

TIPPECANOE COUNTY CLERK'S OFFICE  
Request for Child Support Printouts

Case Number: \_\_\_\_\_

Person Requesting First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Time Period From: \_\_\_\_\_ To: \_\_\_\_\_

Best Time and Way to Contact You: \_\_\_\_\_

Comments: \_\_\_\_\_

Once your record is located, we will contact you to determine how you would like to obtain it and provide payment. Thank you!

Govt Agency Request:

Fees:	Certified Record	\$2.00 / document
	Faxed Document	\$2.00 / page
	Mailed Document	\$2.00 / document
	Court Record	\$1.00 / page
	Child Support Printout	\$1.00 / page