| Full Name of Party Filing Document          |   |
|---|---|
| Mailing Address (Street or Post Office Box) |   |
| City, State and Zip Code                    |   |
| Telephone                                   |   |
| Email Address (if any)                      |   |
| IN THE DISTRICT COURT FOR THE               |   |
|   | Case No   |
| Petitioner,<br>vs.                          | ORDER ON MOTION TO TERMINATE<br>INCOME WITHHOLDING ORDER FOR<br>CHILD SUPPORT |
| Respondent.                                 | CHILD SUPPORT   |
| IT IS ORDERED:                              |   |
| ☐ the Income Withholding Order for Child    | Support entered on:   |
| (date of Order) is termin                   | nated. <b>or</b>  |
| the Motion to Terminate Income Withhol      | lding Order for Child Support is denied.                                      |
| Date:                                       |   |
| _   |   |
| J   | udge  |

## CLERK'S CERTIFICATE OF SERVICE

| I certify that a copy of this Order was served: |  |
|---|--|
| (Name)  | <ul><li>☐ By United States mail</li><li>☐ By personal delivery</li><li>☐ By fax (number)</li></ul> |
| (Street or Post Office Address)                 |  |
| (City, State, and Zip Code)                     |  |
| (Name)  | By United States mail By personal delivery By fax (number)   |
| (Street or Post Office Address)                 |  |
| (City, State, and Zip Code)                     |  |
| Date:   | Deputy Clerk   |