

FORM OCSS-34: CHILD SUPPORT SERVICES PROGRAM QUARTERLY COLLECTION REPORT
PART 1: COLLECTIONS RECEIVED, DISTRIBUTED and UNDISTRIBUTED

State/Tribe:	Quarter Ended:	Mark Box: Initial Report <input type="checkbox"/> Revised Report <input type="checkbox"/>
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SECTION A. AVAILABLE COLLECTIONS **(G) Total**

1. Balance Remaining Undistributed at End of Last Quarter (Carried from Line 9b, Part 1 of Previous Quarter)		\$								
2. Collections Received During the Quarter		\$								
2a. From Offset of Federal Tax Refund		\$								
2b. From Offset of State Tax Refund		\$								
2c. From Offset of Unemployment Comp ...		\$								
2d. Through Administrative Enforcement		\$								
2e. From IV-D & Non-IV-D Income Withholding		\$								
2f. From Other States or Tribes ..		\$								
2g. From Other Countries		\$								
2h. From Other Sources		\$								
3. Net Amount of Increasing and (Decreasing) Adjustments		\$								
4. Collections Sent During the Quarter Outside the Reporting State's IV-D Program		\$								
	<table border="1" style="width:100%; border-collapse: collapse; font-size: small;"> <tr> <th style="width:12.5%;">(A) Current IV-A Assistance</th> <th style="width:12.5%;">(B) Current IV-E Assistance</th> <th style="width:12.5%;">(C) Former IV-A Assistance</th> <th style="width:12.5%;">(D) Former IV-E Assistance</th> <th style="width:12.5%;">(E) Medicaid Never Assist.</th> <th style="width:12.5%;">(F) Other Never Assistance</th> <th style="width:12.5%;"></th> <th style="width:12.5%;">(G) Total</th> </tr> </table>	(A) Current IV-A Assistance	(B) Current IV-E Assistance	(C) Former IV-A Assistance	(D) Former IV-E Assistance	(E) Medicaid Never Assist.	(F) Other Never Assistance		(G) Total	
(A) Current IV-A Assistance	(B) Current IV-E Assistance	(C) Former IV-A Assistance	(D) Former IV-E Assistance	(E) Medicaid Never Assist.	(F) Other Never Assistance		(G) Total			
4a Sent to Non IV-D Families		\$								
4b. Sent to Other States or Tribes		\$								
4c. Sent to Other Countries		\$								
5. (Reserved)										
6. Remaining Collections Available for Distribution		\$								

SECTION B. DISTRIBUTED / UNDISTRIBUTED COLLECTIONS **(G) Total**

7a. Collections Passed Through		\$
7b. Dist As Assistance Reimbursement		\$
7c. Dist As Medical Support		\$
7d. Distributed To Family or FC		\$
7e. Fees Withheld by State		\$
8. Total Distributed		\$
9. Gross Undistributed Collections		\$
9a. Undistributed Collections Determined Undistributable and Abandoned		\$
9b. Net Undistributed Collections (Report on Line 1, Part 2) (Carry forward to Line 1, Part 1, Next Quarter)		\$

SECTION C. FEDERAL SHARE / FEES **(G) Total**

10a. Fed Share of IV-E Collect		\$
10b. Fed Share of IV-A Collect		\$
11. Fees Retained by Other States		\$

This certifies that the information on this form is accurate and true to the best of my knowledge and belief.

Signature, IV-D Agency Director	Signature, Approving Official
Date:	Date:
Typed Name, Title, Agency	Typed Name, Title, Agency

FORM OCSS-34: CHILD SUPPORT SERVICES PROGRAM QUARTERLY COLLECTION REPORT
PART 2: ITEMIZED UNDISTRIBUTED COLLECTIONS

(Completion Optional for Tribes)

<i>State/Tribe:</i>	<i>Quarter Ended:</i>	<i>Mark Box:</i>
		Initial Report <input type="checkbox"/> Revised Report <input type="checkbox"/>

1 Net Undistributed Collections - (from Line 9b, Part 1, of this report) (Also equal to the sum of Lines 2 and 8 and the sum of Lines 14 through 20, below.)	\$
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SECTION A: NET UNDISTRIBUTED COLLECTIONS BY CATEGORY

2 Portion of Net Undistributed Collections Pending Distribution The amount in Item 2 must equal the sum of the amounts in Items 3 through 7. Attach any explanatory comments.	\$
3 Collections Received Within The Past Two Business Days	\$
4 Collections From Tax Offsets Being Held for Up To Six Months	\$
5 Collections Received and Being Held for Future Support	\$
6 Collections Being Held Pending the Resolution of Legal Disputes	\$
7 Collections Being Held Pending Transfer to Other State or Federal Agency	\$

8 Portion of Net Undistributed Collections Unresolved The amount in Item 8 must equal the sum of the amounts in Items 9 through 13. Attach any explanatory comments.	\$
9 Unidentified Collections	\$
10 Collections Being Held Pending the Location of the Custodial or Non-Custodial Parent	\$
11 Collections Disbursed but Uncashed and Stale-Dated	\$
12 Collections With Inaccurate or Missing Information	\$
13 Other Collections Remaining Undistributed.....	\$

SECTION B: NET UNDISTRIBUTED COLLECTIONS BY AGE

14 Collections Remaining Undistributed Up to 2 Business Days of Receipt.....	\$
15 Collections Remaining Undistributed More Than 2 Days, But Not More Than 30 Days.....	\$
16 Collections Remaining Undistributed More Than 30 Days, But Not More Than 6 Months.....	\$
17 Collections Remaining Undistributed More Than 6 Months, But Not More Than 1 Year.....	\$
18 Collections Remaining Undistributed More Than 1 Year, But Not More Than 3 Years.....	\$
19 Collections Remaining Undistributed More Than 3 Years, But Not More Than 5 Years.....	\$
20 Collections Remaining Undistributed More Than 5 Years.....	\$