



**The  
Chickasaw Nation  
Department of Family Services  
Family Support Division  
Child Support Services**

P.O. Box 1809 / 1301 Hoppe Boulevard / Ada, OK 74821 / (866) 431-6419 / Fax (5801) 272-5512

**Bill Anoatubby  
Governor**

## **CHILD SUPPORT SERVICES AND RESPONSIBILITIES**

### **The Chickasaw Nation Department of Child Support Services (CSS) can help in:**

- Establishing paternity for a child;
- Genetic testing; (*note: cost may be applied*)
- Obtaining a support order from court for a child, including medical support;
- Locating the parent(s) of a child or the assets of the parent(s);
- Enforcing unpaid child support;
- Collecting child support payments;
- Reviewing and modifying support orders; and
- Helping with child support actions across state lines.

***No Application Fee's Applied!!***

### **Who is eligible for services?**

- Any Native American child(ren) and their families in need of services listed above.

***Commonly Asked Question? Can I open a case with the CSS even though I already have a case open with the Oklahoma Child Support Services?***

***Answer: YES! We will accept your application and/or referral no matter what the status, and will request the transfer of your case file to the CSS office for processing.***

### **Help us help you:**

- Be as complete as possible when you furnish information to CSS. The more information you provide, the faster we can help you.
- Keep us informed about updates or changes to both your and the absent parent's current home address, home phone number, work address and work phone number.

### **Other information:**

Send CSS copies of:

- Any order establishing paternity or granting a divorce; and/or
- All child support orders already entered by court; and/or
- All child support orders changing child support requirements or custody of the child(ren); and/or
- Copies of child(ren)'s birth certificate, CDIBs and Social Security cards.

### **You must understand:**

- CSS attorneys or other child support staffs do not represent you or the other party to your child support case.
- CSS ensures that all personal information provided to CSS shall remain confidential. No personal information will be shared between the custodial parent and non-custodial parent (NCP).
- CSS may give any necessary information to law enforcement officers, public officials, courts or others to help in the collection of child support or medical support.
- CSS cannot help with issues such as custody and property settlements.
- CSS will decide on the best way to collect child support.
- **If you receive any money to which you are not entitled, you must pay it back.**
- If you do not notify CSS of direct payments or turn in child support paid directly to you, your case will be closed.

- If the custodial parent received or is receiving TANF/AFDC from a tribe or state, money collected may be used to repay the amount of assistance currently being received and/or to amounts owed. Money collected from federal or state tax intercept will be applied to monies owed to the tribe or state first for funds expended. Tax intercepts may include refunds due to both the NCP and current spouse on joint returns, and may be held up to six months.
- When opening a case with CSS, any existing child support or medical support case with the state of Oklahoma will be closed.

**You must agree to:**

- Cooperate with CSS workers by providing information requested;
- Complete all forms and affidavits as requested,
- Provide CSS with all identifying information requested to help in locating and collecting child support from the NCP, and/or to prove who the biological father of the child(ren) is through genetic testing.
- Attend court to give testimony.
- Notify CSS of your new address, in writing, every time you move.
- Report to CSS immediately, in writing, any new or changed information that relates to collecting child support from the NCP.
- Report to CSS if you hire a private attorney to collect or modify child support or spousal support.

**If you have any questions please contact or visit our office.**

## **Child Support Services**

**1301 Hoppe Boulevard**

**Ada, OK 74820**

**Office Hours: Monday – Friday**

**8:00 a.m. to 5:00 p.m.**

**Phone: 580-436-3419**

**Statewide toll-free number: 1-866-431-3419**

**Fax: 580-272-5512**

<https://www.chickasaw.net/Services/Child-Support-Services.aspx>



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**REFERRAL INFORMATION SHEET**

**CUSTODIAL PARENT:**

First name	Middle	Last	Suffix	Maiden/alias
Social Security number	Birth date	Sex	Race	Tribal affiliation
<b>Mailing Address:</b>				
Mailing address	City	State	ZIP	
Home phone	Cell phone	Message phone		

**ABSENT PARENT #1:**

First name	Middle	Last	Suffix	Maiden/alias
Social Security number	Birth date	Sex	Race	Tribal affiliation
<b>Mailing Address:</b>				
Mailing address	City	State	ZIP	
Home phone	Cell phone	Message phone		
<b>Employment:</b>				
Employer's name	Phone number			
Mailing address	City	State	ZIP	
<b>Children of this absent parent:</b>				
Child(ren)'s name	Sex	Birth date	Social Security number	Relationship to custodial parent

**ABSENT PARENT #2 (if needed):**

\_\_\_\_\_  
First name                      Middle                      Last                      Suffix                      Maiden/alias

\_\_\_\_\_  
Social Security number      Birth date                      Sex                      Race                      Tribal affiliation

**Mailing Address:**

\_\_\_\_\_  
Mailing address                      City                      State                      ZIP

\_\_\_\_\_  
Home phone                      Cell phone                      Message phone

**Employment:**

\_\_\_\_\_  
Employer's name                      Phone number

\_\_\_\_\_  
Mailing address                      City                      State                      ZIP

**Children of this absent parent:**

Child(ren)'s name	Sex	Birth date	Social Security number	Relationship to custodial parent

**LEGAL STATUS INFORMATION:**

**What was the relationship between the mother and father of the child(ren)?**

- Never married     Lived together     Married/living apart     Divorced

**Do you have any pending or completed court orders?**  YES     NO

**If you answered yes, please complete the following:**

\_\_\_\_\_  
Date of order                      City                      County or tribe                      State

Child support ordered?  YES     NO    How much? \_\_\_\_\_    How often? \_\_\_\_\_

**STATEMENT OF UNDERSTANDING:**

I understand that a referral is being made to CSS to secure medical and financial support for my child(ren). I understand that by signing below, I am authorizing CSS to open a child support case or authorizing the transfer of my existing child support case from the state of Oklahoma Child Support Services (OCSS) and any action taken by OCSS to be dismissed and closed.

I understand that CSS is here to act in the public interest to protect children's rights, protect the taxpayers and the tribe, and to make sure that the parents financially and medically support their children. I understand that CSS attorneys or child support staff do not represent me. I understand that the responsibilities of the child support program do not allow the staff of CSS to have the same confidential relationship with me as I would have with a private attorney. Information I provide will be kept from the general public but may be used as needed to collect financial or medical support from either parent.

I have read and understand the statement of understanding. I certify that the above information provided is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

**OFFICE USE ONLY:**

Child support responsibilities explained and given to client?  YES  NO

Referral completed?  YES  NO

**Is there additional information that may help child support services?**