
Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

IN THE DISTRICT COURT FOR THE _____ JUDICIAL DISTRICT
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF _____

STATE OF IDAHO,
Plaintiff,
vs.

Defendant.

Case No. _____

REQUEST FOR ADMINISTRATIVE
WAIVER OR OBJECTION TO
INTERCEPTED TAX RETURN
I.C. §1-1624

ROA-TAXW TAX INTERCEPT
OBJECTION OR REQUEST FOR WAIVER

I, _____ (insert full name), residing at _____

(insert full mailing address), hereby state that I am submitting this Request
for Administrative Waiver **or** Objection to Intercepted Tax Return within 21 days of the
mailing date on the "Notice of State Income Tax Withholding And Diversion of Funds". I further
state that: _____

I am the taxpayer obligated in the above captioned case. I hereby request an Administrative
Waiver because: _____

or

I filed a joint tax return in the State of Idaho with the taxpayer obligor identified in the above referenced matter for the year of _____. I am not specified to be the obligor in the judgment or agreement creating the debt owed to the court in the above captioned case. I hereby object to the interception of my portion of the joint return and petition the court to return my portion to me.

Date: _____

Typed/printed

Signature