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

Objections Team

Department of Human Services: Child Support

GPO Box 9815

MELBOURNE VIC 3001

**By Facsimile:** 1300 309 949

Dear Sir/Madam

**Reference No:**

**Objection to Child Support Agency Decision**

I enclose an authority signed by confirming that I am assisting her with child support matters.

I am instructed by to lodge an objection to the Department of Humans Services: Child Support Agency’s decision of enter details.

**The Grounds of the Objection**

 objects to the decision on the following grounds:

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

Yours sincerely

**Solicitor**