AGENDA RULE DEVELOPMENT WORKSHOP (If Requested in Writing)

Workshop Material Available on the web at: http://www.floridarevenue.com/rules

1:00 P.M., July 12, 2022

Contacts: Bobby York, Government Analyst II, (850) 617-8037

ROOM 1220, BLDG TWO 2450 SHUMARD OAK BLVD TALLAHASSEE, FLORIDA

THIS MEETING IS OPEN TO THE PUBLIC

- 1. Call to Order:
 - (a) Introduction of Department of Revenue Staff
 - (b) Opening Remarks by Department of Revenue
- 2. Business: Presentation and discussion of the proposed changes to the following rule sections of the <u>Florida Administrative Code (F.A.C.):</u>

CHILD SUPPORT

Rule 12E-1.040, F.A.C.

3. Closing Comment



DEPARTMENT OF REVENUE

Division of Child Support Enforcement

RULE NO.: RULE TITLE:

12E-1.040 Intergovernmental Forms

PURPOSE AND EFFECT: The purpose of the proposed amendments to Rule 12E-1.040, F.A.C. (Intergovernmental Forms), is to incorporate, by reference, forms used to assist the Department in providing services.

SUBJECT AREA TO BE ADDRESSED: Updates to child support rules and forms.

RULEMAKING AUTHORITY: 409.2557, FS.

LAW IMPLEMENTED: \$8.3111(2), \$8.3071(1)(a), 409.2557, 409.2561. FS.

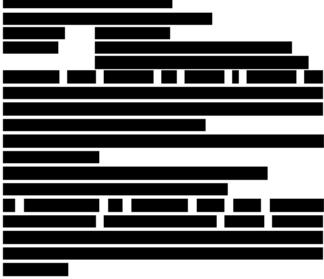
IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW:

DATE AND TIME: Tuesday, July 12, 2022, 1:00 PM

PLACE: 2450 Shumard Oak Boulevard, Building 2, Room 1220, Tallahassee, Florida

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 48 hours before the workshop/meeting by contacting: Bobby York, telephone: (850)617-8037, email: Bobby. York@floridarevenue.com. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice). THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Bobby York, Child Support Program, Department of Revenue, 2450 Shumard Oak Blvd., Suite 2-4466, Tallahassee, Florida 32399-0184, telephone: (850)617-8037, Bobby. York@floridarevenue.com.

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS AVAILABLE AT NO CHARGE FROM THE CONTACT PERSON LISTED ABOVE.



STATE OF FLORIDA

DEPARTMENT OF REVENUE

CHAPTER 12E-1, FLORIDA ADMINISTRATIVE CODE

CHILD SUPPORT PROGRAM

AMENDING RULE 12E-1.040

12E-1.040 Intergovernmental Forms.

- (1) No change.
- (2)(a) and (b) No change.
- (c) The Department uses the Declaration in Support of Establishing Parentage (CS-IS26) form to obtain a paternity affidavit from a person seeking establishment of paternity or paternity and support in an intergovernmental case. The Department provides the CS-IS26 to the other government's child support program. Form CS-IS26, (effective 09/19/2017), (http://www.flrules.org/Gateway/reference.asp?No=Ref-08663), is hereby incorporated by reference in this rule. The CS-IS26 is mailed to the parent for completion and signature along with Review and Sign Forms Needed to Obtain a Child Support Order (CS-IS73) and Review and Sign Forms Needed to Review a Child Support Order (CS-IS74), which provides instructions for reviewing and completing CS-IS26. The parent has 30 days from the date form CS-IS26 is mailed to them to complete it and return it to the Department. Form CS-IS73, (effective 10/2206/22), (http://www.flrules.org/Gateway/reference.asp?No=Ref-_____14357), is hereby incorporated by reference in this rule. Form CS-IS74, (effective 10/2206/22), (http://www.flrules.org/Gateway/reference.asp?No=Ref-_____14358), is hereby incorporated by reference in this rule.

Draft 06-28-2022

(3) No change.

Rulemaking Authority 409.2557 FS. Law Implemented 88.3111(2), 88.3071(1)(a), 409.2557, 409.2561 FS. History—New 9-19-17, Amended 6-9-22, ______.



Child Support Program

CS-IS73 Rule 12E-1.040 Florida Administrative Code Effective 06/22

Review and Sign Forms Needed to Obtain a Child Support Order

Recipient Name Recipient Address City, State, Zip Case Number: Activity Number: Other Parent:

Pick a date

Thank you for providing the information needed to prepare these forms. The next step is for you to review, sign and return the enclosed form(s) so we can request the state in which the other parent resides to establish a child support order for your child(ren).

WHAT YOU NEED TO DO

- 1. Review the attached form(s) carefully.
- 2. Strike through and initial any required revisions.
- 3. On the *Petitioner* line, enter the date, print your name, and sign.
- 4. Return the completed form(s) to your local child support office within 20 days.

*Use the self-addressed envelope provided to return the forms.

When we receive the signed forms, we will send them to the state where the other parent resides. If we do not receive the signed forms within 20 days, the Program will close your case. If you or your child(ren) receive public assistance, the Department of Children and Families (DCF) will be notified that you did not cooperate, and your public assistance benefits may be reduced or ended.

For purposes of reviewing the forms you are referred to as the *petitioner* and the *oblique*.

If you have questions or need help:

Access your case online: childsupport.floridarevenue.com

Email us: FloridaRevenue.com/AskChildSupport

Chat with us or learn more at: floridarevenue.com/childsupport

Call: Select number

Para asistencia en español, llame al 850-488-5437 y marque 7

Attachments:



Child Support Program

CS-IS74 Rule 12E-1.040 Florida Administrative Code Effective 06/22

Review and Sign Forms Needed to Review a Child Support Order

Recipient Name Recipient Address City, State, Zip Case Number: Activity Number: Other Parent:

Pick a date

Thank you for providing the information needed to prepare these forms. The next step is for you to review, sign and return the enclosed form(s) so we can request the state in which the other parent resides to establish a child support order for your child(ren).

WHAT YOU NEED TO DO

- 1. Review the attached form(s) carefully.
- 2. Strike through and initial any required revisions.
- 3. On the *Petitioner* line, enter the date, print your name, and sign.
- 4. Return the completed form(s) to your local child support office within 20 days.

*Use the self-addressed envelope provided to return the forms.

When we receive the signed forms, we will send them to the state where the other parent resides. If we do not receive the signed forms within 20 days, the Program will close your request for review of your support order, but your case will remain open.

For purposes of reviewing the forms you are referred to as the *Petitioner* for signing. The parent paying support is referred to as the *Obligor*. The parent due support is referred to as the *Obligee*.

If you have questions or need help:

Access your case online: childsupport.floridarevenue.com

Email us: FloridaRevenue.com/AskChildSupport

Chat with us or learn more at: floridarevenue.com/childsupport

Call: Select number

Para asistencia en español, llame al 850-488-5437 y marque 7

Attachments: