REQUEST FOR SUPPORT SERVICES

DCSS 0055 (10/20/2019)		
	(CSE Case Number:
INSTRUCTIONS: Read cal	refully before signing below.	Your signature is required in order for us to
115-123 which amended th Support Services may asse assistance. This fee will be been disbursed to the famil	e provisions of the Federal Defi ess a \$35 Annual Service Fee for assessed every year on Octob y in the prior Federal Fiscal Yea	get Act of 2018, section 53117 of Public Law cit Reduction Act of 2005, the Department of Child reach case that has never received public er 1st for each case in which at least \$550 has r (October 1st - September 30th). The fee will be the custodial party after October 1st until the fee
I want the local child suppo child(ren) or enforce a supp		support order to establish paternity for the
I understand that I am apply of the Social Security Act.	ying for these services under the	e Child Support Services Program under Title IV-D
whichever happens fir If my home address, no If my employer, includ If my income changes If my status, cost, or a If any information regal If the parent(s) moves If there is any change I am aware that the local chare the subject of this case, and me, the other parent, of agency provides the support	ies. hes age 18 years and is no long st. hailing address, or telephone nuing name, address, and telephone nuing name, address, and telephone. vailability of health insurance control of the order of th	verage changes. her parent(s) changes. en, or
PRINT NAME	 SIGNATURE	 DATE