

Directions for Authorization for Automatic Withdrawal of Child Support Payments

Automatic Withdrawal of Child Support Payments Authorization:

Automatic Withdrawal is also known as electronic funds transfer (EFT). By signing the Automatic Withdrawal Authorization form, you authorize the New Mexico Child Support Enforcement Division (CSED) to withdraw your obligated child support payments directly from your account. When a payment is electronically withdrawn from your bank account, CSED applies the payment to your case and distributes the money in accordance with federal regulations. You may also sign up on-line after you get a user id and password on the New Mexico Child Support web site: <http://childsupport.hsd.state.nm.us/>

Requirements to Use This Payment Method:

- You must have a checking account at a bank or credit union
- You must have a child support case with NM CSED.
- You must complete a separate authorization form for each child support case with NM CSED you wish to have withdrawn from your checking account.
- **Your order must not have language that requires that your employer withhold child support payments every pay period.**

Information Needed to Enroll:

- A fully completed authorization must be submitted.
- Fill out all areas of the authorization. Do not leave any blanks.
- The authorization must be signed. (If you have a joint account, be sure both account holders must sign the authorization.)
- You must attach a blank check marked "void" to the authorization form.

Send the authorization form with the voided check attached to:

NM Child Support Enforcement Division
EFT Payments
PO Box 2348
Santa Fe, NM 87504

The Process:

- CSED will confirm your bank-related information. You will receive a letter confirming the beginning date and the amount of the deduction. It takes about 10 working days to set up the automatic withdrawal.

Stop or Change the Automatic Withdrawal:

- The automatic withdrawal will remain in effect until CSED is notified in writing by the account holder to terminate the authorization and **CSED has time to act on it**. The termination letter should be sent to the address listed above.
- When the automatic withdrawal is terminated, any child support payments must be sent to CSED by check or money order.
- If you change your bank, you, as the account holder, must notify CSED to terminate your authorization in writing to the address listed above. A new, fully completed, authorization form must be submitted if you wish to have your child support payments withdrawn directly from your new account.
- If your bank will not honor the CSED withdrawal, CSED will cancel your automatic withdrawal authorization and you must send your payments directly by check or money order or face enforcement action.

Payment Amounts to be Withdrawn:

- You may designate the amount to be withdrawn according to your payday frequency. Thus, if you are paid every two weeks or weekly, you may multiply your total monthly obligated amount (current support amount and the amount to be paid on arrears or judgment) by 12 (months of the year) and divide by 26 (for every two weeks) or 52 (weekly) to get the amount to be withdrawn.
- You may designate a larger amount to pay off an arrears or judgment more quickly.

**State of New Mexico
Human Services Department
Child Support Enforcement Division**

Automatic Withdrawal Authorization

The Child Support Enforcement Division is authorized to withdraw from the account listed below for the purposes of child support payments only:

Conditions: The authority to withdraw from the account will remain in effect until the Child Support Enforcement Division is notified in writing, by the account holder, to terminate the authorization. The amount to be withdrawn must equal the monthly obligation amount (over a period of 12 months).

The Child Support Enforcement Division reserves the right to cancel the authorization at any time.

New Update/Correct Stop

Non-Custodial Parent's Name		CSED Case ID:	
P.O. Box or Street Address:			
City	State	Zip Code	
Daytime Telephone Number:			
Financial Institution Name		Financial Institution Address	
Account Number	<input type="checkbox"/> Checking	Routing Number:	
Amount to be withdrawn:	Frequency: (Select One)		
<small>Amount must equal monthly obligated amount</small>	W (eekly)	B (I-weekly)	S (emi-weekly-twice a month) M (onthly)
Monthly (day 1) Semi-monthly (day 1&2) Withdrawal day 1 ___ / Withdrawal day 2 ___	Weekly/Bi-Weekly Day of Week: (Select one)		
	M (onday)	T (uesday)	W (ednesday) Th (ursday) F (riday)

I authorize the New Mexico Child Support Enforcement Division (CSED) to withdraw from the account listed above. I affirm that my child support order does not require my employer to withhold regular payments for child support. CSED may withdraw payments from this account until I cancel the authorization and CSED has time to act on it. CSED reserves the right to cancel the authorization at any time. If there are insufficient funds to withdraw from this account, this may be treated as a check returned for Insufficient Funds and I may be charged a fee. I understand that if the account listed above is a joint account, all holders of that account must authorize by signing below.

Account Holder's Signature	Date:
Account Holder's Signature (for joint accounts)	Date:

Please attach a voided check with the authorization form

NAME: LAST FIRST MEMBER ID: CASE ID: