

## STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES DIVISION OF CHILD SUPPORT (DCS)

## **Direct Deposit Authorization**

TO:			CASE NUMBER:		
			INDIVIDUAL NUMBER:		
☐ I want a DCS debit card ☐ I w	ant direct deposit to	mv bank accou	nt listed below.		
FIRST NAME		LAST NAME			
		DATE OF DIDTU	(MACAUTHUDAY/O/FAD)		
SOCIAL SECURITY NUMBER		DATEOFBIRTH	(MONTH/DAY/YEAR)		
MAILING ADDRESS			APT.#		
CITY			STATE ZIF	CODE	
HOME TELEPHONE NUMBER	DAYTIME TELEPHONE N	IUMBER	EMAIL ADDRESS (OPTIONAL)		
( )	( )				
☐ Update my address in the child support system to the address listed above.					
SIGNATURE (REQUIRED)			DATE		
Enter information below if you selected direct deposit to your bank account. Attach a voided check.					
BANK NAME		BANK BRANCH TELEPHONE NUMBER			
		( )			
BANK ROUTING NUMBER		BANK ACCOUNT	TNUMBER	☐ Checking	
				☐ Savings	
If you have questions about direct deposit or the DCS debit card, call 800-468-7422.					

Or Fax to: 360-664-5109

No person because of race, color, national origin, creed, religion, sex, age, or disability, shall be discriminated against in employment, services, or any aspect of the program's activities. This form is available in alternative formats upon request.

DIVISION OF CHILD SUPPORT

**EFT DISBURSEMENTS** 

OLYMPIA WA 98507-9010

PO BOX 9010

U.S. Bank ReliaCard® Pre-Acquisition Disclosure Program Name: Washington Division of Child Support

Reference Date: June 2017

Per purchase <b>\$0</b>	ATM withdrawal  \$0 in-network	Cash reload <b>N/A</b>	
	<b>\$0.99*</b> out-of-net		
ATM Balance Inquiry (in-network or out-of-network)		\$0	
Customer Service (automated or live agent)			
Inactivity			
er types of fees.	One of them is:		
Card Replacement (standard or expedited delivery)			
	e (automated or liv	e (automated or live agent)  er types of fees. One of them is:	

<sup>\*</sup> This fee can be lower depending on how and where this card is used. See the accompanying Fee Schedule for free ways to access your funds and balance information.

## No overdraft/credit feature.

Your funds are eligible for FDIC insurance.

For general information about prepaid accounts, visit *cfpb.gov/prepaid*. Find details and conditions for all fees and services inside the card package or call **1-866-363-4136** or visit usbankreliacard.com.

## U.S. Bank ReliaCard® Fee Schedule

Program Name: Washington Division of Child Support

Effective Date: May 2018

All fees	Amount	Details	
Get cash			
ATM Withdraw al (in netw ork)	\$0	This is our fee per withdraw al. "In-network" refers to the U.S. Bank or Money Pass® ATM networks. Locations can be found at <a href="mailto:usbank.com/locations">usbank.com/locations</a> or <a href="mailto:moneypass.com/atm-locator">moneypass.com/atm-locator</a> .	
ATM Withdraw al (out-of-netw ork)	\$0.99	This is our fee per w ithdraw al. This fee is w aived for your first 2 ATM w ithdraw als per ACH, w hich includes both ATM Withdraw als (out-of-netw ork) and International ATM Withdraw als. "Out-of-netw ork" refers to all the ATMs outside of the U.S. Bank or MoneyPass ATM netw orks. You may also be charged a fee by the ATM operator even if you do not complete a transaction.	
Teller Cash Withdraw al	\$0	This is our fee for when you withdraw cash off your card from a teller at a bank or credit union that accepts Visa <sup>®</sup> .	
Information	-		
ATM Balance Inquiry (in netw ork)	\$0	This is our fee per inquiry. "In-network" refers to the U.S. Bank or MoneyPass ATM networks. Locations can be found at <a href="mailto:usbank.com/locations">usbank.com/locations</a> or <a href="mailto:moneypass.com/atm-locator">moneypass.com/atm-locator</a> .	
ATM Balance Inquiry (out-of-network)	\$0	This is our fee per inquiry. "Out-of-network" refers to all the ATMs outside of the U.S. Bank or MoneyPass ATM networks. You may also be charged a fee by the ATM operator.	
Using your card outside	the U.S.		
International Transaction	2%	This is our fee which applies when you use your card for purchases at foreign merchants and for cash withdrawals from foreign ATMs and is a percentage of the transaction dollar amount, after any currency conversion. Some merchant and ATM transactions, even if you and/or the merchant or ATM are located in the United States, are considered foreign transactions under the applicable network rules, and we do not control how these merchants, ATMs and transactions are classified for this purpose.	
International ATM Withdraw al	\$2.50	This is our fee per withdrawal. This fee is waived for your first 2 ATM withdrawals per ACH, which includes both ATM Withdrawals (out-of-network) and International ATM Withdrawals. You may also be charged a fee by the ATM operator even if you do not complete a transaction.	
Other	-		
Card Replacement	\$0	This is our fee per card replacement mailed to you with standard delivery (up to 10 business days).	
Card Replacement Expedited Delivery	\$15.00	This is our fee for expedited delivery (up to 3 business days) charged in addition to any Card Replacement fee.	

Your funds are eligible for FDIC insurance. Your funds will be held at U.S. Bank National Association, an FDIC-insured institution, and are insured up to \$250,000 by the FDIC in the event U.S. Bank fails. See <code>fdic.gov/deposit/deposits/prepaid.html</code> for details.

No overdraft/credit feature.

Contact Cardholder Services by calling **1-866-363-4136**, by mail at P.O. Box 551617, Jacksonville, FL 32255 or visit *usbankreliacard.com*.

For general information about prepaid accounts, visit *cfpb.gov/prepaid*. If you have a complaint about a prepaid account, call the Consumer Financial Protection Bureau at 1-855-411-2372 or visit *cfpb.gov/complaint*.

The ReliaCard is issued by U.S. Bank National Association pursuant to a license from Visa U.S.A. Inc. ©2018 U.S. Bank. Member FDIC.