

**NOTICE — ADMINISTRATIVE SUPPORT DECISION APPEAL**

**Using This Revisable PDF Form**

1. Copies — (Contact the court to determine if you should bring copies to the Clerk's Office or if copies will be made upon filing.)
2. Top portion prepared by appellant (person appealing administrative support decision).

**Data Elements**

1. Court case number.
2. DCSE ID number of DCSE support case in which the administrative support decision is being appealed.
3. Name of city or county in which court is located.
4. Name and other data of person on whose behalf the Division of Child Support Enforcement is taking action.
5. Name and other data of person against whom the Division of Child Support Enforcement is taking action.
6. Insert names and data regarding dependents for whom the Division of Child Support Enforcement is seeking support.
7. Check the applicable block, and if applicable, describe the document containing the decision which is being appealed.
8. Check the applicable block.
9. Date of signing by appellant.
10. Signature of appellant.

To be completed by the clerk of court:

11. Date and time of court hearing.
12. Date and time by which the Division of Child Support Enforcement is to forward a copy of the administrative support decision to the court.
13. Date of signing by clerk.
14. Signature of clerk or deputy clerk. Check the appropriate box.

**NOTICE — ADMINISTRATIVE SUPPORT DECISION APPEAL**

Commonwealth of Virginia  
Va. Code § 63.2-1943

Case No.: **1** .....

DCSE ID No. **2** .....

**3** ..... Juvenile and Domestic Relations District Court

Virginia Department of Social Services,  
Division of Child Support Enforcement

ex rel **4** ..... v. **5** .....

ADDRESS/LOCATION

ADDRESS/LOCATION

Social Security No. ....

Social Security No. ....

Telephone No. (H) ..... (W) .....

Telephone No. (H) ..... (W) .....

Date of Birth .....

Date of Birth .....

Names of Dependents

Date of Birth

Relationship to Defendant

**6**

I appeal the decision of the hearing officer in the above-styled case and ask that this court try the case without considering the decision of the hearing officer as an appeal de novo pursuant to Virginia Code § 63.2-1943 as applicable. The order appealed involved:

- 7**  Administrative support order
- Notice and finding
- Mandatory withholding of earnings
- Order to withhold and deliver
- .....

The city or county in which this court is located is a proper location for this hearing because it is where:

- 8**  I reside
- the appellee resides and I do not reside in Virginia
- either the obligor's property or the place of business of the obligor's employer is located and neither the appellee nor I reside in Virginia

I understand that the decision of the hearing officer remains valid and enforceable during the appeal.

**9** .....  
DATE

**10** .....  
SIGNATURE OF APPELLANT

**COURT USE ONLY**

Notice of Hearing

**11** ..... is the date and time of the hearing of this appeal. The Division of

Child Support Enforcement is directed to forward a copy of the hearing officer's decision by **12** .....

**13** .....  
DATE

**14** .....  
[ ] CLERK [ ] DEPUTY CLERK