CHILD SUPPORT AGENCY CONFIDENTIAL INFORMATION FORM, PAGE 3

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

Child #2 legal name (first, middle, last, suffix): Home address (street, city, state, zip code): SSN: Date of birth: Place of birth (city, county, state): Gender: [] 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
SSN: Place of birth (city, county, state): Date of birth: Gender: [] 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 [] Not Parentage was established on (date) in (state). Parentage was established by:
Place of birth (city, county, state): Gender: [] 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 [] Note that Parentage was established on (date) in (state). Parentage was established by:
Place of birth (city, county, state): Gender: [] 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 [] Note that Parentage was established on (date) in (state). Parentage was established by:
Place of birth (city, county, state): Gender: [] 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 [] Note that Parentage was established on (date) in (state). Parentage was established by:
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 [] Note that parentage was established on (date) in (state). Parentage was established by:
If yes, complete the following: [] Parentage established. Was this parentage establishment a paternity determination of fatherhood? [] Yes [] Not Parentage was established on (date) in (state). Parentage was established by:
[] Parentage established. Was this parentage establishment a paternity determination of fatherhood? [] Yes [] Not Parentage was established on (date) in (state). Parentage was established by:
Parentage was established on (date) in (state). Parentage was established by:
Parentage was established by:
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[] Order
[] Acknowledgment 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): Gender: [] Male [] Female
Nonmarital birth: [] Yes [] No (If no, date of marriage:)
If yes, complete the following:
If yes, complete the following:
If yes, complete the following: [] Parentage established. Was this parentage establishment a paternity determination of fatherhood? [] Yes [] No.
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).
If yes, complete the following: [] Parentage established. Was this parentage establishment a paternity determination of fatherhood? [] Yes [] Not Parentage was established on (date) in (state). Parentage was established by:
If yes, complete the following: [] Parentage established. Was this parentage establishment a paternity determination of fatherhood? [] Yes [] Not Parentage was established on (date) in (state). Parentage was established by: [] Order
If yes, complete the following: [] Parentage established. Was this parentage establishment a paternity determination of fatherhood? [] Yes [] Note Parentage was established on (date) in (state). Parentage was established by: [] Order [] Acknowledgment of Parentage

[] Additional Child(ren) 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).