Indiana State Central Collection Unit (INSCCU)
Child Support Remittance Form

PLEASE PRINT (complete first and last name)

Payor

Address

City, State Zip

Telephone

Payment Amount

Payor Social Security# (Last 4 Digits)

ISETS Case #
(no spaces or dashes)

Court Cause Number

Custodial Party Name

If one check or money order is submitted for multiple cases, a separate form is required for each case.
This form can be found at childsupport.in.gov

Mail Payments to: **INSCCU**
P.O. Box 6219
Indianapolis, IN 46206-6219

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