

NOTICE OF DELINQUENCY UNDER OCGA § 19-6-32

TO: _____ DATE: _____

This is your notice under OCGA § 19-6-32 (f), that the enclosed *Income Deduction Order* shall now be enforced.

- (1) The support order was entered on _____ in the Superior Court of Clayton County, Georgia, in Civil Action Number _____. It ordered you to pay:
 Child support of \$ _____ per month, beginning on _____
 Spousal support of \$ _____ per month, beginning on _____
- (2) A total arrearage of \$ _____ has accrued between the date of _____ and the date of this *Notice*.
- (3) Fees may be imposed about which you will be notified by support enforcement if you will be required to deduct them. The interest which may be imposed is: \$ _____ to date, and will continue to accumulate at the applicable rate of _____% per year.
- (4) The total amount of income to be deducted for each month until the arrearage and all applicable fees and interest are paid in full is \$ _____, and the total amount of income to be deducted for each month thereafter is \$ _____. The amounts deducted may not be in excess of that allowed under Section 303(b) of the federal Consumer Credit Protection Act, 15 USC Section 1673(b), as amended.
- (5) A copy of this notice will be served on your payor or payors, together with a copy

of the *Income Deduction Order*. You may apply to the court to contest enforcement of the order. The application shall not affect the enforcement of the *Income Deduction Order* unless and until the court enters an order granting relief to you.

- (6) The enforcement of the *Income Deduction Order* may only be contested on the ground of mistake of fact regarding the amount of support owed pursuant to a support order, the arrearages, or the identity of the obligor.
- (7) You are required to notify me of your current address and current payors and the address of current payors. All changes shall be reported by you within seven days.
(Do not check the box below unless Child Support Enforcement is handling your case.)
- The IV-D agency is enforcing the order, so you must make these notifications to the agency (the Office of Child Support Enforcement) instead of to me.

Obligee/Recipient *(Signature)*
Name: _____
Address: _____

Telephone: _____