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Employees' Manual  
Title 10  
Chapter H Appendix

# **DETERMINING CHILD SUPPORT OBLIGATIONS**

## **APPENDIX**



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### 470-0204, Financial Statement

Purpose	Use form 470-0204, <i>Financial Statement</i> , to request the parents' financial information.
Source	<p>Generate this form by making the following entries on the respective process screens:</p> <ul style="list-style-type: none"><li>◆ ADMIN: Enter a "Y" in the GENERATE NOTICES field on the ADMIN screen to generate this form for the first time, or an "R" to regenerate it.</li><li>◆ ADPAT: Enter a "Y" in the GENERATE NOTICES field on the ADPAT screen to generate this form for the first time, or an "R" to regenerate it.</li><li>◆ PATEST: Enter a "Y" in the GEN FORMS field on the PATEST2 screen to generate this form for the first time, or an "R" to regenerate it.</li><li>◆ REVIEW: Enter a "Y" in the NOI field on the REVIEW1 screen to generate this form for the first time, or an "R" to regenerate it.</li><li>◆ ADMOD: Enter a "Y" in the NOI field on the ADMOD1 screen to generate this form for the first time, or an "R" to regenerate it.</li></ul>
Completion	<p>Complete this form when you need to compute the child support obligation.</p> <p>If generated from the ADMIN, ADPAT, PATEST2, REVIEW1, or ADMOD1 screen, ICAR automatically enters all of the data in the heading of this form. If generated manually, you must enter all of the data. Each parent completes the remainder of this form.</p>
Distribution	Personally serve, by certified mail or through a sheriff or private process server, one copy of this form with the accompanying establishment or modification documents upon the payor (or the alleged father if appropriate).

| Personally serve, by certified mail or through the sheriff or private process server, one copy of this form with accompanying modification documents upon the payee (not the caretaker, if the other parent is not the caretaker).

| Mail one copy of this form with accompanying establishment documents by first-class mail to the payee (not the caretaker if the other parent is not the caretaker).

Data ICAR enters all of the information on the form. You must enter the information for manually generated forms:

- | ♦ Payor's/alleged father's name
- | ♦ Payee's or caretaker's name
- | ♦ Third party's name (if applicable)
- | ♦ Children's names
- | ♦ Date generated (current date in MM/DD/CCYY format)
- | ♦ Docket number
- | ♦ ICAR number
- | ♦ Worker ID
- | ♦ County name where document is filed

### 470-2154, Request to Complete Financial Statement

Purpose	Use form 470-2154, <i>Request to Complete Financial Statement</i> , with form 470-2870, <i>Foster Care Financial Statement</i> , in the ADMIN process, to inform the payor with a prior support order that the prior order remains in effect. This form also explains that this payor's financial information will be used to determine the other parent's child support obligation.
Source	Because this form is not used frequently, this form is not generated from the ADMIN screen. Generate it from the FORMVIEW screen.
Completion	Complete this form when the payor has a prior support order including the child in foster care.  You must enter all of the data into this form.
Distribution	Personally serve, by certified mail or through the sheriff or private process server, one copy of this form with the <i>Foster Care Financial Statement</i> upon the payor who is already ordered to pay support.
Data	Worker enters all of the following information on the form: <ul style="list-style-type: none"><li>◆ Date generated (current date in MM/DD/CCYY format)</li><li>◆ ICAR number</li><li>◆ Payor's name and address</li><li>◆ Children's names</li><li>◆ Court order number</li><li>◆ County and state where prior order is being filed</li><li>◆ Worker name, address, and telephone number</li></ul>

**470-2639, Request for Financial Statement**

Purpose	<p>Use form 470-2639, <i>Request for Financial Statement</i>, in an establishment action to:</p> <ul style="list-style-type: none"><li>◆ Ask each parent to complete and return form 470-0204, <i>Financial Statement</i>, within ten days.</li><li>◆ Explain the use of the guidelines in determining child support obligations.</li><li>◆ Inform the parent of the consequences of not returning the <i>Financial Statement</i> in ten days.</li></ul>
Source	<p>Enter a "Y" in the GENERATE NOTICES field on the ADMIN or the ADPAT screen to generate this form for the first time, or an "R" to regenerate it.</p>
Completion	<p>Complete this form when you send the <i>Financial Statement</i> to the payor/alleged father and payee to enable you to compute the child support obligation.</p> <p>If you generate this form from the ADMIN or the ADPAT screen, ICAR automatically enters all of the data in the heading of the form. If you generate it manually, you must enter all of the data.</p>
Distribution	<p>Personally serve, by certified mail or through the sheriff or private process server, one copy of this form with form 470-3309, <i>Notice of Intent to Establish Paternity (and Support)</i>, or with form 470-1922, <i>Notice of Support Debt</i>, and accompanying documents upon the payor or the alleged father.</p> <p>Mail one copy of this form and accompanying documents to the payee (not the caretaker, if the other parent is not the caretaker) by first-class mail. For an interstate case, mail the payee's copy to the responding state.</p>

Data

ICAR enters all of the information on the form. You must enter the information for manually generated forms:

- ◆ Date generated (current date in MM/DD/CCYY format)
- ◆ ICAR number
- ◆ Payee's name and address or responding state's IV-D agency name and address
- ◆ Payor's/alleged father's name and address
- ◆ Worker's name, ID, address and telephone number
- ◆ Children's names

**470-2640, Child Support Guidelines Worksheet**

Purpose	Use form 470-2640, <i>Child Support Guidelines Worksheet</i> , to inform each parent about the child support obligation.
Source	Generate this form from the guidelines application.
Completion	Complete this form after you gather the parent's financial information and after you calculate the child support obligation. Enter all necessary financial information into the guidelines application which performs the necessary calculations.
	To print this form from the guidelines application, click on the GUIDELINES tab. Select VIEW/PRINT GUIDELINES WORKSHEET or view/PRINT REDACTED GUIDELINES WORKSHEET.
Distribution	Send one copy each to the payor/alleged father and the payee by first-class mail with the cover letter.
Data	The form contains the following information: <ul style="list-style-type: none"><li>◆ Case number</li><li>◆ Docket numbers</li><li>◆ Dependents included in support order</li><li>◆ Names of payor/alleged father and payee</li><li>◆ Method used to determine income</li><li>◆ Income information and deductions</li><li>◆ Calculation used to determine guideline amount of child support</li><li>◆ Extraordinary visitation</li><li>◆ Deviation reason and amounts, if appropriate</li><li>◆ Recommended amount of current and accrued support</li><li>◆ Recommended medical support</li><li>◆ Changes in support obligation as children emancipate</li><li>◆ Qualified additional dependents (QADD)</li><li>◆ Comments</li></ul>

**470-2870, Foster Care Financial Statement**

Purpose	Use form 470-2870, <i>Foster Care Financial Statement</i> , to request the parents' financial information, which the Unit uses to compute the child support obligations.
Source	Enter an "F" in the GENERATE NOTICES field on the ADMIN screen to generate this form for the first time, or an "R" to regenerate it.  Enter a "Y" in the NOI field on the REVIEW1 or ADMOD1 screen to generate this form for the first time, or an "R" to regenerate it.
Completion	Complete this form if there is not currently an order for support for this payor or if there is currently an order for support for this payor.  When generated from the ADMIN, ADMOD1 or REVIEW1 screen, ICAR automatically enters all of the data into this form. If manually generated, you must enter the data.
Distribution	Personally serve, by certified mail or through the sheriff or process server, one copy of this form with: <ul style="list-style-type: none"><li>◆ Form 470-2983, <i>Notice of Support Debt: Foster Care</i>, and accompanying documents upon the payor if no order for support exists for this payor.</li><li>◆ Form 470-2154, <i>Request to Complete Financial Statement</i>, upon the payor if an order for support for the child in foster care exists for this payor.</li><li>◆ Form 470-3253, <i>Notice of Intent to Review and Adjust a Child Support Obligation</i>, to each necessary party if an order is being reviewed.</li><li>◆ Form 470-3437, <i>Notice of Intent to Modify a Child Support Obligation</i>, to each necessary party if an order is being modified.</li></ul>

Data

ICAR enters all of the following information on the form. You must enter the information for manually generated forms:

- ◆ Payor's name
- ◆ Payee's name
- ◆ Third party's name (if applicable)
- ◆ Children's names
- ◆ Date generated (current date in MM/DD/CCYY format)
- ◆ ICAR number
- ◆ Worker ID
- ◆ Court order number
- ◆ County where action is being filed

**470-2950, Child Support Guidelines Worksheet Cover Letter**

Purpose	Use form 470-2950, <i>Child Support Guidelines Worksheet Cover Letter</i> , in an establishment action to notify the payor/alleged father and the caretaker (or the other parent, if not the caretaker) that the Unit will consider any new or different financial information they submit within ten days of the date on this form.
Source	Enter a "Y" in the GENERATE GUIDELINES CV LTR field on the ADMIN or the ADPAT2 screen to generate the form for the first time, or an "R" to regenerate it.
Completion	<p>Complete this form after you gather the parent's financial information and after you calculate the child support obligation.</p> <p>If generated from the ADMIN or the ADPAT2 screen, ICAR automatically enters all of the data. If manually generated, you must enter all of the data.</p>
Distribution	Send one copy each to the payor/alleged father and the payee by first-class mail with form 470-2640, <i>Child Support Guidelines Worksheet</i> . For caretaker cases, send one copy to the caretaker and to the other parent. For an interstate case, send the payee's copy to the responding state.
Data	<p>ICAR enters all of the information on the form. You must enter the information for manually generated forms:</p> <ul style="list-style-type: none"><li>◆ Data generated (current date in MM/DD/CCYY format)</li><li>◆ ICAR number</li><li>◆ Payee's name and address or responding state's IV-D agency's name and address</li><li>◆ Payor's/alleged father's name and address</li><li>◆ Children's names</li><li>◆ Worker name, ID, address and telephone number</li></ul>

**470-3515, Verification of Social Security Information**

Purpose	Use form 470-3515, <i>Verification of Social Security Information</i> , to verify social security disability (SSD) benefits received by the payor/alleged father and dependents.
Source	Because this form is not generated from a process screen, generate this form from the FORMVIEW screen.
Completion	You must first check online sources for SSA information. Use this form only when a parent is indicating they receive SSD benefits, but you cannot verify the payor's/alleged father's SSD benefits through the Income and Eligibility Verification System (IEVS) or the State Data Exchange System (SDXD).
Distribution	Send this form to your region's Social Security Administration (SSA) office with a self-addressed stamped envelope.
Data	The worker enters all of the following information: <ul style="list-style-type: none"><li>◆ Date generated</li><li>◆ SSA office address</li><li>◆ ICAR case number</li><li>◆ Payor's/alleged father's name, SSN, and date of birth</li><li>◆ Children's names, SSNs, and dates of birth</li><li>◆ Worker name and address</li></ul>

**IRS-2441, Child and Dependent Care Expenses**

Purpose	Use form IRS-2441, <i>Child and Dependent Care Expenses</i> , to verify employment-related child care expenses when calculating a support obligation.
Source	Because the payee obtains this form from the Internal Revenue Service (IRS), this form does not generate from ICAR.
	For this form go to the IRS website: <a href="https://www.irs.gov/">https://www.irs.gov/</a>
Completion	The payee completes this form to receive credit from the IRS for employment-related child care expenses. The Unit reviews this completed form when giving the payee a child care deduction to gross income.

**IRS Schedule C, Profit or Loss From Business**

Purpose	Use form IRS Schedule C, <i>Profit or Loss From Business</i> , to verify income and expenses from self-employment when calculating a support obligation.
Source	Because the payor/alleged father or the payee obtains this form from the IRS, this form does not generate from ICAR.
	For this form go to the IRS website: <a href="https://www.irs.gov/">https://www.irs.gov/</a>
Completion	The payor/alleged father or the payee completes this form to report income or loss from self-employment to the IRS. The Unit reviews this completed form when determining income.

**IRS Schedule F, Profit or Loss From Farming**

Purpose	Use form IRS Schedule F, <i>Profit or Loss From Farming</i> , to verify income and loss from farming when calculating a support obligation.
	For this form go to the IRS website: <a href="https://www.irs.gov/">https://www.irs.gov/</a>
Source	Because the payor/alleged father or the payee obtains this form from the IRS, this form does not generate from ICAR.
Completion	The payor/alleged father or the payee completes this form to report income or loss from farming to the IRS. The Unit reviews this completed form when determining income.

**Schedule SE, Self-Employment Tax**

Purpose	Use Schedule SE, <i>Self-Employment Tax</i> , to verify the tax due on net earnings for self-employed individuals when calculating a support obligation.
Source	Because the payor/alleged father or the payee obtains this form from the IRS, this form does not generate from ICAR.
	For this form go to the IRS website: <a href="https://www.irs.gov/">https://www.irs.gov/</a>
Completion	The payor/alleged father or the payee completes this form to calculate the tax due on net earnings from self-employment and reports that amount to the IRS. The Unit reviews this completed form when determining income.

**[RC-0133, Determining Medical Support Orders in the Establishment and Modification Processes Desk Aid](#)**

Purpose

This desk aid is provided to help you determine what type of medical support to seek in an establishment or modification action. This desk aid is based on:

- ◆ Code of Federal Regulations 303.31,
- ◆ Iowa Code section 252E.1A, and
- ◆ Iowa Court Rules, Chapter 9.