

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

October 17, 2024

Katie Hobbs
Governor



Angie Rodgers
Director

RE: CUSTODIAL TEST TEST and NONCUSTODIAL ATLAS TEST
AZCARES No.: 001428730400

Si usted necesita asistencia con la traducción de este documento, por favor llame a la oficina y pregunte por un representante que hable español.

Good Cause - Physical/Emotional Harm

The Division of Child Support Services (DCSS) has been given authority under Arizona Revised Statutes (A.R.S.) § 46-292 to close a case when it has been determined that pursuing the case may result in physical or emotional harm to you or your child(ren), and support enforcement may not be in your best interest. This is known as a **Good Cause Determination**. Such a determination has been made in your case. In cases where there is reasonable evidence of domestic violence or child abuse, federal regulations require your case to be flagged with a Family Violence Indicator. This will allow the DCSS to keep your personal identifying information such as social security numbers, dates of birth, and mailing/residential address protected from disclosure while continuing to work your case.

Based on the Good Cause Determination, you may choose to allow the DCSS to continue working your child support case or to close your case. The DCSS can continue to provide you services while ensuring that your personal information remains confidential. Please complete the enclosed affidavit and return it to the following address within 30 days to let the DCSS know if you want your child support case closed, or if you would like the DCSS to continue working your case. If you do not return the enclosed affidavit, notarized, within 30 days, your case will be closed.

DCSS - SOUTH MCPA
PO BOX 40458
PHOENIX, AZ 85067-0458

If you have any questions about this notice, you may contact DCSS Customer Service at (602) 252-4045 (within Maricopa County), Nationwide toll free at 1-800-882-4151, or TTY/TDD Services: 7-1-1. You may also contact us by e-mail at the DCSS web site at www.azdes.gov/dcass.

Equal Opportunity Employer / Program • Auxiliary aids and services are available upon request to individuals with disabilities • To request this document in alternative format or for further information about this policy, contact the Division of Child Support Services at (602) 252-4045; TTY/TDD Services: 7-1-1 • Disponible en español en línea o en la oficina local.



Katie Hobbs
Governor



Angie Rodgers
Director

October 17, 2024

Affidavit Requesting Good Cause Closure

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

Re: 13 06 001428730400
CUSTODIAL TEST TEST and NONCUSTODIAL ATLAS TEST

I, _____, understand that by allowing the Family Violence Indicator to be flagged on my case, my personal identifying information will be protected from disclosure.

Choose one:

- I want the DCSS to **continue** working my case to obtain and/or enforce child support with the Family Violence Indicator flagged on my case.
- I want my case closed. I understand that the DCSS will take no further action to obtain and/or enforce a child support order for me.

I declare under penalty of perjury that the foregoing is true and correct.

Signature

Date

