



Please Remit to Illinois Child Support Services
ILSDU
PO Box 5400
Carol Stream, Illinois 60197

PAYOR NAME: _____

AMOUNT: \$ _____

REMITTANCE IDENTIFIER (DOCKET): _____

ISSUING COUNTY and/or FIPS: _____

SOCIAL SECURITY NUMBER: xxx-xx- _____

HFS 2572A (N-6-18)



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3 Easy Steps to Making Your Payment

If you do not know your Remittance Identifier or Case Information Please Call Customer Service

Complete the Remittance Slip

Make the payment Payable to ILSDU

Mail Payments to:
ILSDU
P.O. Box 5400
Carol Stream, IL
60197-5400

1-877-225-7077

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