NOTICE OF DELINQUENCY UNDER OCGA § 19-6-32

TO:	DATE:
	This is your notice under OCGA § 19-6-32 (f), that the enclosed <i>Income</i>
Dedu	action Order shall now be enforced.
(1)	The support order was entered on in the Superior Court
	of DeKalb 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 <i>Notice</i> .
(3)	The fees that may be imposed are: \$ The interest which may be
	imposed is: \$\(\struct \) 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 <i>Income Deduction Order</i> . 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:	

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