



## DEBIT CARD AUTHORIZATION

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Social Security Number: \_\_\_\_\_

Case Number: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

I request that the Division of Child Support Enforcement issue to me a Debit Card for the distribution of my child support payments.

I request that the Division of Child Support Enforcement cancel my Debit Card. I understand that I must apply for Direct Deposit.

I request that the Division of Child Support Enforcement cancel my Debit Card. I am closing my case.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Payments will start loading to your EPPICard 30-45 days after we receive your request. Funds will be available, in most instances, for use within 2 business days after DCSE applies the payment to your case. If you have questions, please contact the Division's Customer Service Center at 1-800-468-8894.

### Send this completed form to:

**Virginia Division of Child Support Enforcement/SDU**

**Attn: EFT Disbursement Unit**

**P.O. Box 586**

**Richmond VA 23218-0856**

**OR**

**Fax to: 804-726-7955**

NOTICE: Federal law requires all people subject to child support orders to provide their social security numbers. We take your privacy very seriously. Social security numbers are kept in the case records and are only used to locate parents to establish paternity and establish, modify, and enforce support obligations.