MC: ME Bar Code Area FS#: Central File Maintenance P.O. BOX 12048 AUSTIN, TX 78711-2048

OFFICE OF THE ATTORNEY GENERAL STATE OF TEXAS CHILD SUPPORT DIVISION

> GREG ABBOTT Attorney General

Date:

Dear Non-Custodial Parent,

Enclosed is a legal document called an "Affidavit of Direct Payments." This form is used to document child and medical support payments you (the non-custodial parent) made directly to the custodial parent (in any form), including payments received in the form of cash or check or from a Military Allotment, Trust Fund or Escrow Account. It should not include any support payments made through a county registry or the State Disbursement Unit (SDU).

Select the appropriate option on this form to indicate whether or not you have made any support payments directly to the custodial parent. If you have made support payments directly to the custodial parent, be sure to list the corresponding payment dates and amounts in the spaces provided at the bottom of this form.

A Notary Public must notarize this affidavit after witnessing you sign it. Do not sign this form until you are instructed to do so by the Notary Public. This form can be notarized by a Notary Public at your local child support office.

Please return the Affidavit of Direct Payments to the local office either

- by mail (in the enclosed, postage-paid envelope) or
- in person.

As mentioned above, this form must be completed, signed and notarized before it can be processed.

Note: You will not receive credit for any support payments listed on this form **until** credit for these payments is agreed to by the custodial parent or approved by the court.

Reminder: Child and medical support payments are to be made to the State Disbursement Unit at the address below:

SDU P.O. Box 659791 San Antonio, Texas 78265-9791

If you have any questions concerning this form, please contact your local child support office.

AFFIDAVIT OF DIRECT PAYMENTS

OFFICE OF THE ATTORNEY GENERAL STATE OF TEXAS



CHILD SUPPORT DIVISION

GREG ABBOTT

Attorney General

NON-CUSTODIAL PARENT'S AFFIDAVIT OF DIRECT PAYMENTS

Note: This form is used to document child and medical support payments made **directly** to the **custodial parent** by the **non-custodial parent** (in any form), **including** payments received in the form of cash or check or from a Military Allotment, Trust Fund or Escrow Account. This **excludes** payments made through a county registry or State Disbursement Unit (SDU).

Support Payments Made Directly To the Custodial Parent by the Non-Custodial Parent

Includes Payments in the form of cash or check or from a Military Allotment, Trust Fund or Escrow Account
Excludes Payments Made Through the County Registry or State Disbursement Unit (SDU)

Date	Amount								

Cause #:_____

Total of all direct payments:

, _____, the non-custodial parent:

- certify that either:
 - □ I have not made any support payments **directly** to_____, the custodial parent, and any payments I made were sent through the county registry or the State Disbursement Unit (SDU) <u>or</u>
 - the list of support payments provided below (including all dates and amounts) is a correct list of payments I made directly to ______, the custodial parent, and that these payments were not sent through the county registry or the State Disbursement Unit (SDU)
- acknowledge that I will not receive credit for any support payments listed on this form **until** credit for these payments is agreed to by the custodial parent or approved by the court
- authorize and request the Office of the Attorney General of Texas to disclose this document, in its entirety, to (the person to whom the above support payments were made) and file it with the court
- certify that there is no court order in effect that prohibits the release of this information, and that this information will be used only for child support purposes

Non-Custodial Parent's Signature	Date		
State of Texas County of			
SUBSCRIBED AND SWORN TO BEF	ORE ME, the undersigned	l Notary Public, by	
, this da	ay of	, 20	

Texas Government Code § 559 gives you the right to review and request correction of information on this form.