

Date:

Department for Children and Families  
1901 Delaware Street  
Lawrence, KS 66046

Kansas Child Support Services  
YoungWilliams, Contractor  
120 SE 6<sup>th</sup> Street, Suite 106  
Topeka, KS 66603

VIA FAX: (785) 832-3771

VIA FAX: (785) 233-1560

Court Case No. DG  
Name:  
SSN: XXX-XX-

Dear Department for Children and Families and Private Contractor:

Effectively immediately, I request closure of my child support enforcement case with the Department for Children and Families, Kansas Child Support Services. Please prepare a notice of termination of assignment as soon as possible.

I wish to waive any arrears owed to me.

I do not wish to waive arrears owed to me; but I do not want DCF to enforce Arrears

I DO NOT receive the following services:

- Cash assistance
- Child care assistance
- Medical assistance
- Food assistance
- Foster care services

I DO receive the following services:

- Cash assistance
- Child care assistance
- Medical assistance
- Food assistance
- Foster Care Services

Thank you for your assistance in this matter.

Print your name

**Sign this form in front of a Notary.**

\_\_\_\_\_  
Your signature

STATE OF KANSAS     )  
                                  ) ss:  
COUNTY OF DOUGLAS )

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public  
My Appointment Expires: