

Prepaid Debit MasterCard Way2Go Card®

Issued by Comerica Bank

- Access to your support payment when you shop
- Receive cash back when you make a purchase
- Use anywhere MasterCard is accepted
- Sign up for text message alerts

South Carolina Way2Go Card® issued by Comerica

You have options to receive your payments; direct deposit to your bank account; direct deposit to your own prepaid account; or this prepaid card. You do not have to accept this prepaid card. Ask about other ways to receive your funds.

Monthly fee	Per purchase	ATM withdrawal	Cash reload
\$0.00	\$0.00	\$0.00 <small>in-network</small>	N/A
		\$1.75 <small>out-of-network</small>	
ATM balance inquiry			\$0.75
Customer service (automated or live agent)			\$0 or \$0.50* per call
Inactivity			\$0.00
We charge 6 other types of fees. Here are some of them:			
Card replacement (regular or expedited delivery)			\$0.00 or \$16.00
International ATM transaction			\$1.75
International transaction Fee			2% assessed per transaction

* This fee can be lower depending on how and where this card is used. See separate disclosure for ways to access your funds and balance information for no fee.

No overdraft/credit feature.
Your funds are eligible for FDIC insurance.
For general information about prepaid accounts, visit cfpb.gov/prepaid.
Find details and conditions for all fees and services in the cardholder agreement.

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Way2Go Card® features, fees, and tips to avoid those charges are detailed online at www.dss.sc.gov/child-support



Direct Deposit/ Debit Card Enrollment

for Parents Receiving Child Support

Important Information About Your Child Support Payments

The South Carolina Department of Social Services (DSS) and Clerks of Court now receive and disburse all child support and alimony payments through the State Disbursement Unit (SDU).

- ▶ You must enroll to receive your child support payments via direct deposit to your bank account or via a prepaid debit MasterCard Way2Go Card®. **Please see Instructions for Enrollment inside this brochure for online and mail-in options.**

The payment method you select on the form will apply to all of your child support cases.



Instructions for Enrollment

► Online Enrollment (Preferred Method)

Online enrollment is available at clientportal.dss.sc.gov. This is a faster way to set up and change your preferred payment method. Additional information is available at dss.sc.gov/child-support.

► Mail-in Option

Fill out form on the right completely. Use the enclose envelope and return to:

South Carolina State Disbursement Unit
PO Box 100304
Columbia, SC 29202-3304

For More Information

Child Support

Visit the South Carolina child support website at www.dss.sc.gov/child-support

Customer Service Portal

Information can be accessed once registered at clientportal.dss.sc.gov. A video with a step-by-step guide on using the portal is available at dss.sc.gov/child-support. There is a mobile version that can be accessed on your phone. Users can look at their case information, check appointment times, update basic information, view payment histories, and generate statements.

Interactive Voice Response System

Call 800-768-5858 to set up your access to the child support interactive voice response system (IVR) using your Member ID. The IVR provides information on payments, scheduled appointments, hearings or conferences, and enforcement actions. Agents are available Monday through Friday from 8:30 AM until 5:00 PM, excluding state holidays. Self-service options are available 24 hours a day through the IVR.

Direct Deposit/Debit Card Enrollment Form

► Personal Information

Please fill in all of the information below using *black or blue ink only*.

Full Name (Custodial Parent)

Member ID

If member ID is unknown, provide a single case number. *All cases will be enrolled in the method you select below.*

Date of Birth

Social Security Number

Primary Phone Number

Email Address

► Enrollment Options

Please select one:

Direct Deposit

Debit Card

! **Reminder:** If you selected direct deposit, please include a voided check. If you have an account that does not offer checks, please provide a letter from your financial institution confirming your routing and account numbers for direct deposit.

Direct Deposit Information

Fill in only if selected.

Name of Financial Institution (Bank or Credit Union)

Account Selection and Numbers

Please select one:

Checking account Savings account

Account Number

Routing Transit Number (9 digits)

Direct Deposit Authorization

I certify that I am entitled to the payments identified above and that I authorize my payment to be sent to the financial institution named above and deposited in the account I indicated. I understand this authorization will remain in full force and effect until SC Child Support Services Division (CSSD) receives written notification from me of termination at such time and such manner as to afford a reasonable opportunity to act on it. Written notification can be sent to the CSSD at PO Box 100304, Columbia, South Carolina 29202. To change financial institutions or accounts, I will complete and submit a new application. *If I believe funds posted to my account where applied in error, I must contact CSSD. If I use those funds, and it is an incorrect or over payment, I will be required to repay those funds. The SDU agrees to be bound by the National Automated Clearing House Association (NACHA) Operating Rules, and acknowledges that direct deposits to the designated account must comply with the provisions of applicable U.S. law, as well as the requirements of the Office of Foreign Assets Control.*

Signature

Date

Way2Go Card® Authorization

This authorization will remain in full force effect until SC Child Support Services Division (CSSD) receives written notification from me of termination at such time and in such manner as to afford a reasonable opportunity to act on it. Written notification can be sent to the CSSD at PO Box 100304, Columbia, South Carolina 29202. I understand by signing this enrollment form and returning it to CSSD that I am authorizing CSSD to post my support payments onto the prepaid debit MasterCard Way2Go Card® issued by Comerica Bank. I certify that I am at least 18 years of age. I also certify that I am entitled to the payments identified above and that I authorize my payments to be sent to Comerica Bank where my support payments will be held until I use them. *If I believe funds posted to my account where applied in error, I must contact CSSD. If I use those funds, and it is an incorrect or over payment, I will be required to repay those funds.* I acknowledge that I have reviewed the Way2Go Card® fee disclosure forms available at www.dss.sc.gov/child-support. I understand the fees that are associated with the use of the Way2Go Card®.

Signature

Date



! Please include a voided check. If you have an account that does not offer checks, please provide a letter from your financial institution confirming your routing and account numbers for direct deposit.