

CHILD SUPPORT ENFORCEMENT TRANSMITTAL #1 - INITIAL REQUEST

The information on this form may be disclosed as authorized by law.

If you are not the intended recipient, you are hereby notified that any use, disclosure, distribution, or copying of this form or its contents is strictly prohibited.

Child Support Agency Confidential Information Form must be attached.

Petitioner: Legal Name (first, middle, last, suffix)

IV-D Case: ☐ TANF
☐ IV-E Foster Care
☐ Medicaid Only
☐ Former Assistance
☐ Never Assistance

File Stamp

Tribal Affiliation (if applicable)

Respondent: Legal Name (first, middle, last, suffix)

Tribal Affiliation (if applicable)

To: (Agency Name and Address)

Responding Locator Code: _____ State _____
Responding IV-D Case Identifier: _____
Responding Tribunal Number: _____

From: (Agency Name and Address)

Initiating Locator Code: _____ State _____
Initiating IV-D Case Identifier: _____
Initiating Tribunal Number: _____

Send Payments To: (If different from above)

Payment Locator Code: _____ State _____

NOTE:

- ☐ Nondisclosure Finding/Affidavit attached
☐ This form sent through EDE
☐ This request or information sent through CSENet

Section I. Action: The responding jurisdiction should open an intergovernmental case with the initiating jurisdiction and provide all appropriate services, including: **(Please acknowledge receipt of the Transmittal #1.)**

- | | |
|--|--|
| <p>1. <input type="checkbox"/> Establish parentage</p> <p>2. <input type="checkbox"/> Establish and enforce order, and forward payment to the initiating jurisdiction's SDU for:</p> <p style="margin-left: 20px;">A. <input type="checkbox"/> Current child support, including medical support</p> <p style="margin-left: 20px;">B. <input type="checkbox"/> Retroactive child support</p> <p style="margin-left: 20px;">C. <input type="checkbox"/> Medical support only</p> <p>3. <input type="checkbox"/> Take the following action(s) on the responding tribunal's order and forward payment to the initiating jurisdiction's SDU:</p> <p style="margin-left: 20px;">A. <input type="checkbox"/> Enforce</p> <p style="margin-left: 20px;">B. <input type="checkbox"/> Modify and enforce</p> <p style="margin-left: 20px;">C. <input type="checkbox"/> Modify then close the intergovernmental IV-D case</p> <p style="margin-left: 20px;">D. <input type="checkbox"/> Enforce arrears only</p> <p style="margin-left: 20px;">E. <input type="checkbox"/> Change person/entity entitled to receive funds and enforce</p> | <p>4. <input type="checkbox"/> Take the following action on a support order of another jurisdiction and forward payment to the initiating jurisdiction's SDU:</p> <p style="margin-left: 20px;">A. <input type="checkbox"/> Register and enforce</p> <p style="margin-left: 20px;">B. <input type="checkbox"/> Register, modify, and enforce</p> <p style="margin-left: 20px;">C. <input type="checkbox"/> Register, modify, then close the intergovernmental IV-D case</p> <p style="margin-left: 20px;">D. <input type="checkbox"/> Register and enforce arrears only</p> <p>5. <input type="checkbox"/> Other _____</p> |
|--|--|

Section II. Case Summary: (Background of this matter: court/administrative actions)

Date of support order State and county, tribe, or foreign country issuing order Tribunal number

Support amount/frequency Date of last payment Total amount of arrears Period of computation

\$ \$ _____ through _____

☐ Current Support ☐ Arrears Only

CHILD SUPPORT ENFORCEMENT TRANSMITTAL #1 - INITIAL REQUEST, PAGE 2**Section II. Case Summary (Continued):**

Date of support order State and county, tribe, or foreign country issuing order Tribunal number

Support amount/frequency Date of last payment Total amount of arrears Period of computation
\$ \$ thru☐ Current Support ☐ Arrears Only☐ Additional orders or information attached.**Section III. Obligor Information:** ☐ Parent ☐ Caretaker

Obligee legal name (first, middle, last, suffix) _____

If caretaker: relationship to child(ren) _____ ☐ Has legal custody/guardianship of the child(ren)**Section IV. Obligor Information:** Obligor legal name (first, middle, last, suffix) _____**Section V. Dependent Child(ren) Information:**

Legal Name (first, middle, last, suffix) _____

VI. Other Pertinent Information:☐ Continued on attached sheet(s), incorporated by reference.**VII. Attachments:**

(Supporting Documentation)

- | | |
|---|--|
| <input type="checkbox"/> Child Support Agency Confidential Information Form for IV-D Use Only | <input type="checkbox"/> Uniform Support Petition |
| <input type="checkbox"/> Declaration in Support of Establishing Parentage | <input type="checkbox"/> General Testimony |
| <input type="checkbox"/> Personal Information Form for UIFSA § 311 | <input type="checkbox"/> Support order(s) |
| <input type="checkbox"/> Letter of Transmittal Requesting Registration | <input type="checkbox"/> Acknowledgment of parentage |
| <input type="checkbox"/> Payment history | <input type="checkbox"/> Birth certificate/birth record |
| <input type="checkbox"/> Arrears balance and/or accrued interest (affidavit of arrears) | <input type="checkbox"/> Nondisclosure finding/affidavit |
| <input type="checkbox"/> Arrears calculation (month by month) | <input type="checkbox"/> Other attachments |

VIII. Contact Information:_____
Date_____
Initiating contact person (first, middle, last, suffix)()

Direct telephone number and extension

Fax: () _____

E-mail: _____

Encryption Requirements:

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

INSTRUCTIONS FOR CHILD SUPPORT ENFORCEMENT TRANSMITTAL #1 INITIAL REQUEST

PURPOSE OF THE FORM:

The CSE Transmittal #1-Initial Request form is required for initiating an intergovernmental case to any responding state's central registry. It contains basic case information and space for indicating which services are requested. The form can be used to request a number of different actions, including establishment of parentage and/or a support obligation, modification, and/or enforcement. It does not take the place of, and therefore must be accompanied by, the appropriate standard intergovernmental forms (e.g., Uniform Support Petition, Personal Information Form for UIFSA §311, General Testimony, Declaration in Support of Establishing Parentage, Letter of Transmittal Requesting Registration) and supporting documentation. Whenever possible, a Transmittal #1 request should be sent electronically using the appropriate CSENet transaction. However, some states also require a paper Transmittal #1.

The information on this form may be disclosed as authorized by law.

If you are not the intended recipient, you are hereby notified that any use, disclosure, distribution, or copying of this form or its contents is strictly prohibited.

Italicized text that appears within a "box" refers to policy or provides additional information.

For an address outside the United States, be sure to include the foreign country and postal code.

Tribal IV-D programs may choose to use the federal Intergovernmental forms. However, they are not required to use or accept such forms. If you have any questions, contact the tribal IV-D agency directly using the contact information on the OCSE website.

If this is a tribal IV-D case, note that tribal locator codes uniquely identify tribal cases with "9" in the first position, 0 (zero) in the second position, and then a 3-character tribal code defined by the Bureau of Indian Affairs (BIA).

The Child Support Agency Confidential Information Form must be attached.

HEADING/CAPTION:

- The initiating jurisdiction determines the heading.
- Identify the **petitioner** and **respondent** by full legal name (first, middle, last, suffix) and, if applicable, include the name of the tribe with which the petitioner or respondent is affiliated.
- Check the appropriate box to identify the type of IV-D case: TANF, IV-E foster care, Medicaid only, former assistance, or never assistance.

TANF means the obligee's family is currently receiving IV-A cash payments. A Medicaid only case is a case in which the obligee's family receives Medicaid but does not receive TANF. A former assistance case might be a case for state arrears only or for a family that previously received TANF, but is not doing so at this time.

- In the space marked "To:", list the name and address (street, PO Box, city, state, and zip code) of the agency to which you are sending the CSE Transmittal #1.

Once an initial referral in a IV-D case has been made to the responding state's central registry (using a CSE Transmittal #1), subsequent communication should occur with the agency/court/jurisdiction that is actually working the case (using a CSE Transmittal #2).

- In the appropriate spaces, enter the responding jurisdiction's locator code, state, and, if applicable and known, IV-D case identifier and tribunal number.

The responding jurisdiction is the jurisdiction that is working the case at the request of the initiating jurisdiction. Under "IV-D case identifier", enter the number/identifier identical to the one submitted on the Federal Case Registry, which is a left-justified up to 15-character alphanumeric field, allowing all characters except asterisk and backslash, and with all characters in uppercase. Under "tribunal number", you may enter the docket number, cause number, or any other appropriate reference number that the responding tribunal may use to identify the case, if known.

- In the space marked "From:" list the initiating agency's name and address (street, PO Box, city, state, and zip code).
- In the appropriate spaces, enter the initiating jurisdiction's locator code, state, IV-D case identifier, and, if applicable, tribunal number.

The initiating jurisdiction is the jurisdiction that referred the case to the responding jurisdiction for services. Under "IV-D case identifier", enter the number/identifier identical to the one submitted on the Federal Case Registry, which is a left-justified up to 15-character alphanumeric field, allowing all characters except asterisk and backslash, and with all characters in uppercase. Under "tribunal number", you may enter the docket number, cause number, or any other appropriate reference number that the initiating tribunal has assigned to the case.

- In the space marked "Send Payments To:", list the name and address (street, PO Box, city, state, and zip code) of your agency's support disbursement unit (SDU) if it is not the same information as listed in "To:" above.
- In the appropriate spaces, enter the locator code and state where payments should be sent.

In the "NOTE:" section, check any of the following that apply:

- **Nondisclosure Finding/Affidavit attached** – If there is a finding prohibiting disclosure of a party's or child(ren)'s address/identifying information or an affidavit alleging that disclosure of such information would result in risk of harm, check the box for "Nondisclosure Finding/Affidavit" and attach a copy of the finding/affidavit in accordance with section 312 of UIFSA. If there is a finding/affidavit prohibiting disclosure, the information must be sealed and may not be disclosed to the other party or the public. You may provide the address of the IV-D agency as a substitute address for the protected party.

UIFSA requires that the petition or accompanying documents include certain identifying information regarding the parties and child(ren) (e.g., residential address, social security number) unless a party alleges in an affidavit or a pleading under oath that the health, safety, or liberty of a party or child would be jeopardized by disclosure of such information. In that event, the information must be sealed.

If a jurisdiction has reason to believe that information should not be released because of safety concerns, it should ensure that there is a nondisclosure finding or an allegation in an affidavit or the pleading that disclosure of identifying information would result in a risk or harm, as provided under section 312 of UIFSA. In addition to identifying information included on this form, it may be appropriate to submit certain financial information under seal.

- **This form sent through EDE** – Check if this form was sent through the Electronic Document Exchange (EDE).
- **This request or information sent through CSENet** – Check if this request or information was sent through CSENet.

The following options are available for making IV-D requests and sending information on IV-D cases:

1. *CSENet transactions are the recommended method for making requests or sending information to another state. If CSENet is not listed as an option on the form, then it cannot be used to convey any of the requests for information or IV-D requests provided on the form. Supporting documentation should be sent through EDE, whenever possible. If certified copies are needed, hard copies should also be sent by mail. Mail or fax may also be used for all documents when EDE is not available.*
2. *If CSENet transactions are not available in your state, EDE is the next preferred method for transmitting your request or information. Both your state and the receiving state must be using the EDE application to use this communication method.*
3. *If the EDE application is not available in your state or the receiving state, then mail or fax must be used to communicate your request.*

Section I. Action:

Check the appropriate box(es) to indicate which actions are requested. Multiple actions may be requested, as appropriate. You may acknowledge receipt of the Transmittal #1 via CSENet or by returning the separate Transmittal #1 Acknowledgment form.

- Check **item 1** "Establish parentage" when parentage has not been legally determined. Be sure to attach a separate "Declaration in Support of Establishing Parentage" for each child whose parentage is at issue.
- Check **item 2** "Establish and enforce order, and forward payment to the initiating jurisdiction's SDU for" to request the establishment of an order. Indicate the type of order by checking the appropriate box(es).
 - Check **item 2A** "Current child support, including medical support" to request the initial establishment of a new child support order.
 - Check **item 2B** "Retroactive child support" to request support for a prior period.

States may establish child support awards covering a prior period, but such awards must be based on the responding state's child support guidelines. The award of retroactive support is not required under federal rules, but may be appropriate in accordance with state law. Not all states have authority to establish support orders for prior periods. The law of the responding state governs the extent to which retroactive support is available. A medical support provision must be included in any new or modified order in a IV-D case.

- Check **item 2C** "Medical support only" in a Medicaid case in which a child support order does not exist and is not sought. If seeking to add medical support to an existing child support order, check either item 3.B or 4.B (modify and enforce) depending on whether the order being modified was issued by the responding tribunal or is being registered for modification in the responding jurisdiction.
- Check **item 3** "Take the following action(s) on the responding tribunal's order and forward payment to the initiating jurisdiction's SDU:" when the responding tribunal has already issued a support order. More than one action can be chosen.
 - Check **item 3A** "Enforce" to enforce the support order.
 - Check **item 3B** "Modify and enforce" to modify and enforce the support order.

You may ask a responding state to modify its order if either the obligor, the individual obligee or the child(ren) reside in the responding state and the individual parties have not filed a consent in a record in the responding tribunal for another state to assume jurisdiction to modify. You may ask a responding state to modify its order, even if it is not the residence of the obligor, individual obligee, or the child so long as the parties have consented in a record or in open court that the tribunal may continue to exercise jurisdiction to modify its order. You may also ask a responding state to modify its order if one party resides in another state and the other party resides outside the United States.

- Check **item 3C** "Modify then close the intergovernmental IV-D case" to modify the support order and then close the IV-D case because additional services are not needed. Do not check this box if you want the responding jurisdiction to also enforce the modified order.
- Check **item 3D** "Enforce arrears only" to enforce the collection of arrears only. Do not check this if you are also requesting enforcement of current support.
- Check **item 3E** "Change person/entity entitled to receive funds and enforce" to change the person or agency entitled to receive child support payments.

This action is used when the initiating agency asserts that the person/entity entitled to receive child support payments has changed from the person/entity designated in the existing support order due to a change in custody or foster care status. Some IV-D agencies have administrative authority to make the change; in other jurisdictions, a court action is required. The initiating agency should confer with the responding IV-D agency to determine what documentation or pleading is required for the responding jurisdiction to consider the requested action.

- Check **item 4** "Take the following action on a support order of another jurisdiction and forward payment to the initiating jurisdiction's SDU:" when the responding jurisdiction has not issued the support order that you are seeking to modify and/or enforce.
 - Check **item 4A** "Register and enforce" to register and enforce the support order.

Under section 507(b) of UIFSA, the support enforcement agency, without initially seeking to register the order under Article 6, shall consider and, if appropriate, use any administrative procedure authorized by the law in the responding state to enforce a support order or an income withholding order, or both.

DRAFT DOCUMENT

- Check **item 4B** "Register, modify, and enforce" to register, modify, and enforce the support order. Once the responding jurisdiction modifies the registered order, the responding jurisdiction's order controls and must be enforced.

Do not ask a responding state to modify the order of another state unless the following facts exist:

- *Neither the obligor, the individual obligee, nor the child(ren) resides in the state that issued the order; AND*
- *The individual seeking to register the order for modification does not reside in the responding state; AND*
- *The responding state has or may obtain personal jurisdiction over the non-registering party;*
OR
- *The responding state is the residence of the child, or the responding state has or may obtain personal jurisdiction over an individual party; AND*
All of the individual parties have filed consents in a record in the tribunal that issued the order for the tribunal in the responding state to modify the support order and assume continuing, exclusive jurisdiction.
OR
- *All of the individual parties reside in the responding state and the child does not reside in the state that issued the order.*

- Check **item 4C** to "Register, modify, and close the intergovernmental IV-D case" to register, modify, and then close the IV-D case because additional services are not needed. Do not check this box if you want the responding jurisdiction to also enforce the order.
- Check **item 4D** to "Register and enforce arrears only" to enforce the collection of arrears only. Do not check this if you are also requesting enforcement of current support.

Federal regulations allow case closure when the initiating agency has notified the responding agency that its intergovernmental services are no longer needed. An initiating agency must instruct the responding agency to close its interstate case and to stop any withholding order or notice before the initiating state transmits a withholding order or notice, with respect to the same case, to the same or another employer unless the two states reach an alternative agreement on how to proceed.

- Check **item 5** "Other" for an action that is not listed and describe the action requested.

Section II. Case Summary:

- **NOTE:** This is a summary document. Refer to the order for additional information.
- Enter:
 - Date of support order
 - State and county, tribe, or foreign country issuing order
 - Tribunal number
 - Support amount/frequency
 - Date of last payment
 - Total amount of arrears
 - Period of computation - enter the month, day, and year for both the beginning and ending dates.
- **NOTE:** For a breakdown of "Total amount of arrears," refer to the order and, if applicable, the Letter of Transmittal Requesting Registration.
- Check whether the order is for current support or arrears only.
- Check "Additional orders or information attached" if you are sending more than two orders or additional information to the responding jurisdiction.

Attach two copies of the order(s), including one certified copy, which you are asking the responding jurisdiction to enforce. Refer to the order for additional information such as effective dates, arrears payment amount, and frequency of payments.

This section allows a IV-D agency to include information about more than one order for current support. For example, there may be separate orders for different children involving the same obligor and obligee. The rarer situation will be multiple current support orders that may have been improperly entered. The initiating jurisdiction may use this section to provide information about the multiple orders. It should then check item 6 "Other" under Section I Action and request that the responding jurisdiction determine the validity of the orders.

This section allows a IV-D agency to include information about an arrears only order. For example, in some states, administrative orders for current child support are later superseded by a judicial order in the same state, such as a divorce decree, that does not recognize, incorporate, or modify the administrative order. While under state law the judicial order controls current support, arrears accrued under the superseded administrative order and not included in the judicial order remain collectible under the administrative order. This section also allows the IV-D agency to provide information about the enforceable arrears under the administrative order. It also allows a IV-D agency to provide information about a money judgment for arrears or an order that only addresses support for a prior period.

Section III. Obligee Information:

This section provides basic information about the obligee. Check the appropriate box to indicate if the obligee is the parent or caretaker. Provide the obligee's full legal name (first, middle, last, suffix). If the obligee is the caretaker, indicate the caretaker's relationship to the child(ren) (e.g., grandmother, cousin). Check "Has legal custody/guardianship of child(ren)" if the caretaker has legal custody/guardianship of the child(ren). Provide all other identifying information about the obligee on the Child Support Agency Confidential Information Form.

Section IV. Obligor Information:

This section provides basic information about the obligor. Provide the obligor's full legal name (first, middle, last, suffix). Provide all other identifying information about the obligor on the Child Support Agency Confidential Information Form.

Section V. Dependent Child(ren) Information:

List all child(ren) for whom support is owed or being sought. For each child, provide the child's full legal name (first, middle, last, suffix). Provide all other identifying information about the child(ren) on the Child Support Agency Confidential Information Form.

Section VI. Other Pertinent Information:

In this section, provide additional information that may be useful to the responding jurisdiction. If the information is related to a previous section, identify the section and item number. If additional space is needed, check "Continued on attached sheet(s), incorporated by reference."

Section VII. Attachments:

Check the appropriate box(es) to indicate all documents attached. For attachments other than those listed, check "Other attachments".

Section VIII. Contact Information:

At the bottom of page 2, provide a specific contact person's name, a direct telephone number (with extension if necessary), a fax number, and an e-mail address to expedite communication between jurisdictions.

Encryption Requirements:

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

The Paperwork Reduction Act of 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 0.17 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.