

## **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 Services Division (CSSD) to withdraw your obligated child support payments directly from your account. When a payment is electronically withdrawn from your bank account, CSSD applies the payment to your case and distributes the money in accordance with federal regulations. You may also sign up on-line on the New Mexico Child Support web site: <https://yes.nm.gov>

### 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 CSSD.
- You must complete a separate authorization form for each child support case with NM CSSD you wish to have withdrawn from your checking account.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 completed authorization form with the voided check to any of the following options:

- **Mail: NM State Disbursement Unit**  
**PO Box 2348**  
**Santa Fe, NM 87504**
- **Fax: NM SDU at 505-476-3920**
- **Upload online: online account at <https://yes.nm.gov>**
- **Drop off at local CSSD office: locations at [https://hca.nm.gov/lookingforassistance/field\\_offices/](https://hca.nm.gov/lookingforassistance/field_offices/)**

### The Process:

- CSSD 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 CSSD is notified in writing by the account holder to terminate the authorization and **CSSD 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 CSSD by check or money order.
- If you change your bank, you, as the account holder, must notify CSSD 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 CSSD withdrawal, CSSD 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  
Health Care Authority  
Child Support Services Division**

**Automatic Withdrawal Authorization**

The Child Support Services Division (CSSD) 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 CSSD 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 CSSD reserves the right to cancel the authorization at any time.

**New**                       **Update/Correct**                       **Stop**

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Amount to be withdrawn: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

I authorize the CSSD 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. CSSD may withdraw payments from this account until I cancel the authorization and CSSD has time to act on it. CSSD 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.

<b>Account Holder's Signature</b>	<b>Date:</b>
<b>Account Holder's Signature (for joint accounts)</b>	<b>Date:</b>

**Please attach a voided check with the authorization form**

NAME: LAST                      FIRST                      MEMBER ID:                      CASE ID: