



Fuel and Electric Assistance Program

# Child Support Verification



I, \_\_\_\_\_, declare the following child support information:  
print name

For my children: \_\_\_\_\_  
full name of child/children

who legally reside(s) at: \_\_\_\_\_  
full address

I receive child support in the State of \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_  
*If child support is not received through the state, documentation may be required.*

I pay out child support in the State of \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ per \_\_\_\_\_  
*Documentation required (payroll deduction, copy of check, letter from custodial parent, or bank statement)*

I attest under the penalty of perjury that all information given is true, complete, and accurate.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR OFFICE USE ONLY**

**NH Child Support Hotline Verification:** 1-800-371-8844

(Press 1 for English, Press 1 for Payee/Press 2 for Payer, Enter SSN & #, Press 3 for last 5 payments)

<u>Date of Payment:</u>	<u>Amount:</u>	<u>Received/Paid By:</u>
1.	\$	
2.	\$	
3.	\$	
4.	\$	
5.	\$	

**Verified By:** \_\_\_\_\_ **Verified On:** \_\_\_\_\_