

(800)_____

Obligor's SSN: _____

Case No. _____

Obligee: _____

Order No. _____

**REQUEST FOR COLLECTION OF A CHILD
SUPPORT OVERPAYMENT**

I hereby request the child support overpayment on the support order listed above be collected through an Ohio income tax refund offset. I understand that a child support overpayment must meet the following criteria before the debtor is submitted for tax offset.

1. All current child support orders in the case must have been terminated by a court or administrative order(s), and
2. The court or administrative termination order has established the obligee received a child support overpayment, and
3. The obligee must owe \$150 or more in overpaid child support.

The CSEA will notify me of its decision on this request for collection within 30 days from the date a completed, signed, and dated JFS 01854 request form is received by the CSEA.

Obligor's Signature

Date of Signature

Telephone Number (daytime)

For Agency Use Only

The _____ County CSEA has verified that a child support overpayment in the amount of \$_____ exists and meets all the submission criteria for Ohio income tax refund offset. The CSEA hereby requests ODJFS to submit the following debtor for Ohio income tax refund offset.

Name of Obligee: _____

Obligee's SSN: _____

County CSEA

Date