



July 31, 2014

SR #: Number (if applicable)

Case #: Number (if applicable)

MIS Case #: Number (if applicable)

Respondent Name
Street Address
City, BC X1X 1X1

Dear Respondent Name:

Thank you for submitting the financial information we requested. It has now been reviewed with our ministry's legal counsel. Based on your gross annual income of \$30,000.00, and the Federal Child Support Guidelines, you are required to pay \$500.00 per month, with a suggested commencement date of July 1, 2014.

A draft written agreement is enclosed for your consideration. If you agree with the terms of the agreement, please sign and date it where indicated and return it to the address below by July 31, 2014. Please note that you have the right to seek independent legal advice before signing the agreement.

If the documents are not received by July 31, 2014, the ministry will proceed with a court application to obtain maintenance.

If you have questions, please contact me at Worker Phone Name.

Thank you for your continued cooperation.

Sincerely,

Worker Name
Family Maintenance Worker

HR3326 (14/07/24)

The Ministry of Social Development and Social Innovation operates under the authority of the *Employment and Assistance Act* and Regulations, and the *Employment and Assistance for Persons with Disabilities Act* and Regulations.

**Ministry of Social
Development and
Social Innovation**

Office Name

Mailing Address
Office Mailing Address

Telephone: Office Phone
Facsimile: Office Fax