



OKLAHOMA DEPARTMENT OF HUMAN SERVICES

Child Support Enforcement Division
Central Case Registry



Request for Address of Record

I am requesting the address of record for this person:

First name	Middle initial	Last name	Date of birth	Social Security number	
Oklahoma child support case number FGN:		District court case number		County	State

List child(ren) in this case:

First name	Middle initial	Last name	Date of birth	
Last name of custodial person (CP)		First	Middle	Social Security number
Last name of noncustodial person (NCP)		First	Middle	Social Security number

Pursuant to 43 O.S. § 112A, the last known address of record will be released to the person requesting address disclosure. Home addresses are not disclosed if prohibited by a court order granted for the protection of a parent or custodian, or if the Oklahoma Department of Human Services Child Support Enforcement Division (CSED) case has been assigned a family violence indicator.

I am an authorized person to request this information under Oklahoma law (43 O.S. § 112A) because I am the: (Check one)

- custodian of the child(ren).
- noncustodial parent.
- attorney for the custodian. OBA no.: _____
- attorney for the noncustodial parent. OBA no.: _____
- other party or authorized representative: _____

I am requesting this address of record for service of process for the following purpose:

- support.
- visitation.
- custody.

I state under penalty of perjury under the laws of the State of Oklahoma that the forgoing is true and correct.

Type or print name of requestor

Signature of requestor

Date

Notice: The person whose address of record you are requesting may be notified of your request. A copy of page one of this request may be sent with the notice. CSED allows a 15-day time period for a response. Within 45 days after CSED receives your request, CSED will notify you if your request can be processed.

Complete the following information about yourself. This information is for identification and communication with you. This page will not be sent with the notice to the non-requesting party.

Information about the person requesting address disclosure.

First name of requestor	Middle initial	Last name	Social Security number if CP or NCP		
Oklahoma child support case number FGN:		District court case number	County	State	
Street address		City	State	Zip	
Home telephone number	Work telephone number	E-mail address, optional		Date of birth, if CP or NCP	

Purpose of Form

Form 03EN009E may be used by a custodial person (CP), noncustodial parent (NCP), the attorney for either, or an authorized person to request disclosure of the custodial person's or the noncustodial parent's address of record.

Instructions

Enter name, date of birth, and Social Security number of the person whose address of record you are requesting.

Enter the Oklahoma Child Support Enforcement case number. This is also called the FGN number.

Enter the District Court case number along with the county and state where it was entered.

Enter the names and dates of birth of up to four children in this case.

Enter the names and Social Security numbers of the CP and the NCP.

Check the appropriate box to indicate you are the CP, NCP, attorney for the CP or NCP, or an authorized representative. If you are the attorney, enter your Oklahoma Bar Association number. If you are a party or authorized representative not listed, check the other box and explain your status and authority for making this request.

Check the box corresponding with the purpose for your request. Under Oklahoma law, addresses of record are for service of process in support, visitation, and custody actions (43 O.S. § 112A).

Type or print your name, and sign and date the form.

If you are the CP or a NCP, enter your Social Security number.

Enter your mailing address. Include a street address or a post office box number with city, state, and zip code.

Enter your home and work telephone numbers. Include area code(s).

Enter your e-mail address (not required).

If you are the CP or a NCP, enter your date of birth.

Routing of Form

Make a copy of the form to keep for yourself, and return the original completed form to:

CSED, Central Case Registry
Attn: Address Disclosures
P. O. Box 528805
Oklahoma City, OK 73152-8805

Questions? Telephone (918) 295-3500 in the Tulsa area; (405) 522-2273 in the Oklahoma City area; or 1-800-522-2922.