

## INCOME WITHHOLDING FOR SUPPORT

OMB 0970-0154  
Expiration Date: 08/31/2026

## I. Sender Information: (Completed by the Sender)

Date: 10/30/2024 INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT (IWO) AMENDED IWO ONE-TIME ORDER/NOTICE FOR LUMP SUM PAYMENT TERMINATION OF IWO Child Support Agency (CSA)  Court  Attorney  Private Individual/Entity (Check One)

**NOTE:** This IWO must be regular on its face. Under certain circumstances, you must reject this IWO and return it to the sender (see IWO instructions [www.acf.hhs.gov/css/resource/income-withholding-for-support-instructions](http://www.acf.hhs.gov/css/resource/income-withholding-for-support-instructions)). If you receive this document from someone other than a state or tribal CSA or a court, a copy of the underlying support order must be attached.

State/Tribe/Territory MichiganRemittance ID (include w/payment) 912870261City/County/Dist./Tribe Eaton County Friend of the CourtOrder ID 2013000698Private Individual Entity Case ID 912870261

## II. Employer and Case Information: (Completed by the Sender)

LLPS INC

RE: STENZEL, JOSEPH, LUKE

Employer/Income Withholder's Name

Employee/Obligor's Name (Last, First, Middle)

5859 W SAGINAW HWY

376-02-0594

Employer/Income Withholder's Address

Employee/Obligor's Social Security Number

BOX 343

04/07/1986

LANSING, MI 48917-2460

Employee/Obligor's Date of Birth

Employer/Income Withholder's FEIN 383468792

STEHOUWER, KRISTYN, LYNN

Child(ren)'s Name(s) (Last, First, Middle)

Custodial Party/Obligee's Name (Last, First, Middle)

STEHOUWER, ASHTON, JAMES

07/29/2011

## III. Order Information: (Completed by the Sender)

This document is based on the support order from Michigan (State/Tribe). You are required by law to deduct these amounts from the employee/obligor's income until further notice.

\$ 344.00 Per month current child support\$ 0.00 Per month past-due child support - Arrears greater than 12 weeks?  Yes  No\$ 13.00 Per month current cash medical support\$ 0.00 Per month past-due cash medical support\$ 0.00 Per month current spousal support\$ 0.00 Per month past-due spousal support\$ 53.50 Per month other (must specify) Arrears and/or Feesfor a **Total Amount to Withhold of \$410.50 per MONTH.**

## IV. Amounts to Withhold: (Completed by the Sender)

You do not have to vary your pay cycle to be in compliance with the *Order Information*. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

\$94.37 per weekly pay period \$205.25 per semimonthly pay period (twice a month)\$188.74 per biweekly pay period (every two weeks) \$410.50 per monthly pay period\$ Lump Sum Payment: Do not stop any existing IWO unless you receive a termination order.

