

# REGISTRATION STATEMENT

Responding IV-D Case No.

Initiating IV-D Case No.

Responding Tribunal No.

Initiating Tribunal No.

**I. Case Summary** (Background of this Matter: Court / Administrative Actions)

Date of Support Order

State and County Issuing Order

Tribunal Case No.

Support Amount/Frequency  
/

Date of Last Payment

Amount of Arrears

Period of Computation

\_\_\_\_\_ thru \_\_\_\_\_  
Date Date

**II. Mother Information**

Full Name and Aliases  
(First, Middle, Last)

Obligor  Oblige  
Address (Street, City, State, Zip)

Employer (Name, Street, City, State, Zip)

SSN:

**III. Father Information**

Full Name and Aliases  
(First, Middle, Last)

Obligor  Oblige  
Address (Street, City, State, Zip)

Employer (Name, Street, City, State, Zip)

SSN:

**IV. Caretaker (If Not a Parent)**

Relationship to Child(ren)

Full Name and Aliases  
(First, Middle, Last)

Address (Street, City, State, Zip)

SSN:

**V. Additional Case Information**

This order is registered in the following states:

Description and location of any property not exempt from execution:

Other:

**VI. Verification / Certification**

Under penalties of perjury, all information and facts concerning the arrearage accrued under this order are true to the best of my knowledge and belief.

\_\_\_\_\_  
Date

\_\_\_\_\_  
[ ] Party seeking Registration [ ] Records Custodian

\_\_\_\_\_  
Sworn to and Signed Before Me This  
Date, County/State

\_\_\_\_\_  
Notary Public, Court/Agency Official and Title

\_\_\_\_\_  
Commission Expires