

DEPARTMENT OF HEALTH AND HUMAN SERVICES

LANSING

GRETCHEN WHITMER GOVERNOR

ELIZABETH HERTEL DIRECTOR

ENTER ADDRESSEE NAME
ENTER ADDRESS LINE 1
ENTER ADDRESS LINE 2
ENTER ADDRESSEE CITY/STATE/ZIP

ENTER DATE

Phone Number: 866-540-0008

DHS-1202, APPLICATION STATUS LETTER

(Revised 8-23)

| Re: |
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| Dear : |
| The Office of Child Support has received your application for child support services. |
| 1. We need more information to act on your application. Please contact the Office of Child Support a 866-540-0008 for more details. |
| 2. A case already exists for the child(ren). Please contact the Office of Child Support at 866-540-0008 for more details. |
| 3. A paternity and/or child support case already exists for the child(ren), and: |
| a. Another man has been found to be the legal father of this child(ren). |
| b. The custodial party's request for not pursuing paternity and/or child support for this child(ren) has been approved. No further paternity and/or child support action can be taken |
| c. You have already been excluded as the father by a genetic (DNA) test. |
| 4. Other: |
| Please contact the Office of Child Support for additional information or if you have any questions. |
| Sincerely, |
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The Michigan Department of Health and Human Services (MDHHS) does not discriminate against any individual or group on the basis of race, national origin, color, sex, disability, religion, age, height, weight, familial status, partisan considerations, or genetic information. Sex-based discrimination includes, but is not limited to, discrimination based on sexual orientation, gender identity, gender expression, sex characteristics, and pregnancy.