

MOTION AND NOTICE OF PROPOSED INCOME DEDUCTION ORDER FOR SUPPORT

Commonwealth of Virginia VA. CODE § 20-79.1

Court Case No.:

DCSE ID No.:

Juvenile and Domestic Relations District Court

ADDRESS

V.

PETITIONER

RESPONDENT

SOCIAL SECURITY NUMBER

ADDRESS

MOTION:

I request the court to enter an income deduction order which contains the following terms:

1. Proposed Income Deduction Terms:

Pay interval:

- weekly
- bi-weekly
- semi-monthly
- monthly
-

} regular pay dates

OTHER PAY INTERVAL AND REGULAR PAY DATES

SOCIAL SECURITY NUMBER

The Respondent has also been ordered to provide health care coverage for the following persons:

NAME	STATUS (check applicable box)			Payment Priority
	Dependent Child	Current Spouse	Former Spouse	
1.				<input type="checkbox"/> Support <input type="checkbox"/> Health care coverage
2.				
3.				
4.				
5.				
6.				

2. Proposed amount to be deducted each pay period:

\$ or % of disposable income, whichever is less based on court-ordered payments of \$ per with \$ total unpaid payments.

3. Reason for proposed support income deduction order:

- receipt of notice of arrearage in support payments
- facts relevant in determining the likelihood of payments in accordance with the support order
- Court has found that there is an arrearage of an amount equal to one month's support obligation
- request of the obligor
- Other:

4. EMPLOYER'S NAME

EMPLOYER'S ADDRESS

DATE

PETITIONER

NOTICE TO THE RESPONDENT/OBLIGOR: Read this entire Notice (pages one and two) carefully. This motion is made pursuant to Virginia Code § 20-79.1. If you wish to contest this Motion, written notice must be filed in the clerk's office by

FILING DEADLINE

for a hearing on

HEARING DATE

DATE

CLERK

DEPUTY CLERK

MOTION AND NOTICE OF PROPOSED INCOME DEDUCTION ORDER FOR SUPPORT

Commonwealth of Virginia VA. CODE § 20-79.1

Case No.:

DCSE ID No.:

Juvenile and Domestic Relations District Court

ADDRESS

V.

PETITIONER

RESPONDENT

SOCIAL SECURITY NUMBER

ADDRESS

SOCIAL SECURITY NUMBER

MOTION:

I request the court to enter an income deduction order which contains the following terms:

1. Proposed Income Deduction Terms:

Pay interval:

- weekly
- bi-weekly
- semi-monthly
- monthly
-

} regular pay dates

OTHER PAY INTERVAL AND REGULAR PAY DATES

I am also ordered to provide health care coverage for the following persons:

NAME	STATUS (check applicable box)			Payment Priority
	Dependent Child	Current Spouse	Former Spouse	
1.				<input type="checkbox"/> Support <input type="checkbox"/> Health care coverage
2.				
3.				
4.				
5.				
6.				

2. Proposed amount to be deducted each pay period:

\$ or % of disposable income, whichever is less based on court-ordered payments of \$ per with \$ total unpaid payments.

3. Reason for proposed support income deduction order:

- receipt of notice of arrearage in support payments
- Court has found that there is an arrearage of an amount equal to one month's support obligation
- facts relevant in determining the likelihood of payments in accordance with the support order
- request of the obligor
- Other:

4.
 EMPLOYER'S NAME

 EMPLOYER'S ADDRESS

DATE

PETITIONER

NOTICE TO THE RESPONDENT/OBLIGOR: Read this entire Notice (pages one and two) carefully. This motion is made pursuant to Virginia Code § 20-79.1. If you wish to contest this Motion, written notice must be filed in the clerk's office by

FILING DEADLINE

for a hearing on

HEARING DATE

DATE

CLERK DEPUTY CLERK