

List of all fees for New Mexico Child Support Prepaid Card

All Fees	Amount	Details
Spend money		
Transactions at Point-of-Sale (POS) locations	\$0.00	No fee for Personal Identification Number (PIN) or signature based POS transactions in the U.S.
Get Cash		
ATM withdrawal (in-network)	\$1.50	You are allowed 4 in-network ATM withdrawals per calendar month for no fee. "In-network" refers to the Wells Fargo Bank ATM Network. Locations can be found at wellsfargo.com/locator/ .
ATM withdrawals (out-of-network)	\$1.50	This is our fee. "Out-of-network" refers to all ATMs outside of the Wells Fargo Bank ATM Network. You may also be charged a fee by the ATM operator, even if you do not complete a transaction.
Teller-assisted cash withdrawal (OTC)	\$5.00	You are allowed 4 teller-assisted withdrawals at Visa member bank or credit union teller windows per calendar month for no fee.
Information		
Customer service	\$0.50	Per call, for calling the Interactive Voice Response (IVR) automated line; no additional fee for transferring to a live customer service agent. You are allowed 4 customer service calls per calendar month for no fee.
Instant mobile balance inquiry text	\$0.10	You are allowed 1 instant mobile balance inquiry text per calendar month for no fee. You may be charged a fee by your mobile carrier or internet service provider.
Online access to card account	\$0.00	No fee for accessing account information at EPPICard.com .
Using your card outside the U.S.		
International ATM withdrawal	\$3.50	This is our fee. You may also be charged a fee by the ATM operator, even if you do not complete a transaction. International transaction fee also applies.
International transaction fee	2%	Of the U.S. dollar amount of any type of transaction, including ATM withdrawals. Transactions completed in U.S. Territories are not international transactions.
Other		
Card replacement	\$15.00	You are allowed one 1 card replacement per rolling 12 month period for no fee. Standard card delivery is 7 to 10 calendar days.
Expedited card delivery	\$15.00	If you request your replacement card to be expedited rather than receiving it by regular mail, you will be assessed the expedited card delivery fee, in addition to any applicable card replacement fee. Expedited card delivery is 3 to 5 calendar days.
Funds transfer via Interactive Voice Response (IVR-phone)	\$5.00	Each transfer from your prepaid debit card to your personal bank account will be assessed a fee.

Your funds are eligible for FDIC insurance and will be held at or transferred to Wells Fargo Bank N.A., an FDIC-insured institution. Once there, your funds are insured up to \$250,000 by the FDIC in the event Wells Fargo fails, if specific deposit insurance requirements are met. See fdic.gov/deposit/deposits/prepaid.html for details.

No overdraft/credit feature.

Contact EPPICard Customer Services by calling 1-866-898-2213, by mail at P.O. Box 245997, San Antonio, TX 78224-5998 or visit EPPICard.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.

New Mexico Child Support Prepaid Card issued by Wells Fargo

You have several options to receive your payments: direct deposit to your bank account; direct deposit to your own prepaid account; or this prepaid card. Tell the state agency which option you choose.

Monthly fee	Per purchase	ATM withdrawal	Cash reload
\$0	\$0	\$1.50* in-network \$1.50 out-of-network	N/A
ATM balance inquiry			\$0
Customer service			\$0.50* per call
Inactivity			\$0
We charge 6 other types of fees. Here are some of them:			
Card replacement (regular or expedited delivery)			\$15.00* or \$30.00*
Teller withdrawal			\$5.00*
<p>* This fee can be lower depending on how and where this card is used.</p> <p>No overdraft/credit feature. Your funds are eligible for FDIC insurance.</p> <p>For general information about prepaid accounts, visit cfpb.gov/prepaid. Find details and conditions for all fees and services in the card terms and conditions.</p>			

NEW MEXICO HSD-CSED PREPAID DEBIT CARD ENROLLMENT FORM
NEW MEXICO HSD-CSED UNA CUENTA DE TARJETA DE DEBITO PREPAGADA FORMA

Name (please print) _____
Nombre (por favor escriba en letra de imprenta) First – Primer Nombre Middle Initial – Inicial del Segundo Nombre Last – Apellido

Address _____ **Apt. #** _____
Dirección

City _____ **State** _____ **Zip Code** _____
Ciudad Estado Código postal

Phone Number () _____ **Date of Birth** _____ **Social Security Number (required)** _____
Número de teléfono Fecha de Nacimiento Ciudad Número del Seguro Social (requerida)

Child Support

Member Number (required) _____
Numero de Miembro de Pensión alimenticia para hijos (This is the 9 – digit Member Number located on your payment stub. Or contact the NM CSED at 1-800-283-4465)
Este es el número de miembro de 9 dígitos que se encuentra en su talón de pago. O póngase en contacto con el su NM CSED en el 1-800-283-4465

By signing this form, I authorize the New Mexico Child Support Enforcement Division (“State Agency”) to share information about me with Wells Fargo Bank, N.A. (“Bank”) for the purpose of establishing a Prepaid Debit Card account (“Prepaid Card”) that will be used by the State Agency for disbursement of my child support payments. I understand that the Prepaid Card is a voluntary disbursement option provided by the State Agency and will cancel and replace any direct deposit or check selections I have made previously. I acknowledge that the Prepaid Card is subject to certain terms, conditions and fees established by the Bank and agree to be bound by the terms of the State of New Mexico Prepaid Debit Card Deposit Agreement from Wells Fargo Bank that will be provided when I receive my Prepaid Card. I have received, read and understand the Schedule of Fees furnished with this enrollment brochure.

Al firmar esta formulario, autorizo a New Mexico Child Support Enforcement Division (“Agencia del Estado”) para a n sobre mi con Wells Fargo Bank, N.A. (“Banco”) con el objeto de establecer una cuenta de Tarjeta de Debito Prepagada (“Tarj utilizada por la Agencia del estado para el desembolso de mis pagos de pensión alimenticia para hijos. Entiendo que la Tarjeta Prepagada es una n de desembolso voluntaria proporcionada por la Agencia del Estado y que esta cancelará y reemplazará a cualquier selección de cheque o depósito directo que yo haya hecho previamente. Reconozco que la Tarjeta rminos, condiciones y cargos establecidos por el Banco y estoy de acuerdo en regirmerminos del n cuando yo reciba mi Tarjeta Prepagada. He reci do y comprendido la Lista de Cargos provista con este fon.

Signature (required) _____ **Date (required)** _____
Firma (requerida) Fecha (requerida)

Mail to:

NM State Disbursement Unit
PO Box 2348
Santa Fe, NM 87504

or fax to:

NM SDU at 505-476-3920