



Child Support Program

Notice of Special Account(s) Release

<<Financial Institution BP Name>>
<<Address\_Line\_1>>
<<Address\_Line\_2>>
<<City>> <<State>> <<Zipcode>>

<<Date>>
Name: <<NCPName>>
SSN: <<NCP SSN >>
Address: <<Account Holder Address line 1>>
<<Account Holder Address line 2>>
<<City>> <<State>> <<Zipcode>>

Activity Number: <<ZBL activity #>>

This special release applies to the following account(s) only:

Table with 4 columns: Account Number, Full Release, Partial Release, Amount To Hold. Contains 10 rows with checkboxes for Full and Partial Release.

Any other accounts belonging to the referenced account holder (and not specified above) must remain frozen for the full amount of <<Past due amount on EF121>> as stated in the Department's Notice to Freeze dated <<Date of EF121>>.

If you have any questions, please call <<LevyPhoneNumber>>.

Signed,
<<Compliance Process Manager>>
Executive Director's Designee
Issued on: <<Date>>

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This document has been signed electronically as authorized by section 668.004, Florida Statutes.

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