

CHILD SUPPORT AFFIDAVIT

Please complete one form for each non-custodial parent (with/without a case).

Head of Household Name: _____ Unit Number: _____

Child(ren)'s Name(s): _____

Non-Custodial Parent (NCP): _____

I certify that the following is true regarding my current child support situation:

- ☐ I am obliged/ entitled per court order to receive child support. **Provide supporting documentation such as a court order, child support agreement, print out from DHS (which shows at least 12 months of history), etc.**

I am currently receiving payments: ☐ Yes ☐ No If no, last payment received was on _____

How are/were the payments being received? ☐ DHS ☐ Court of Law ☐ Directly from NCP
☐ Other (explain): _____

Monthly Amount of Award: \$ _____ Date of Court Order: _____

County & State of Order: _____

- ☐ I am **not** obliged/entitled per court order to receive child support but I **(check all that applies)**:

1. ☐ receive or ☐ anticipate receiving
 - a. ☐ monetary contributions **(Provide signed copy of the Verification of Regular Contribution form from non-custodial parent)**
 - b. ☐ third-party benefits related to NCP's relationship to the child (e.g. SSI payments, etc.)
 - c. ☐ non-cash contributions (i.e. gasoline, diapers, baby formula, medicine, etc) in the amount of \$ _____ per _____ (frequency) in lieu of child support.

- ☐ I am **not** obliged /entitled per court order to receive child support. I do **not** anticipate such an order in the next 12 months, and no support is being received. I am not pursuing legal action because **(must check at least one)**:

- ☐ Financial reasons ☐ Responsible party's location is unknown
☐ Incarceration/ Protective Custody
☐ Responsible party is deceased. If yes, are survivor benefits (e.g. SSI, etc) being received? ☐ Yes ☐ No
☐ Other (explain): _____

I understand that I must notify the owner or management agent of any changes in the status of any child support payments as soon as possible.

Under penalty of perjury, I/we certify that the information presented in this certification is true and accurate to the best of my/our knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of a lease agreement.

Signature of Applicant/ Resident

Date