

**CHILD SUPPORT/ALIMONY DECLARATION**

CLIENT NAME \_\_\_\_\_

APPLICATION NUMBER \_\_\_\_\_

**Noncustodial Parent/Ex-Spouse #1**

Name of noncustodial parent or ex-spouse providing the support: \_\_\_\_\_

Name of child(ren): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

The household has NOT received any child support/alimony since \_\_\_\_\_.

OR

The household has **NEVER** received child support/alimony

OR

The household DOES receive child support/alimony. The amount received: \$ \_\_\_\_\_ (circle one)  
weekly/bi-weekly/monthly

**Noncustodial Parent/Ex-Spouse #2**

Name of noncustodial parent or ex-spouse providing the support: \_\_\_\_\_

Name of child(ren): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

The household has NOT received any child support/alimony since \_\_\_\_\_.

OR

The household has **NEVER** received child support/alimony

OR

The household DOES receive child support/alimony. The amount received: \$ \_\_\_\_\_ (circle one)  
weekly/bi-weekly/monthly

**\*\*IMPORTANT\*\***

**\*\*ANYONE RECEIVING CHILD SUPPORT THROUGH DOR MUST CALL 1-800-332-2733 AND REQUEST A PRINT OUT OF ALL PAYMENTS FROM \_\_\_\_\_ TO \_\_\_\_\_.**

**If you do not receive your support through DOR then submit one of the following:**

- 1. A recent copy of a check or money order if paid weekly.**
- 2. The last four (4) checks you have received if you are paid bi-weekly or monthly.**
- 3. A copy of the court order or separation agreement indicating the amount to be paid and the frequency of the payments.**
- 4. If you receive cash and have no written agreement, contact our office and request a "child support notarization" form.**

I CERTIFY UNDER THE PAINS AND PENALTIES OF PERJURY THAT ALL FACTS STATED ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I ALSO UNDERSTAND THAT IN THE EVENT I RECEIVE BENEFITS AS THE RESULT OF FRAUDULENT STATEMENTS I WILL BE SUBJECT TO PROSECUTION. I AUTHORIZE NEFWC TO CONTACT ANY AND ALL PERTINENT PERSONS, AGENCIES OR COMPAINES TO VERIFY THIS INFORMATION. IF I HAVE BEEN ISSUED A COURT ORDER OF IF I HAVE A SEPARATION AGREEMENT, I AGREE TO SUBMIT A COPY TO NEFWC.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**THIS FORM WILL NOT BE ACCEPTED UNLESS ALL QUESTIONS ARE ANSWERED!!**