

**Taoyuan Branch, Administrative Enforcement Agency, Ministry of Justice**  
**Case Transfer Form**

<b>Name</b>		<b>ID Number</b>		<b>Birthday</b>	<b>D M Y</b>
<b>Sex</b>	<input type="checkbox"/> M <input type="checkbox"/> F	<b>Occupation</b>		<b>Marriage</b>	<input type="checkbox"/> Married <input type="checkbox"/> Single
<b>Primary address</b>				<b>Home phone</b>	
<b>House address</b>				<b>Cell phone</b>	

**Personal information**

■Family status :

■Issues :

■Purposes

- Financial aid Employment aid Family issue Health aid  
School aid Disability child in household Lawsuit  
Others (be specific) :

**Taoyuan Social Affairs Bureau**

Enforcement clerk :

Enforcement officer :

Contact number :

Fax number :

**【Please make a copy and keep it in the secretariat】**

-----Case Transfer Reply Form-----

Department :

Family service center:

※Taoyuan city social affairs bureau-TEL : 3392-336 ; FAX : 335-2354 ◦	
※Please reply within 2 weeks.                      Date : ___ D___M___Y	
<b>Status</b>	<b>1.Document was received on ___D___M___Y</b> <b>2.Status :</b> <input type="checkbox"/> Case accepted , primary officer : _____ <b>Contact number : _____ ◦</b> <input type="checkbox"/> Transfer to other department, and the case will be transfer to : <input type="checkbox"/> Does not need the service. Reasons : <input type="checkbox"/> 3.Others _____

Officer :

Supervisor :