



The Confederated Tribes of the Colville Reservation
Child Support Program



P.O. Box 468, Nespalem, WA 99155
Toll Free: (877) 515-2544 Nespelem Fax: (509) 634-2031
Omak Fax: (509)422-7705

Direct Deposit Request Form

Complete this form and send directly to CTCSP Cash Unit @ rhonda.st.pierre.csp@colvilletribes.com or Fax to 509-634-2031.

Custodial Parent Name D.O.B.

Custodial Parent Address

City State ZIP Code

Please have my Child Support Payment automatically deposited into the following account:

Attach VOIDED Check

Checking Account Number: _____

Or

Savings Account Number: _____

My Banks Routing Number: _____

Name of Bank: _____

CTCSP MTS Case Number: _____

I authorize Colville Confederated Tribes Child Support Program and my bank to automatically deposit my child support payments into my account listed above (this includes my authorization to correct entries made in error). This authorization will remain in effect until I give written notice to cancel it.

Custodial Parent Signature Date

**** Attach VOIDED Check ****