

INCOME WITHHOLDING FOR SUPPORT

- () INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT (IWO)
 () AMENDED IWO
 () ONE-TIME ORDER/NOTICE FOR LUMP SUM PAYMENT
 (X) TERMINATION OF IWO

Date: 09/30/2020

(X) Child Support Enforcement (CSE) Agency () Court () Attorney () Private Individual/Entity (Check One)

NOTE: This IWO must be regular on its face. Under certain circumstances you must reject this IWO and return it to the sender (see IWO instructions www.acf.hhs.gov/css/resource/income-withholding-for-support-instructions). If you receive this document from someone other than a state or tribal CSE agency or a court, a copy of the underlying support order must be attached.

State/Tribe/Territory Maryland
 City/County/Dist./Tribe STATE OF MARYLAND, DHS
 Private Individual/Entity

Remittance ID (include w/payment) 220147157
 Order ID 78579FL
 Case ID 220147157

THE UNIVERSITY OF CHICAGO
 Employer/Income Withholder's Name
 6054 S DREXEL AVE
 Employer/Income Withholder's Address
 CHICAGO, IL 60637-2612

RE: DIARRA, MICHAEL ABDOULAYE
 Employee/Obligor's Name (Last, First, Middle)
~~XXX-XX-1972~~
 Employee/Obligor's Social Security Number
 11/06/1968
 Employee/Obligor's Date of Birth
 DIARRA, KALLE
 Custodial Party/Obligee's Name (Last, First, Middle)

Employer/Income Withholder's FEIN 362177139

Child(ren)'s Name(s) (Last, First, Middle)	Child(ren)'s Birth Date(s)
DIARRA, ALEXANDER	09/14/2002
DIARRA, BRIAN	09/14/2002
DIARRA, JESSICA	06/23/1999

ORDER INFORMATION: This document is based on the support order from Maryland (State/Tribe). You are required by law to deduct these amounts from the employee/obligor's income until further notice.

\$.00	Per MONTH current child support	
\$.00	Per MONTH past-due child support - Arrears greater than 12 weeks?	() Yes (X) No
\$.00	Per MONTH current cash medical support	
\$.00	Per MONTH past-due cash medical support	
\$.00	Per MONTH current spousal support	
\$.00	Per MONTH past-due spousal support	
\$.00	Per MONTH other (must specify)	

for a Total Amount to Withhold of \$.00 per MONTH.

AMOUNTS TO WITHHOLD: You do not have to vary your pay cycle to be in compliance with the *Order Information*. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

\$.00 per weekly pay period	\$.00 per semimonthly pay period (twice a month)
\$.00 per biweekly pay period (every two weeks)	\$.00 per monthly pay period
\$.00 Lump Sum Payment: Do not stop any existing IWO unless you receive a termination order.	

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