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ATTORNEY FOR (Name):			
SUPERIOR COURT OF CALIFORNIA, COUNTY O	F		
STREET ADDRESS: MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
PETITIONER/PLAINTIFF:			
RESPONDENT/DEFENDANT:			
APPLICATION FOR DISBURSEMENT AND FROM CHILD SUPPORT SEC		CASE NUMBER:	
APPLICATION FOR DISBURS	SEMENT FROM C	HILD SUPPORT SECURITY DEP	POSIT
 The undersigned is entitled to receive child suppo The support is more than 10 days late, as follows: 		it has been established to secure pa	yment of the child suppo
Amount due as child support	Date due	Amount paid	Amount due
2. I request that the court order disbursement of the a declare under penalty of perjury under the laws of the			
2. I request that the court order disbursement of the a declare under penalty of perjury under the laws of the Date:		that the foregoing is true and correct	
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2. I request that the court order disbursement of the a declare under penalty of perjury under the laws of the Date: (TYPE OR PRINT NAME) <i>A copy of this application must be served on the ob</i>	he State of California	that the foregoing is true and correct (SIGNATURE) service attached to the original that is	t filed with the court.
2. I request that the court order disbursement of the a declare under penalty of perjury under the laws of the Date: (TYPE OR PRINT NAME) A copy of this application must be served on the ob ORDER FOR DISBURSEMENT FROM CHILD	he State of California	that the foregoing is true and correct (SIGNATURE) service attached to the original that is	i filed with the court.
2. I request that the court order disbursement of the a declare under penalty of perjury under the laws of the Date: (TYPE OR PRINT NAME) A copy of this application must be served on the ob ORDER FOR DISBURSEMENT FROM CHILD 3. The following financial institution (name): must pay the following amount: \$ support (name):	he State of California	that the foregoing is true and correct (SIGNATURE) service attached to the original that is RITY DEPOSIT AND ORDER TO	<i>filed with the court.</i> REPLENISH FUND eive payment of child
 2. I request that the court order disbursement of the a declare under penalty of perjury under the laws of the Date: (TYPE OR PRINT NAME) A copy of this application must be served on the ob ORDER FOR DISBURSEMENT FROM CHILD 3. The following financial institution (name): must pay the following amount: \$ support (name): 4. The obligor (name): 	he State of California	(SIGNATURE) (SIGNATURE) service attached to the original that is RITY DEPOSIT AND ORDER TO pollowing person who is entitled to rec must replenish the child s ot later than (date):	e filed with the court. PREPLENISH FUND eive payment of child upport security deposit
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TELEPHONE NO .:

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and address):

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