

Affidavit of Child Support Payment History

State of

County of

I, (Affiant Name):

Address:

Being duly sworn, state that the following is a true and correct record of all child support payments made as set forth below:

Date of Payment	Amount Paid	Payment Method	Recipient	Notes

Other Relevant Information (if any):

I affirm that the above information is complete, true, and correct to the best of my knowledge and belief.

Signature of Affiant
Date: _____

Notary Public:

My Commission Expires:
