

STATE OF INDIANA	)	IN THE KOSCIUSKO CIRCUIT/SUPERIOR COURTS
	) SS:	
COUNTY OF KOSCIUSKO	)	CAUSE NO. _____
IN RE:	)	
_____	)	
Custodial Party	)	
	)	
and	)	
_____	)	
Non-Custodial Party		

**CUSTODIAL PARTY WAIVER  
ATTORNEY – APPLICANT RELATIONSHIP**

The Office of the Prosecuting Attorney represents the interest of the State of Indiana in having children adequately supported and in collecting overdue support. The Prosecuting Attorney represents the State of Indiana and not you personally.

This means, for example, that no attorney-client relationship exists between you and the Prosecuting Attorney. It also means that in the event of a conflict between your interest and those of the State of Indiana, the Prosecuting Attorney will have to resolve such conflict in favor of the State of Indiana. Should the Prosecuting Attorney become aware of such a conflict of interest, he/she will endeavor to inform you of it.

This means that if at any time your interests are different from the State of Indiana, the Prosecuting Attorney will represent the State.

The Prosecuting Attorney IV-D Office cannot provide all the services which you may receive from a private attorney. For example, the Prosecuting Attorney cannot provide services to you regarding custody, visitation or any other issues not related to child support.

The establishment and collection of support or the collection of support delinquencies ***cannot be guaranteed***. The Office of the Prosecuting Attorney will take such legal actions as may be available to institute the legal process toward the collection of support and delinquencies, and will attend hearings when necessary. That service may include the filing of a Uniform Interstate Family Support Act (UIFSA), the filing of Information in Contempt, the filing of a Petition to Establish Paternity, Petition to Establish and/or Modify Support, the issuance of income withholding orders, submission to Credit Bureau, Suspension of Driving Privileges and the filing of a criminal non-support.

**I, THE UNDERSIGNED HAVE READ THE ABOVE AND FULLY UNDERSTAND AND ACKNOWLEDGE THE SAME AND HEREBY AGREE THERETO. THIS FORM IS A WAIVER FORM AND SHOULD ONLY BE SIGNED AFTER READING. YOUR SIGNATURE VERIFIES THAT YOU HAVE READ AND UNDERSTAND THE CONTENTS OF THIS FORM.**

\_\_\_\_\_  
Custodial Party

Dated this \_\_\_\_ day of \_\_\_\_\_, 200\_\_.