

Housing Authority of Hartsville
Post Office Drawer 1678
Hartsville, South Carolina 29551

Request for Child Support Information

Date: _____

To Whom It May Concern:

We are required to verify the income of all applicants, as well as residents, who participate in any of our federally subsidized programs. This information is required in order to determine a family's eligibility and rent and will be held in confidence.

Sincerely,

Housing Authority of Hartsville

I Hereby Authorize the Release of Information to the Housing Authority of Hartsville

Re: _____ SS# _____
_____ Case NBR: _____
_____ Absent Parent: _____

Please attach a copy of the Court Order for the Last Six (6) Months

Does Does Not
Receive Child Support Payments thru _____ Clerk of Court
Amount of Court Ordered Support: _____ Amount of Court Ordered Arrears: _____
Support Payments are made: Weekly Bi-Weekly Monthly Twice a Month
Date Support Payments Began _____ Date Last Support Payment made _____
Support Payments Goes Through DSS: Yes No

Signature of Court Official

Date