Date: [Insert Date]

To: [Recipient Name/Agency Name]
Address: [Recipient Address]
City, State, Zip: [City, State, Zip Code]

Subject: Verification of Voluntary Child Support Payments

To Whom It May Concern,

I, [Payer Name], am writing this letter to formally verify that I provide voluntary financial support for my child(ren) listed below:

- [Child Name 1], [Date of Birth]
- [Child Name 2], [Date of Birth]

These payments are made voluntarily and are not currently managed through a formal court order or a state enforcement agency. I pay the amount of $[Amount] per [Week/Month] directly to [Recipient Parent Name].

The total amount paid during the period of [Start Date] to [End Date] was $[Total Amount]. These funds are intended for the care, maintenance, and well-being of the child(ren).

I have attached [receipts/bank statements/canceled checks] as evidence of these payments. If you require any further information or documentation, please contact me at [Phone Number] or [Email Address].

Sincerely,

[Payer Signature]
[Payer Printed Name]
[Payer Address]

Acknowledgment from Receiving Parent:

I, [Recipient Parent Name], confirm that I receive the voluntary child support payments described above.

[Recipient Signature]
[Date]