

YOUR RIGHTS AND RESPONSIBILITIES

I UNDERSTAND THE FOLLOWING CONDITIONS:

- 1.** The State Staff Attorney, District Attorney, and/or private contract attorney providing Child Support services pursuant to C.F.R. 45 (200-499):
 - a.** Does not represent me in any action that may occur.
 - b.** Represents only the State and State's interest.
 - c.** Cannot give me any legal advice. I must contact my own attorney or the local legal services for legal advice.

- 2.** Any information provided, orally, in writing, or in other form, is not protected by the attorney-client privilege and could be used by the State in a civil or criminal action against me. Whenever the interests of the Louisiana Department of Social Services conflict or are adverse to me I should retain independent counsel to advise me of my rights. Any monies paid by me herein are not attorney fees.

- 3.** In accordance with Section 466(a) (13) of the Social Security Act 44 U.S.C. 666 (a) (13) disclosure of social security is required. The information may be used for purposes of establishing paternity, modifying and enforcing support obligations. Social Security numbers may also be released for reasons directly connected to programs within the Department of Social Services.

- 4.** Either party to a child support order may request a review of the child support order every three years to determine if the amount of support is consistent with the Louisiana child support award guidelines.

Signature of Acknowledgment

Witness

Social Security Number

Witness

Date

Notary