

PAYEE AFFIDAVIT FOR NON-MONETARY RECEIPT

STATE OF _____)
 COUNTY OF _____)

COMES, now _____ (your name), and I hereby notify the court and the Nebraska Department of Health and Human Services Child Support Enforcement Unit that in case number CI _____:

Please Check and Complete Section A for Direct Payments and/or Section B to Waive or Credit Payments.

_____ **A. I wish to acknowledge direct payments (money received by you):**

<u>Type of Support (one per line):</u> <u>Child/Spousal/Medical</u>	<u>Judgment No.</u> <u>(clerks use)</u>	<u>Date of Payment</u> <u>(mo/day/yr)</u>	<u>Amount of</u> <u>Payment</u>
1. _____	_____	___/___/___	\$ _____
2. _____	_____	___/___/___	\$ _____
3. _____	_____	___/___/___	\$ _____

Any payments that you receive which are in excess of the amount owed to you may be considered a gift and may not be credited to the support due. (Excess payments are allocated at the discretion of the court)

_____ **B. I wish to waive/credit the following amounts (no actual cash received):**

<u>Type of support (one per line):</u> <u>Child/Spousal/Medical</u>	<u>Judgment No.</u> <u>(clerks use)</u>	<u>Date of Credit</u> <u>(mo/day/yr)</u>	<u>Amt of Credit or</u> <u>All</u>	<u>Check to</u> <u>waive</u> <u>All Interest</u>
1. _____	_____	___/___/___	\$ _____	_____
2. _____	_____	___/___/___	\$ _____	_____

3. _____ /_____/_____ \$ _____

If a portion of the support funds you are waiving or crediting (forgiving) are due to the State of Nebraska as a result of you or the dependents in the above court case receiving ADC/foster care funds, please be advised that you may not waive or credit (forgive) any of these funds due to the State. Only the State of Nebraska has the authority to waive or credit (forgive) support funds due to the State.

The Clerk of the District Court and the Nebraska Department of Health and Human Services Child Support Enforcement Unit accept no responsibility for the contents of this receipt. If you have any questions about signing this form please contact your attorney. If you have any questions regarding debt owed to the State of Nebraska, please call Child Support Customer Service at 1-877-631-9973.