

BEFORE THE BUREAU OF COLLECTIONS, DEPARTMENT OF HUMAN SERVICES
IN AND FOR _____ COUNTY

_____ _____ _____ _____ _____ _____ Petitioner, vs. _____ _____ Respondent.	NO. _____ PROOF OF SERVICE OF INCOME WITHHOLDING ORDER
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The undersigned certified that:

1. On the _____ day of _____, _____, an income withholding order was sent to the clerk of court.
2. On the _____ day of _____, _____, a copy was served upon an employer or income provider.
3. The order was served by depositing a copy thereof in the U.S. mail, postage prepaid, in an envelope addressed to:

Child Support Recovery Unit

Telephone: _____
Date: _____