



DEPARTMENT OF ECONOMIC SECURITY

Your Partner For A Stronger Arizona

Katie Hobbs
Governor

Vacant
Director

Date _____

RE: _____ ATLAS No.: _____

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

Caretaker's Statement Regarding Physical Custody of A Child or Children

I, *(Caretaker Full Name)* _____, *(Date of Birth)* _____,
(Relationship to Children) _____ state under penalty of perjury that I have had physical custody of the following child(ren) for at least 30 consecutive days beginning on or about _____.

I am providing this statement so that I can receive support payments for the child(ren) in my custody. I understand that if I am enrolled with the child(re) in the TANF cash assistance program, the state may retain the support payments to reimburse the grant amount I received.

Name _____ Date of Birth _____

Signature of Caretaker _____ Date _____

THIS SECTION RESERVED FOR USE BY THE DIVISION OF CHILD SUPPORT SERVICES (DCSS)

Custody Begin Date _____ 30th Day _____ Notice Sent _____

Request for Administrative. Review Received _____

Disbursement Begin Date _____

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.go/dcass.

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. To request this document in alternative format or for further information about this policy, contact your local office; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request. • Disponible en español en línea o en la oficina local.