CHILD SUPPORT LOCATE REQUEST – U	Jse CSENet if an agreement is in	place	
THIS FORM CONTAINS SENSITIVE INFORMA ACCESS FILE	ATION – DO NOT FILE THIS FORM IN	N A PUBLIC	
The information on this form may be disclosed a	as authorized by law.		
If you are not the intended recipient, you are her copying of this form or its contents is strictly prol		distribution, or	
To: (Central Registry or Agency Name and Address) WISCONSIN LOCATE SERVICES WI CENTRAL REGISTRY PO BOX 50000 MADISON, WI 53555 (123) 456-7890 (123) 456-7899			File Stamp
From: (Agency Name and Address) WENDY WORKER INGHAM COUNTY FRIEND OF THE COURT 1234 W MAIN ST LANSING, MI 48999	Requesting Locator Code: Requesting IV-D Case Identifier:		State <u>MI</u>
NOTE: [] This form sent through EDE [] This request or information sent through	CSENet		
Section I. Locate: You may only seek to locate an individual with re support plan.			
[X] Parent who owes or may owe support	[] Parent who is owed support		Caretaker who is owed support
Legal name (first, middle, last, suffix): [] Possibly Dangerous JOHN MICHAEL SMITH SR		SSN: 222-33-4444	
Alias: JOHN M SMITH		Date of birth (or approximate year):	
Maiden name:		02-02-1982	
Section II. Other Pertinent Information:			
Section IV. Contact Information:			
December 20, 2017 WENDY WORK	(ER	(517) 555-1	234
	act person (first, middle, last, suffix)	· · · ·	ephone number and extension
Fax: <u>(517) 555-1235</u>	E-mail: <u>WENDY.WORKER@INGHAM.MI.CO.GOV</u>		
Encryption Requirements:			

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to e-mails, may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).