

FCSE0001F0767001 001428730400 13 06
DCSS - SOUTH MCPA
PO BOX 40458
PHOENIX, AZ 85067-0458

(602) 252-4045

CUSTODIAL TEST TEST
1901 W MADISON ST APT 00000
PHOENIX, AZ 85009-5287

October 17, 2024

DRAFT



Katie Hobbs
Governor



Angie Rodgers
Director

STATE OF ARIZONA
100 N 15TH AVE STE 302
PHOENIX, AZ 85007-2634

Subject: Employer Record Updates
EMP ID *(for office use only)*
To whom it may concern,

The Division of Child Support Services is attempting to obtain your company information in order to update our files. Please provide the requested information in the spaces provided below.

(This is regarding your business information and not a specific employee.)

Are the following address(es) associated with your company?

Mail to Division of Child Support Services
PO Box 40458 S/C 020A
Phoenix, AZ 85067
Fax to 480-926-5193
Attn: Josue

Scan & email to: jcarrera@azdes.gov

1. Company Legal Name:

2. Any DBA names that the company uses: Does the Post Office recognize this name?

3. Federal Employer Identification Number(s) (FEIN) or Tax ID Number(s):

4. Contact Telephone:

5. Contact Fax:



6. Contact email:

7. Physical address of the corporate office; including suite #:

8. Mailing address: where all garnishments should be sent.

9. Mailing address: where all medical support orders should be sent.

10. Mailing address: where all employment verifications should be sent.

11. If a third-party payroll company handles this for you, please provide their phone number, and person of contact.

12. Please list any other job site locations that you process payroll for as it pertains to the FEIN # listed in question 3

The Division of Child Support Services appreciates your assistance in this matter and thank you for your timely response. If you have any questions, please contact us at 0000000000

Completed By: _____

Title: _____ **Phone:** _____

