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| **Our Ref:** | Phone:  Fax: |

The Child Support Registrar

Department of Human Services: Child Support

GPO Box 9815

MELBOURNE VIC 3001

Dear Sir/Madam

**Reference No:**

Please find enclosed an authority confirming that I am assisting in relation to child support matters.

Please also find enclosed an “Application for Change of Assessment” on

behalf.

If you have any questions about this matter please contact me at the on

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Yours sincerely

**Solicitor**