

<input type="checkbox"/> District Court _____ County, Colorado Court Address: _____ <hr/> <b>In Re:</b>  <b>Petitioner:</b>  <b>Respondent/Co-Petitioner:</b>	
Attorney or Party Without Attorney (Name and Address): _____  Phone Number: _____ E-mail: _____ FAX Number: _____ Atty. Reg.#: _____	<b>▲ COURT USE ONLY ▲</b>  Case Number: _____  Division _____ Courtroom _____
<b>ADVANCE NOTICE OF ACTIVATION OF AN INCOME ASSIGNMENT</b>	

TO: \_\_\_\_\_, Obligor.

Last Known Address: \_\_\_\_\_

Child Support and/or maintenance was ordered by the Court: \_\_\_\_\_  
 (Name of Court)

<u>Date of Order</u>	<u>Amount of Payment</u>	<u>Court Case Number</u>	<u>Date Payment Due</u>

As of the date below you have failed to pay the full amount due. The Obligee intends to activate an income assignment in the amount of:

- \$ \_\_\_\_\_ Current child support
- \$ \_\_\_\_\_ Current maintenance
- \$ \_\_\_\_\_ Arrears – Child Support at \_\_\_\_\_% interest
- \$ \_\_\_\_\_ Arrears – Maintenance at \_\_\_\_\_% interest
- \$ \_\_\_\_\_ Total amount to be withheld monthly

This TOTAL AMOUNT to be withheld monthly is governed by §13-54-104(3), C.R.S. When there are arrears, the income assignment shall include payment on these arrears in the amount of one-twenty-fourth of the total amount due up to the date of activation. This payment on arrears may be modified if additional arrears accrue prior to activation. This income assignment is a continuing assignment and will be forwarded to you current employer, trustee, or other payor of funds as follows:

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_

If this is not your current employer, you must notify the court, in writing, of your new employer (or the family support registry, if payments are to be made through the registry).

You have the right to file a WRITTEN objection (form attached) to the activation of the income assignment within 14 days after the date this NOTICE was mailed. This objection must be based on mistake of fact, such as an error in the identity of the Obligor or the amount of support or arrears.

Should you file this written objection with the Court as shown above, and send a copy to the Obligee, the following procedures will be followed:

1. The Court must schedule and conduct a hearing within 42 days after the date this NOTICE was mailed.
2. The Court shall deny the objection if any reason other than a mistake of fact is used.
3. The sole issue at the hearing is limited to the mistake of fact stated in the objection.
4. If your objection is based on the amount of arrears, the income assignment may be activated and enforced as to current support obligations, and activation of the income assignment as to arrears will be stayed pending the outcome of a hearing on the objection.
5. If the Court denies your objection, the income assignment will be activated pursuant to §14-14-111.5(4), C.R.S.
6. Attorney fees and costs may be awarded to the prevailing party.
7. If you do not object, the income assignment will be activated.

By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.

By checking this box, I am acknowledging that I have made a change to the original content of this form.

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**SIGNATURE**

DATE: \_\_\_\_\_

\_\_\_\_\_  
Signature of Obligee or Attorney

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City, State, Zip Code, Phone Number

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) I sent the original and one copy of this Advance Notice of Activation of an Income Assignment to the COURT, and that I sent a copy to the Obligor's last known address by United States Mail, first class postage prepaid, addressed as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature