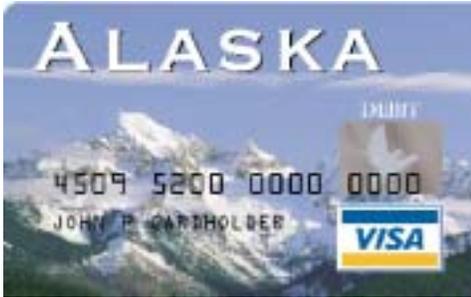


STATE OF ALASKA
Department of Revenue
Child Support Services Division

Only one form is needed even if you have multiple cases

Order your DPC Visa Debit Card today!
It's more convenient than a check. No approval required.



For more information,
Call the Alaska Child Support
Services Division at (907) 269-6750

Mail the Authorization Form to:
Child Support Services Division
550 W 7th Ave, Suite 310
Anchorage, AK 99501-6699

Phone: (907) 269-6900
Fax: (907) 269-6650

TTY: (907) 269-6894
TTY In-State Toll-Free 1-800-370-6894

It's easy .. just follow these three steps to a DPC Visa Debit Card loaded with your child support payments.

- 1. Fill out the attached Authorization Form.** Just be sure to sign and date the form, and then mail it back to the address on the left.
- 2. Watch the mail.** Your card should arrive in a plain white envelope in about ten days. Activate your card by calling the toll-free number listed on the back of the card.
- 3. Start using your card.** Future child support payments will be loaded automatically to your new card. Use it at grocery stores, gas stations, restaurants, department stores, pharmacies ... anywhere Visa debit cards are accepted. Get cash at over 855,000 ATMs* worldwide and get cash back with purchases at many merchants like supermarkets.

*Regular ATM fees apply

Authorization Form

Custodial Parent's Name (please print) _____
First Middle Initial Last

Mailing Address _____
Street Address or PO Box City State Zip

Daytime Phone () _____ Social Security Number (required) _____

Date of Birth / / _____ Your Mother's Maiden Name (required) _____

By signing this form, I authorize the State of Alaska Child Support Services Division (CSSD) to share with JPMorgan all of the information I provide on this form. CSSD will share this information with JPMorgan for the purpose of establishing a Alaska Child Support Visa Debit Card account for me at JPMorgan and to process my child support payments to JPMorgan. I authorize CSSD to deposit my child support payments to this account. This action cancels and replaces any direct deposit agreement I currently have in place with CSSD. Upon authorization of my account with JPMorgan, I agree to be bound by the Alaska Debit Card Disclosure Statement and User Agreement that I will receive with my card.

Signature (required) _____ Date (required) _____