



REQUEST FOR WAIVER OR COMPROMISE OF ARREARS: APPENDIX A

I, _____ would like to request that the Butler County CSEA begin negotiations with me in order to determine whether or not the child support arrears that I owe for the child/ren _____ to the state of Ohio can be waived or compromised based upon my present circumstances. I have financial hardship which does not allow me to meet this obligation and I would like to have my case reviewed for waiver and compromise. I understand that neither the Butler County CSEA nor the Ohio Department of Jobs and Family Services is required to grant my request for waiver or compromise of any state owed arrears and that this process has no right of appeal. _

Non-Custodial Parent / Representative

SETS Number or Social Security Number

Date