

**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

PETITIONER

v.

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

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

STATUS (check applicable box)

NAME	Dependent Child	Current Spouse	Former Spouse	Payment Priority
1. ....				<input type="checkbox"/> Support
2. ....				<input type="checkbox"/> Health care coverage
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

