



CHILD SUPPORT GUIDELINES WORKSHEET  
COVER LETTER

Date: \_\_\_\_\_

Case Number: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_,  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_, \_\_\_\_\_

Dependents:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We, the Child Support Recovery Unit (CSRU), previously sent you a notice that we are attempting to enter an order for support for the above-named children. We asked both parents to complete and return a financial statement, along with proof of the income and expenses. We also provided information on the ways that we may determine a parent's income in order to calculate a support amount.

Enclosed is a worksheet showing our calculation and what we recommend for support. Be sure to review the entire worksheet right away. For a summary of our recommendations, see Section V. RECOMMENDED AMOUNT OF CHILD SUPPORT and the GUIDELINES CALCULATION COMMENTS.

**We intend to ask the court to enter a support order based on the worksheet**, subject to the following:

1. We will consider any new or different financial information from either parent or any other source ***within 10 days from the date of this letter*** before taking action to file a support order. A new worksheet will be issued to both parents if there is a change in the support recommendations.
2. If we are recommending cash medical support, we determined that there is no health benefit plan available that is accessible or reasonable in cost based on Iowa Code 252E. Let us know ***within 10 days from the date of this letter*** if you wish to consent to provide a health benefit plan or if you have additional information on a plan. A new worksheet will be issued to both parents if there is a change in the support recommendations.

We can consider a health benefit plan provided by a stepparent. As with a parent's health benefit plan, a stepparent's plan must be accessible and reasonable in cost. If not, you must contact us to consent to provide a stepparent plan. In addition, a parent may object to a stepparent providing a health benefit plan. If a parent objects for this reason in writing, the court will decide the issue based on what is equitable to the parties and children.

3. We may extend the accrued support period to include any additional periods public assistance is paid out prior to the entry of the order.

4. A parent served with a Notice of Child Support Debt or petition to establish support may request a court hearing to determine the issue of support. Neither this letter, nor the enclosed worksheet, affects your right or time limits for exercising this right.
5. In an administrative paternity case, the alleged father, mother, or CSRU may request genetic testing and/or a court hearing. If the alleged father fails to appear for scheduled genetic testing and fails to reschedule the test, we will enter a default administrative order establishing paternity and support, including medical support. Neither this letter, nor the enclosed worksheet, affects your right or time limits for exercising your right to genetic testing or a court hearing.

If a court hearing is held, we will present evidence to the court concerning the finances of both parents. This includes, but is not limited to, any financial statement provided by the parents and any worksheet we completed to calculate the amount of support or to determine medical support.

If you have any questions about this letter or the enclosed worksheet, please contact us at the address and phone number below.

\_\_\_\_\_  
\_\_\_\_\_  
Child Support Recovery Unit

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\_\_\_\_\_

PHONE: \_\_\_\_\_