



DEPARTMENT OF JOB AND FAMILY SERVICES

Child Support at the Job Center
1111 South Edwin C. Moses Blvd.
P.O. Box 8744
Dayton, Ohio 45422

937-225-4600 - phone
800-555-0430 - toll free
937-496-7461 - fax
www.mcoho.org

COUNTY COMMISSIONERS
Judy Dodge
Carolyn Rice
Deborah A. Lieberman

COUNTY ADMINISTRATOR
Michael Colbert

ASSISTANT COUNTY ADMINISTRATOR
DEPARTMENT DIRECTOR
Michelle Niedermier

**INFORMED AND EXPRESS CONSENT
TO RELEASE/RECEIVE INFORMATION**

SETS Case Number: _____

I, _____, obligor/obligee in the above

referenced case, give _____,
(full name)

_____ full authority to receive and/or provide information
(relationship)

pertaining to the child support and/or spousal support case. This person has a need to know and authorization to view and have access to Federal Tax Information (FTI).

THIS INFORMATION AND EXPRESS CONSENT TO RELEASE/RECEIVE INFORMATION WILL REMAIN IN EFFECT FOR ONE (1) CALENDAR YEAR FROM THE DATE SIGNED.

(PRINT NAME)

(SIGNATURE)

(DATE)

OAC Rule 5101:1-29-071
SEA #54 (Rev 11/16/16)