# 2016-2017 Attestation of Child Support Paid by an Independent Student

**Student Name:** __________________________

**Student ID Number:** ________________________

### Child Support Paid Information

Please provide information regarding child support paid by you or your spouse in calendar year 2015. Please include:

- the name of the person who paid the child support,
- the name of the person to whom the child support was paid,
- the names and ages of the children for whom child support was paid, and
- the total annual amount of child support that was paid in calendar year 2015 for each child.

**Note:** Do not include child support paid for children included in your household on the FAFSA

<table>
<thead>
<tr>
<th>Name of Person Who Paid Child Support</th>
<th>Name of Person to Whom Child Support Was Paid</th>
<th>Name and Age of Child for Whom Support Was Paid</th>
<th>Amount of Child Support Paid in 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marty Jones (example)</td>
<td>Chris Smith</td>
<td>Terry Jones - 14</td>
<td>$6,000.00</td>
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Total Amount of Child Support Paid in 2015 $

### Attestation and Signature (Required)

By signing below, I certify that all of the information reported on this form is complete and accurate. Warning: If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.

Additionally, if asked by Washington University, I will provide documentation of the payment of child support in calendar year 2015.

____________________________________  ______________________
Student’s Signature                    Date

**Please return this form to Student Financial Services**

Washington University in St. Louis, Campus Box 1041, One Brookings Drive, St. Louis, Missouri 63130-4899
(314) 935-5900, (888) 547-6670, Fax: (314) 935-4037, Email: financial@wustl.edu, Website: sfs.wustl.edu