



RHODE ISLAND DEPARTMENT OF HUMAN SERVICES  
**OFFICE OF CHILD SUPPORT SERVICES**

77 DORRANCE STREET, PROVIDENCE, RI 02903

[HTTPS://OCSS.RI.GOV](https://ocss.ri.gov) • (401) 458 - 4400

**AFFIDAVIT OF DIRECT PAYMENTS**

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FC DOCKET No.: \_\_\_\_\_

I, \_\_\_\_\_, DO HEREBY DEPOSE AND STATE  
UNDER OATH, THAT I RECEIVED THE SUM OF \$ \_\_\_\_\_ DIRECTLY  
FROM \_\_\_\_\_, SOCIAL SECURITY No.,  
\_\_\_\_\_ AND RETAINED THE MONEY.

ACCORDINGLY, THE PLAINTIFF / DEFENDANT'S ACCOUNT SHOULD BE CREDITED BY THIS AMOUNT.

\_\_\_\_\_  
*SIGNED*

\_\_\_\_\_  
*DATED*

**NOTARY**

SUBSCRIBED AND SWORN TO BEFORE ME ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, IN  
THE YEAR \_\_\_\_\_, IN THE CITY/TOWN OF \_\_\_\_\_ IN  
THE STATE OF \_\_\_\_\_.

\_\_\_\_\_  
*SIGNATURE NOTARY PUBLIC*

\_\_\_\_\_  
*NOTARY PUBLIC COMMISSION EXPIRES*