



OKLAHOMA DEPARTMENT OF HUMAN SERVICES

Oklahoma Child Support Services



Designation of Custodial Person's Address of Record

Please print the following identification information.

Name of custodian (Person receiving support)

Last	Middle	First	Social Security number ¹
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Name of noncustodial parent (Person ordered to pay support)

Last	Middle	First	Social Security number
Oklahoma child support case number		District court case number	
FGN:		County	State

Please complete the following information:

I, _____, state that family violence **IS NOT** a risk to me or my child(ren); or **IS** a risk to me or my child(ren).

The name of the potentially dangerous person is:

I, _____, wish to designate my attorney's address as my address of record. I understand that all child support payments will be made payable to my attorney and mailed to the address below until my attorney and I sign a form terminating this designation and establishing a new address of record. I will receive legal and other official documents relating to child support, custody, and visitation at this address, and this address will be printed in legal and other public documents and therefore, may be provided to the other parent or party.

Attorney's name: _____

Address: _____

Phone: _____

¹ Social Security numbers will only be used for child support purposes.

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

Custodial person's signature

Date, city, state where signed

Attorney's signature

Date, city, state where signed

Purpose of form

A custodial person may use Form 03EN026E to designate an attorney's address as his or her address of record. When the attorney's address is designated as the address of record, it will be used as the custodial person's mailing address for all child support information. Child support payments will not be issued by direct deposit or debit card, but will be issued as a paper check made payable to the custodial person and the attorney and mailed to the attorney's address. Both the custodial person and his or her attorney must sign the designation form. To terminate this designation, both the custodial person and his or her attorney must sign Form 03EN030E.

Instructions

- Enter names and Social Security numbers of the custodial person and noncustodial parent.
- Enter the Oklahoma Child Support Services (OCSS) case number, also called the Family Group number (FGN).
- Enter district court case number and the county and state where it was entered.
- Type or print the name of person submitting the form.
- Check one of the boxes to indicate whether family violence is a risk in your case.
- If family violence is a risk in your case, enter name of potentially dangerous person.
- Enter the attorney's name and address.
- Sign and date the form.

Routing

If you are completing this form at the local child support office, please complete the form and leave it at the local office. You may include your application for child support services with this form. If you are not at the local office, **you must include a copy of an identification card that contains your photograph**. Make a copy of this form to keep for your records and fax it to (405) 522-8901 or mail the form to:

**OCSS, Central Case Registry, Attn: Address Disclosures
P. O. Box 248843
Oklahoma City, OK 73124-8843**

Questions? Telephone (918) 295-3500 in the Tulsa area; (405) 522-2273 in the Oklahoma City area; or 1-800-522-2922 toll free. TTY (405) 522-3792 in the Oklahoma City area or 1-866-264-4767 toll free.