



DCFS - CSE
DIRECT DEPOSIT
P. O. Box 65245
Baton Rouge, LA 70896-5245

TEL: 1-877-752-3237
TDD: 844-224-6188

OR

FAX: 225-342-0543
(Cancellation of Direct Deposit Only)

AUTHORIZATION FORM: Direct Deposit

Please Type or Legibly PRINT all information below in ink.

Check One: ☐ New Request ☐ Change Account ☐ Cancel Direct Deposit

Section 1: CUSTODIAL PARENT INFORMATION	
Name: _____	LASES Case Number _____
Mailing Address: _____	City/State/ZIP: _____
Daytime Telephone: _____	Home Telephone: _____
Social Security Number: _____	Email: _____

Section 2: FINANCIAL INSTITUTION INFORMATION	
Name of Financial Institution: _____	
City/State/ZIP: _____	Telephone: _____
Routing Number: _____	Account Number: _____
Account Type (Check One): ☐ Checking* ☐ Savings*	
*Note: Be sure to include a voided check or a financial institution letter showing the account number and routing number.	

Section 3: AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT OF CHILD SUPPORT PAYMENTS
I authorize Child Support Enforcement (CSE) to deposit my child support payments directly into my checking account or savings account as specified above. CSE is also authorized to adjust any over/under deposit it has made to my checking account or savings account. I understand the deposits/adjustments will be made electronically by Automated Clearing House Network (ACH) transactions and I must allow the Federal Reserve two workdays from the disbursement date to have the funds available to my financial institution. I also understand the following: It is my responsibility to provide correct routing and account information for ACH transmissions by attaching a voided check or a financial institution letter showing the account number and routing number. I will immediately notify CSE if my banking information changes. I must submit a new authorization form to change my direct deposit. I can stop my direct deposit by notifying CSE. I must notify CSE of any changes to my address. I must include my name and LASES case number on all correspondence regarding direct deposit. The CSE website provides the date the CSE system disbursed my payment To verify when a payment is posted to my account and funds are available, I will have to contact my financial institution. By signing below I signify that I have read and agree to all of the conditions listed above. Signature: _____ Date Signed: _____

Office Use Only
Sent By: _____ Date Received: _____ / _____ / _____ Entered By: _____

INFORMATION SHEET

You may participate in the Direct Deposit Program if you meet the following criteria:

- Have an active checking or savings account in your name.
- Complete, sign, date and return the La CSE Direct Deposit Authorization Form (CSE DD 1) with required documentation for the preferred method of deposit as listed below:

For **checking** - submit a voided check or a financial institution letter showing the account number and routing number.

For **savings account** - submit a financial institution letter showing the account number and routing number.

- Mail above information to Child Support Enforcement (CSE) at the following address:

DCFS – CSE
Direct Deposit
P.O. Box 65245
Baton Rouge, LA 70896

Direct Deposit will go into effect once your authorization form has been received and processed by CSE and your account information has been verified by your bank or credit union. A check will be issued to you until the account information has been verified. Once the information is verified, future payments posted to the case will be directly deposited into your account. If the account information is rejected, a check will be issued. Funds are usually available within 48 hours after the payment is posted to LASER. (**Exception:** IRS offsets may be held up to six months due to injured spouse claims.)

If your name on the authorization form differs in anyway from your name on your child support case, the authorization form will be returned.

In order to verify deposited funds, contact your financial institution.

If at anytime you wish to **cancel** Direct Deposit, notify CSE in writing or fax a new authorization form to:

DCFS – CSE
P.O. Box 65245
Baton Rouge, LA 70896

Or

Fax: (225) 342-0543
Cancellation of Direct Deposit Only