

**TUSCARAWAS COUNTY CSEA  
COUNTER INFORMATION SHEET**

**DATE:** \_\_\_\_\_

**FIRST NAME:** \_\_\_\_\_ **MIDDLE:** \_\_\_\_\_ **LAST:** \_\_\_\_\_

- NEW ADDRESS
- CHANGE OF EMPLOYMENT
- OTHER

**CASE NUMBER:** \_\_\_\_\_

**SETS NUMBER:** \_\_\_\_\_

**OTHER PARENT:** \_\_\_\_\_

**ADDRESS**

**STREET:** \_\_\_\_\_

**P.O. BOX:** \_\_\_\_\_

**CITY, STATE, ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**SS#:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**DRIVER'S LICENSE #:** \_\_\_\_\_

**EMPLOYER INFO**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY, STATE, ZIP:** \_\_\_\_\_

**ADDRESS**

**STREET:** \_\_\_\_\_

**P.O. BOX:** \_\_\_\_\_

**CITY, STATE, ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**SS#:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**DRIVER'S LICENSE#:** \_\_\_\_\_

**EMPLOYER INFO**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY, STATE, ZIP:** \_\_\_\_\_

**COMMENTS:**