

Key2Benefits®

Secure, convenient access to your funds.

Safe and secure access to cash

- Get unlimited cash withdrawals at KeyBank branches and ATMs at no charge.
- Access your cash at any bank or credit union that accepts MasterCard®.

Convenient and easy to use when shopping

- Make purchases at millions of merchants where MasterCard debit cards are accepted.
- Use your card to make purchases at any online merchant that accepts MasterCard.
- No fees for purchases in stores, by phone, by mail or online.

For more answers to frequently asked questions, go to key2benefits.com and click on the FAQ tab.



Request your Key2Benefits card today! Getting started is easy:

- 1. Fill out the attached Authorization Form below.** Just be sure to sign and date the form, and then mail it back to the following address:
Child Support Services Division
550 W. 7th Avenue, Suite 310
Anchorage, AK 99501-6699
- 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 MasterCard debit cards are accepted.

Key2Benefits 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 ____/____/____ CSSD Member ID# _____
This is the 8-digit Member Number assigned by CSSD, not your case number.

By signing this form, I authorize the State of Alaska Child Support Services Division (CSSD) to share with KeyBank all of the information I provide on this form. CSSD will share this information with KeyBank for the purpose of establishing a Key2Benefits Debit Card account for me at KeyBank and to process my child support payments to KeyBank. 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 KeyBank, I agree to be bound by the Key2Benefits Cardholder Terms and Conditions that I will receive with my card.

Signature (required) _____ Date (required) ____/____/____

**For more information, call the Alaska Child Support Services Division at 907-269-6750.
Only one form is required even if you have multiple cases.**

