



SHERRI BEVAN WALSH

Prosecuting Attorney

County of Summit
CHILD SUPPORT ENFORCEMENT AGENCY
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(330) 643-2765 .1-800- 726-2765 .Fax (330) 643-2745

THIRD PARTY CONFIDENTIAL

I, _____, allow _____
(CP or AP) (Name of Third Party)

Third Party access to my account and my permission to consult with Child Support Enforcement Personnel regarding my account number:
_____.

Relationship of the Third Party to the CP/AP: _____

Third Party Address: _____
(Street) (City) (State) (Zip)

Phone Number of Third Party: _____

Third Party access from: ___/___/___ To: ___/___/___
Mo Day Yr Mo Day Yr

Signature of requesting party Date: ___/___/___
Mo Day Yr

Pursuant to ORC 1347.08, Information maintained by the Child Support Enforcement Agency, of which a person is a subject, may be inspected by an authorized person. "Authorized person" means the subject, the subject's legal guardian, the subject's attorney of record in a currently pending matter or any other person who has written permission by the subject or subject's legal guardian.