

CLAIM FOR RECOUPED SUPPORT PAYMENT(S)

DCSS 0764 (11/17/2024)

INFORMATION: Department of Child Support Services (DCSS) is required to send undeliverable payments to families that previously received California Work Opportunity and Responsibility to Kids (CalWORKs) when any amount of support is collected and applied to repay CalWORKs.

You may be eligible to claim undeliverable payment(s) that were sent to repay CalWORKs. Your support payment may have been undeliverable and sent to repay CalWORKs because:

- we could not find you to deliver the support payment(s) for at least six months
OR
- a paper check we sent you was not cashed within six months from issue date and has been expired for at least six more months
AND
- there is no direct deposit account on file
AND
- there is no Electronic Payment Card on file

You can claim these payments for up to 12 months after we send the money to repay CalWORKs.

To make a claim, you must complete and return this claim form to DCSS.

- Your claim may include up to 12 months of payments sent to repay CalWORKs
- Claims may only include payment(s) received by DCSS on or after May 1, 2024

INSTRUCTIONS:

To claim payment(s), read, sign, and date the Statement of Facts on the back of this notice.

Completed forms can be returned to:

Email: DCSSRecoupmentClaim@dcss.ca.gov

Fax: (916) 636-2436

Mail: California Department of Child Support Services
Operations Division
PO Box 419064, MS-340
Rancho Cordova, CA 95741-9064

IMPORTANT: The review period for the claim will begin once the signed claim form is either received by DCSS or the date it is postmarked by the United States Postal Service, whichever is earlier.

Receive payments faster and more secure! Enroll in direct deposit or Electronic Payment Card by visiting the California State Disbursement Unit website at <https://childsupport.ca.gov/state-disbursement-unit/> or call Customer Connect at (866) 901-3212.

For more information regarding the above information, visit the Department of Child Support Services website at <https://www.childsupport.ca.gov> or call Customer Connect at (866) 901-3212. For TTY, call (866) 399-4096.

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STATEMENT OF FACTS

I, the undersigned, certify or declare the following facts in connection with the recouped payment(s):

I am a former recipient of CalWORKs cash assistance and am no longer receiving cash aid through CalWORKs.

I am requesting a payment(s) that were sent to repay CalWORKs because the payment(s) could not be delivered to me when it was received by DCSS.

I understand that I can only request a payment(s) that were sent to repay CalWORKs for up to 12 months from the date it was sent to repay CalWORKs.

I am the authorized payee entitled to receive the payment(s).

I have provided DCSS with my current contact information including my current address, telephone number (home/cell/work), and email (if available).

I hereby authorize DCSS to verify my contact information prior to, and for the purposes of, validating this claim.

I hereby certify or declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINT PAYEE NAME

ADDRESS OF PAYEE

PHONE NUMBER

PARTICIPANT NUMBER

EMAIL

SIGNATURE OF PAYEE

DATE
