

Harvey Ruvin
CLERK OF THE CIRCUIT AND COUNTY COURTS
Miami-Dade County, Florida



CENTRAL DEPOSITORY
ROOM 1601
601 NW 1st Court
Miami, Florida 33136
Telephone: (305) 275-1122

HARVEY RUVIN
Clerk

Dear Central Depository Clients:

I am most pleased to inform you that recent technological advancement within the Clerk's Office have allowed the Central Depository to now offer Direct Deposit of your child support payments to your checking or savings account.

This new service will allow you to receive your funds quickly and accurately. You will no longer need to make extra trips to the bank and wait in line to cash your check. Rather, Central Depository will deposit your child support payment directly into your bank account.

To take advantage of this option, please take the enclosed application form to your financial institution for completion. Return the form along with a copy of your pre-printed deposit slip or a pre-printed voided check to:

CENTRAL DEPOSITORY
601 NW 1st Court, 16th Floor
Miami, Florida 33136-3445

Once your financial institution has completed and returned the required form, please allow approximately two weeks after receipt for information verification and processing requirements. You may fax the completed form and documents to: **786-469-3772**

We hope you are pleased with this new service. My staff and I are committed to providing the best possible service to you, utilizing meaningful technological advances as they occur.

With best wishes to you and your family; I am, sincerely,

Harvey Ruvin,
Clerk



Harvey Ruvin, Clerk of the Circuit and County Courts Central Depository - Direct Deposit Enrollment

CUSTODIAL PARENT ACCOUNT INFORMATION		
PLEASE CHOOSE ONE: <input type="checkbox"/> NEW ENROLLMENT <input type="checkbox"/> CHANGE IN PAYMENT OPTION <input type="checkbox"/> CHANGE OF NAME OR ADDRESS		
Last Name:	Middle Name:	First Name:
Central Depository Case Number:	County where case is filed:	
Date of Birth:	Social Security Number:	
Mailing Address:	City, State, Zip:	
Home Phone:	Mobile Phone:	Email:
I hereby authorize Central Depository to initiate automatic deposits to the financial institution named below. I also authorize Central Depository to make withdrawals from this account in the event that a credit entry is made in error. I agree not to hold Central Depository responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me, or by my financial institution, or due to an error on the part of my financial institution in depositing funds to my account. I also acknowledge that this agreement will remain in effect until Central Depository receives a written notice of cancellation from me, my financial institution, or until I submit a new direct deposit form to Central Depository. I recognize that this request will cancel any other direct deposit agreements I have in place with Central Depository and understand that ten (10) days' notice, in writing, is required if I change financial institutions or account numbers. I also agree to report any change of name or address within ten (10) days' of the change.		
Signature:	Date:	
FINANCIAL INSTITUTION INFORMATION		
PLEASE CHOOSE ONE: <input type="checkbox"/> CHECKING ACCOUNT <input type="checkbox"/> SAVINGS ACCOUNT <input type="checkbox"/> OTHER		
Name of Financial Institution:		
Address of Financial Institution:		
Routing Number:		
Account Number:		
PLEASE READ THESE MAILING INSTRUCTIONS CAREFULLY		
Submit this form and supporting documents to this address: Central Depository, 601 N.W. 1st Court, 16th Floor, Miami, FL 33136.		
Identity Verification Documentation – Submit a clear photocopy of your valid, unexpired government issued photo ID bearing your signature. If the address on your ID is not current, provide a document, such as a current utility bill, that will verify your address.		
Financial Verification Documentation – AND submit EITHER a voided preprinted check (for the checking account option) OR a voided preprinted deposit slip (for the savings account option) OR a bank letter with your name, address, bank transit and account number (for either checking or savings) OR any above-mentioned document capable of validating information for the OTHER account option.		

Central Depository, 601 NW 1st Court, 16th Floor, Miami, FL 33136-3409
Telephone Number: (305) 275-1122 Fax Number: (786)469-3772
Web Address: http://www.miami-dadeclerk.com/families_child_support_alimony.asp