



DEPARTMENT OF ECONOMIC SECURITY

*Your Partner For A Stronger Arizona*

Katie Hobbs  
Governor

Vacant  
Director

NAME:

ADDRESS:

ATLAS No.: No open IV-D Case

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

**Affidavit of Non-Disclosure**

The Division of Child Support Services (DCSS) is concerned for your safety and that of your family, so we need to know if you wish to have personal information in your support case protected.

As a regular business practice, the DCSS and the Arizona Attorney General's Office do not release personal information (address, social security number, date of birth, etc.) for you or your child(ren) except in court documents or when authorized by state or federal law. However, it is a federal requirement to send personal information to the Federal Case Registry (FCR) which is used to enforce child support cases by all states.

By completing the attached document, the DCSS will not submit your information to the FCR and your information will not be released to other state and federal agencies. In addition, any documents filed with the court will list your address as "ON FILE WITH DES".

**NOTICE: THIS DOCUMENT CONTAINS SENSITIVE DATA**

**AFFIDAVIT IN SUPPORT OF NON-DISCLOSURE OF INFORMATION IN EXCEPTIONAL CIRCUMSTANCES**

My name is:

The other parent's name:

**I believe that the following could put me or my child(ren) at risk for physical or emotional harm (check all that apply):**

The other parent or other individuals having access to my physical address and contact information.

Meeting in person to negotiate child support or parenting time with the other parent.

Contact with the other parent during exchange of the child(ren) for parenting time.

**Please briefly describe the reasons for your concern:**

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Please provide the Division of Child Support Services with information about Orders of Protection, Injunctions Against Harassment, copies of police reports or medical reports relating to your safety concerns.

**By signing below, I am requesting the following:**

The DCSS notes the safety risks related to my child support case so that efforts can be taken in the office and at court to minimize contact with the other parent.

The DCSS will not release my information to the Federal Case Registry.

The DCSS will notify the Arizona Attorney General's Office to exclude my physical address in all legal proceedings.

The Court/Tribunal will not disclose any identifying information about me or my child(ren), such as my physical address, in any document filed in court.

I understand that the court will make the final decision about my request for address confidentiality and that prior court documents or public records may already contain my personal information.

**By signing this document, I attest that the facts contained in this document are true and correct.**

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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.gov/dcss](http://www.azdes.gov/dcss).

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