois State Disbursement Unit <http://www.ilsdu.com/employerresources.asp>

If paying by check:

Make check payable to: [Illinois State Disbursement Unit.](#)
Send check to: [Illinois State Disbursement Unit, P.O. Box 5400, Carol Stream, IL., 60197-5400.](#)

Signature and Date (if required by State or Tribal law): _____
Printed Name of Sender:
Title of Issuing Official:

If checked, you are required to provide a copy of this form to the employee/obligor. If the employee/obligor works in a State or for a Tribe that is different from the State or Tribe that issued in this Notice, a copy this Notice must be provided to the employee/obligor even if the box is not checked.

ADDITIONAL INFORMATION FOR EMPLOYERS AND OTHER INCOME WITHHOLDERS

State-specific information may be viewed on the OCSE Employer Services website located at:
http://www.acf.hhs.gov/programs/cse/newhire/employer/contacts/iw_matrix.htm

NOTIFICATION OF TERMINATION OF EMPLOYMENT or INCOME: Pursuant to [750 ILCS 20/35\(b\)](#) you must promptly return a copy of this Notice to the person or state agency who issued this Notice if:

This person has never worked for this employer.
This person no longer works for this employer.
This person no longer is receiving income from this employer or an employer's agent

Please provide the following information for the terminated employee:

Termination date: _____ Last known phone number: _____
Last known home address: _____

Date final payment made to the State Disbursement Unit or Tribal CSE agency: _____

Final payment amount: _____ Final Pay Period: _____

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 with respect to the time periods within which you must implement the withholding and forward the support payments. See Illinois Statute [750 ILCS 28/35](#)

Employee/Obligor with Multiple Support Withholdings: If there is more than one Order/Notice against this employee/obligor and you are unable to fully honor all support Orders/Notices due to federal, State, or Tribal withholding limits, you must follow the State or Tribal law/procedure of the employee/obligor's principal place of employment. You must honor all Orders/Notices to the greatest extent possible, giving priority to current support before payment of any past-due support. See Illinois Statute [750 ILCS 28/35](#)

Liability: If you have any doubts about the validity of this Notice, contact the agency or person listed below. If you fail to withhold income as this Notice directs, you are liable for both the accumulated amount you should have withheld from the employee's/obligor's income and any other penalties set by State law. You may be found liable for the total amount which you fail to withhold or pay over and the fines up to \$100.00 per day for each date after the 7 day grace period. See Illinois Statute [750 ILCS 28/50](#) and [750 ILCS 28/35](#), as follows in part:

750 ILCS 28/50 Sec. 50. Penalties.

(a) Where a payor wilfully fails to withhold or pay over income pursuant to a properly served income withholding notice, or wilfully discharges, disciplines, refuses to hire or otherwise penalizes an obligor as prohibited by Section 40, or otherwise fails to comply with any duties imposed by this Act, the obligee, public office or obligor, as appropriate, may file a complaint with the court against the payor. The Clerk of the Circuit Court shall notify the obligee or public office, as appropriate, and the obligor and payor of the time and place of the hearing on the complaint. The court shall resolve any factual dispute including, but not limited to, a denial that the payor is paying or has paid income to the obligor. Upon a finding in favor of the complaining party, the court:

(1) shall enter judgment and direct the enforcement thereof for the total amount that the payor wilfully failed to withhold or pay over; and (2) may order employment or reinstatement of or restitution to the obligor, or both, where the obligor has been discharged, disciplined, denied employment or otherwise penalized by the payor and may impose a fine upon the payor not to exceed \$200.

(b) Any obligee, public office or obligor who wilfully initiates a false proceeding under this Act or who wilfully fails to comply with the requirements of this Act shall be punished as in cases of contempt of court.

(c) Any officer or employee of any payor subject to the provisions of this Act who has the control, supervision, or responsibility for withholding and paying over income pursuant to an income withholding notice properly served on the payor and who wilfully fails to withhold or pay over income as required under the income withholding notice shall be personally liable for a penalty equal to the total amount that was not withheld or paid over by the payor. Only where the employer has incurred sums due under this Section and is unable to pay such amounts may personal liability attach to a responsible officer or employee who has wilfully failed to withhold and pay over income as required under the income withholding notice. The personal liability imposed by this subsection shall survive the dissolution of a partnership, limited liability company, or corporation. For the purposes of this subsection, "officer or employee of any payor" includes a partner of a partnership, a manager or member of a limited liability corporation, and a member of a registered limited liability partnership.

750 ILCS 28/35 Sec. 35. Duties of payor.

It shall be the duty of any payor who has been served with an income withholding notice to deduct and pay over income as provided in this Section. The payor shall deduct the amount designated in the income withholding notice, as supplemented by any notice provided pursuant to subsection (f) of Section 45, beginning no later than the next payment of income which is payable or creditable to the obligor that occurs 14 days following the date the income withholding notice was mailed, sent by facsimile or other electronic means, or placed for personal delivery to or service on the payor. The payor may combine all amounts withheld for the benefit of an obligee or public office into a single payment and transmit the payment with a listing of obligors from whom withholding has been effected. The payor shall pay the amount withheld to the State Disbursement Unit within 7 business days after the date the amount would (but for the duty to withhold income) have been paid or credited to the obligor. If the payor knowingly fails to withhold the amount designated in the income withholding notice or to pay any amount withheld to the State Disbursement Unit within 7 business days after the date the amount would have been paid or credited to the obligor, then the payor shall pay a penalty of \$100 for each day that the amount designated in the income withholding notice (whether or not withheld by the payor) is not paid to the State Disbursement Unit after the period of 7 business days has expired. The failure of a payor, on more than one occasion, to pay amounts withheld to the State Disbursement Unit within 7 business days after the date the amount would have been paid or credited to the obligor creates a presumption that the payor knowingly failed to pay over the amounts. This penalty may be collected in a civil action which may be brought against the payor in favor of the obligee or public office.

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. 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, that 50% limit is increased to 55% and that 60% limit is increased to 65% if the arrears are greater than 12 weeks. If permitted by the State, you may deduct a fee for administrative costs. The support amount and the fee may not exceed the limit indicated in this section. See Illinois Statute [750 ILCS 28/40](#) and Federal Consumer Credit Protection Act, 15 USC 1673(b).

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

For Tribal orders, you may not withhold more than the amounts allowed under the law of the issuing Tribe. For Tribal employers who receive a State order, you may not withhold more than the lesser of the limit set by the law of the jurisdiction in which the employer 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 take into consideration the amounts paid for health care premiums in determining disposable income and applying appropriate withholding limits.

Payment past termination date: You are required to withhold the amount listed for current support in addition to the arrearage and delinquency payment beyond the termination date if the listed arrearage or delinquency has not been satisfied in full. See State law [750 ILCS 5/505\(g\)\(5\)](#), as follows in part:

(g)(5) If there is an unpaid arrearage or delinquency (as those terms are defined in the Income Withholding for Support Act) equal to at least one month's support obligation on the termination date stated in the order for support or, if there is no termination date stated in the order, on the date the child attains the age of majority or is otherwise emancipated, the periodic amount required to be paid for current support of that child immediately prior to that date shall automatically continue to be an obligation, not as current support but as periodic payment toward satisfaction of the unpaid arrearage or delinquency. That periodic payment shall be in addition to any periodic payment previously required for satisfaction of the arrearage or delinquency.

Lump Sum Payments: You may be required to report and withhold from lump sum payments such as bonuses, commissions, or severance pay. Contact the agency or person listed below to determine if you are required to withhold or if you have any questions about lump sum payments.

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 a child support withholding. See Illinois Statute [750 ILCS 28/50\(a\)](#).

Priority: Withholding for support has priority over any other legal process under State law (or Tribal law if applicable) against the same income. If a Federal tax levy is in effect, please notify the contact person listed below. See Illinois Statute [750 ILCS 28/35\(c\)](#).

Combining Payments: You may combine withheld amounts from more than one employee/obligor's income in a single payment to each agency/party requesting withholding. You must, however, separately identify the portion of the single payment that is attributable to each employee/obligor. See Illinois Statute [750 ILCS 28/35](#)

***** Illinois Law Authorizing Service of Income Withholding Notice: 750 ILCS 28/2(g)** The obligee or public office may serve the income withholding notice on the payor or its superintendent, manager, or other agent by ordinary mail or certified mail return receipt requested, by facsimile transmission or other electronic means, by personal delivery, or by any method provided by law for service of a summons. At the time of service on the payor and as notice that withholding has commenced, the obligee or public office shall serve a copy of the income withholding notice on the obligor by ordinary mail addressed to his or her last known address. A copy of the income withholding notice together with proofs of service on the payor and the obligor shall be filed with the Clerk of the Circuit Court.

CONTACT INFORMATION:

Sender/Agent

County Clerk Child Support Department

Name: _____

County: _____

Email: _____

Email: _____

Telephone: _____

Telephone: _____

Facsimile: _____

Facsimile: _____

Website: _____

Website: _____