CHILD SUPPORT AGENCY CONFIDENTIAL INFORMATION FORM FOR IV-D AGENCY USE ONLY - DO NOT FILE WITH A TRIBUNAL OR PROVIDE TO THE OTHER PARTY The information on the form may be disclosed only as authorized by law. If you are not the intended recipient, you are hereby notified that any use, disclosure, distribution, or copying of this form or its contents is strictly prohibited. NOTE: This form sent through EDE **Section I. Case Information:** Initiating jurisdiction name: Responding jurisdiction name: Initiating IV-D case identifier: Responding IV-D case identifier: Initiating tribunal number: Responding tribunal number: Section II. Parent/Caretaker Information: Parent X Obligee Obligor Parent Obligee X Obligor or Legal name (first, middle, last, suffix): Legal name (first, middle, last, suffix): Relationship to child(ren): Caretaker Relationship to child(ren): Parent Sex: Male Female Other Sex: Male Female Other Date of birth: Place of birth: Date of birth: Place of birth: (city, county, state) (city, county, state) SSN: SSN: Home telephone: Home telephone: Cell telephone: Work telephone: Cell telephone: Work telephone: Alias (e.g., maiden name, nickname): Alias (e.g., maiden name, nickname): Home address (street, city, state, zip code): Home address (street, city, state, zip code): Date address confirmed: Date address confirmed: Mailing address (street, PO Box, city, state, zip code): Mailing address (street, PO Box, city, state, zip code): Date address confirmed: Date address confirmed: E-mail: E-mail: Employer name: _ Employer name: _ Date employer confirmed: Date employer confirmed: Employer address (street, city, state zip code) Employer address (street, city, state zip code)

Employer FEIN:

Incarcerated?

(If yes, Inmate #:

and facility name:

Yes

No

Employer FEIN:

(If yes, Inmate #:

and facility name:

Yes

No

Incarcerated

CHILD SUPPORT AGENCY CONFIDENTIAL INFORMATION FORM, PAGE 2 Caretaker - Obligee (When obligee is not the child(ren)'s parent) Legal name (first, middle, last, suffix): Relationship to child(ren): Sex: Male Female Other Date of birth: SSN: Home telephone: Cell telephone: Work telephone: Home address (street, city, state, zip code): Date address confirmed: Mailing address (street, PO Box, city, state, zip code): Date address confirmed: E-mail: Section III. Child(ren) Information: Child #1 legal name (first, middle, last, suffix): Home address (street, city, state, zip code): SSN: Date of birth: Female Place of birth (city, county, state): Sex: Male Nonmarital birth: Yes No (If no, date of marriage: If yes, complete the following: Parentage established. Was this parentage establishment a paternity determination of fatherhood? Parentage was established on (state). (date) in Parentage was established by: Order Acknowledgement of Parentage Adoption Other: Parentage was not established.

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Section III. Child(ren) Information (Continued):

Home address (street, city, state, zip code): SSN:	Child #2 legal name (first, middle, last, suffix):	
SSN: Date of birth: Place of birth (city, county, state): Sex: Male Female Nonmarital birth: Yes No (If no, date of marriage:) If yes, complete the following: Parentage established. Was this parentage establishment a paternity determination of fatherhood? Yes No Parentage was established on (date) in (state). Parentage was established by: Order Acknowledgement of Parentage Adoption Other: Parentage was not established. Child #3 legal name (first, middle, last, suffix): Home address (street, city, state, zip code): SSN: Date of birth: Place of birth (city, county, state): Sex: Male Female Nonmarital birth: Yes No (If no, date of marriage:) If yes, complete the following: Parentage established. Was this parentage establishment a paternity determination of fatherhood? Yes No	<u> </u>	
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Order	•	
Acknowledgement of Parentage		
Adoption		
Other		
Parentage was not established.	Parentage was not established.	
Additional Child(ren) Information Attached	Additional Child(ron) Information Attached	_

Encryption Requirements:

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails, may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).