Get Your Child Support Payments

FASTER, SAFER, EASIER,



Sign Up! No credit check or bank account required.

With the U.S. Bank ReliaCard® Your Funds Are:



Automatically loaded to your ReliaCard



Available to use right away



Getting Started is Easy

- **1.** Sign up today! Fill out the form below.
- 2. Your card will be mailed to your address provided in 7-10 business days.
- 3. Use your card anywhere Visa debit cards are accepted!

ABOUT THE RELIACARD

It is a Visa® prepaid debit card issued by U.S. Bank. Just like direct deposit, your child support payments will automatically be deposited to your card. You have access to your funds right away and you can use it to make purchases or get cash wherever Visa debit cards are accepted. It's that simple!

For more information, call the Family Support Registry at 303-299-9123 or 800-374-6558.

MAKE PURCHASES | GET CASH | PAY BILLS | TRACK SPENDING

1Successful identity verification required. To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. If necessary, we may also ask to see your driver's license or other identifying documents. ²The Visa Zero Liability Policy protects you against unauthorized purchases. U.S.-issued cards only. This does not apply to ATM transactions or to PIN transactions not processed by Visa. You must immediately report any unauthorized use. See your cardholder agreement for details. The ReliaCard is issued by U.S. Bank National Association pursuant to a license from Visa U.S.A., Inc. Member FDIC. © 2014 U.S. Bank.

Payment Authorization Form

Fill out this form and mail to: Family Support Registry, P.O. Box 2171, Denver, CO 80201-2171 or fax to 303-299-9122. Your ReliaCard® will be mailed to the address provided in approximately 7-10 days.

If you have multiple FSR accounts, provide all of the account numb Custodial Parent's Name: First Name, Middle Initial, Last Name			
Mailing Address:		Apt #:	
City:	State:	Zip Code:	
Phone Number:	Date of Birth:		
Social Security Number:	Mother's Maiden N	Mother's Maiden Name:	

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

By signing this form, I authorize the State child support agency (State agency) to share with U.S. Bank, National Association., (Bank), all of the information I provide on this form. The State agency will share this information with the Bank for the purpose of establishing a U.S. Bank ReliaCard Visa account for me at the Bank and to process my child support payments to the Bank. I authorize the State agency to deposit my child support payments to this account. This action cancels and replaces any direct deposit agreement I currently have in place with the State agency. Upon authorization of my account with the Bank, I agree to be bound by the Cardholder Agreement that I will receive with my card. This authorization will remain in effect until cancelled by me in writing to the State child support agency.

Signature:		
	Date:	