

Date:

Parent Ordered to Pay Support:

CSE Case Number(s):

Dear

Thank you for your application for the Child Support Debt Reduction Program. In order for us to continue reviewing your request, we need the following information:

- ☐ The enclosed Debt Reduction Application (DCSS 0752) must be completed and returned.
- ☐ The enclosed Debt Reduction Application must be signed and dated.
- ☐ Lines _____ of the Debt Reduction Application must be answered.
- ☐ The following supporting documents must be provided:
- ☐ Other:

It is important that these items are completed, signed and returned so our office can process your application for Debt Reduction.

**If the information marked above is not received within 30 days
from the date of this letter, your application will be denied.**

If you have questions concerning the application process, please call the number below.

Sincerely,

LCSEA Representative:

Telephone Number: