



The State of California offers Electronic Pay Card or Direct Deposit as smart options to receive your child support payments.

By selecting one of these smart options, receiving your payments can be faster, easier, and more secure.

Electronic Pay Card



The Electronic Pay Card is a prepaid debit card, with funds limited to the amount of your payments. The payments go directly to your card account and the card can be used like cash.

- No credit qualifications. This card is not a credit card. It's funded with your child support payments.
- Avoid the hassle of trying to get a check cashed. No more standing in long lines to cash your check.
- More secure than carrying cash.

Direct Deposit



Offers the convenience to directly deposit your payments to your savings or checking account.

- No fees.
- Avoid the hassle of trying to get a check cashed. No more standing in long lines to cash your check.
- More secure than carrying cash.

To enroll, please complete and sign the application on the reverse side for Electronic Pay Card or Direct Deposit. For more enrollment information, please contact us at 1-866-901-3212.

Fee Schedule for Electronic Pay Card

Fee Table			
Deposit Notification * – Email, phone or text message	Free	Web-based account access	Unlimited free
Low balance alert * – Email, phone or text message	Free	Account Inactivity Fee – After 14 months of inactivity	\$1.25 each month
Purchases at Point-of-Sale (POS) locations (PIN or signature)	Unlimited free	Automated Customer Service – Three (3) free calls each month	\$0.50 each thereafter
Cash back with purchase	Unlimited free	Mailed Paper Statement – Request to be mailed	\$0.75 each request
ATM cash withdrawal ONLY at Wells Fargo – Four (4) free each month	\$1.75 each thereafter	Card Replacement – Initial Card Issuance free – One (1) free replacement card each calendar year	\$5.00 for any additional requests
ATM cash withdrawals at ATMs other than Wells Fargo Bank ATMs	\$1.75 each	Express card delivery – Two-day deliver; business days only	\$20.00
ATM balance inquiry	\$0.60 each	International ATM withdrawal fee	\$1.75 each
ATM decline for insufficient funds – One (1) free each month at any ATM	\$0.60 each thereafter	International transaction fee – Added to both ATM and POS transactions each time	3% of US dollar amount of transaction
Bank teller cash withdrawal – Two (2) free each month	\$5.00 each thereafter	Live Customer Service (outside the US)	Unlimited Free

* Your carrier may charge you a fee for phone or text message delivery depending upon your cellular service plan.

Debit MasterCard® Card or Direct Deposit

Enrollment / Authorization Form



California Department of
Child Support Services

PO Box 981326
West Sacramento, CA 95798-1326

Complete all the information below and mail to: California Department of Child Support Services, P.O. Box 981326, West Sacramento, CA 95798-1326 (for Direct Deposit include a copy of a voided check or encoded deposit slip).

NAME (LAST, FIRST, AND MIDDLE INITIAL)

DATE OF BIRTH (MONTH / DAY / YEAR)

SOCIAL SECURITY NUMBER

Address (Please make sure this is your current address)

If this is an address change, please check box.

Address 1 — Street Address

Address 2 — P.O. Box Number or Apartment Number

City

State

Zip Code

Country

Home / Cell Phone Number (Please include Area Code)

Alternate Phone Number (Please include Area Code)

Email Address

Please indicate your choice by checking the appropriate box.

California Debit Card **OR** Direct Deposit

Child Support Participant Number (if available)

Bank Information (for Direct Deposit Only)*

New Enrollment Bank Change

Name of Financial Institution (Bank or Credit Union)

Address

City

State

Zip

Bank Telephone Number ()

Account Information

Checking Savings

Account Number

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Routing Transit Number

(the 9-digit number on the bottom of your check or your deposit slip)

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* If you are enrolling for direct deposit, please insert a voided check or encoded deposit slip in the pocket of this form.



The California Debit MasterCard is issued by Wells Fargo Bank, N.A. pursuant to a license by MasterCard International Incorporated. MasterCard and the MasterCard Brand Mark are registered trademarks of MasterCard International Incorporated.

Please sign and date the appropriate authorization section below to complete the application.

California Debit MasterCard® Enrollment Authorization

By signing this form, I authorize the California State Disbursement Unit (State Agency) to share with Wells Fargo Bank, N.A. all of the information I provide on this application. The State Agency will share this information with the Bank for the purpose of establishing a State of California Electronic Pay Card for me at the Bank and to process my child support payments to the Bank. I authorize the State Agency to deposit my child support payments to this card. This action cancels and replaces any direct-deposit agreement I currently have in place with the State Agency. Upon authorization of my account with the Bank, I agree to be bound by the Cardholder Agreement that I will receive with my card.

Signature

Date

Direct Deposit Enrollment Authorization

By signing this form, I understand I am giving the California State Disbursement Unit (SDU) permission to deposit payments directly into the checking or savings account I have listed above. I have verified that the bank routing number and my account number are accurate. I understand that if I have not provided accurate bank routing and account numbers, the SDU and the California Department of Child Support Services are not liable for any mistake resulting from inaccurate account numbers. I assume responsibility to verify deposits to my account on a timely basis and understand that the SDU is not responsible for any bank fees that my financial institution may charge. This authorization is to remain in full force and effect until I cancel it by completing another Direct Deposit Authorization or I contact the California State Disbursement Unit at 1-866-901-3212. I understand that the SDU can cancel my participation in the direct deposit program, if necessary, without my written permission.

Signature

Date