

The Personal information requested on this form is collected under the authority of the *Employment and Assistance Act* and/or the *Employment and Assistance for Persons with Disabilities Act*. The personal information collected on this form is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. Specific questions about this form may be directed to the Family Maintenance Worker.

Name	File #
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Parties: _____ and _____
Applicant Respondent

Option #1:

I prefer to reach _____ and avoid a court hearing.

I am willing to pay maintenance and have enclosed the requested documents:

Last 3 pay stubs Financial statement (if requested) Last _____ years income tax returns

Other:

Option #2:

I prefer to reach _____, however I require more time to gather the necessary documents.

I will have the required documents to you by _____ and request that you call me at _____

Date (YYYY MMM DD)

to confirm this time is acceptable.

Telephone _____

Option #3:

I have reviewed my options and have decided my preference is to have the matter of maintenance be decided in a court hearing. I understand I will receive a notice of any court proceedings taken against me.

Signed _____

Dated (YYYY MMM DD) _____

Please complete this form and return it to SDSI at

Office Address _____

by _____

Dated (YYYY MMM DD) _____

If I do not hear from you within that time frame, I will assume your preference is option # 3 above.

Note: You have the right to seek legal advice before responding to this form/letter.