



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:** _____