

OFFICE OF THE CLERK OF THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS



Child Support
50 West Washington Street
Room LL-01
Chicago, Illinois 60602
Telephone: (312) 345-4015 Fax: (312) 345-4146

AUTHORIZATION TO CANCEL ELECTRONIC AND BANK-BY-MAIL DIRECT DEPOSIT

PLEASE WRITE THE ACCOUNT NUMBER YOU WANT US TO CANCEL ON THIS FORM!

I am currently a participant in the Clerk's and/or SDU's direct deposit program, but hereby request to be cancelled from this program. I understand that my child support payments will be mailed to the address on your system until further instructions are received.

NAME: _____

COURT DOCKET NUMBER: _____

DAY TIME TELEPHONE NUMBER: (_____) _____

BANK NAME: _____

BANK CITY: _____

BANK ROUTING NUMBER: _____

ACCOUNT NUMBER: _____

TYPE OF ACCOUNT: [] Checking [] Savings

_____/_____/_____
Signature Date signed

NOTARY: Please put your seal in this space.

Subscribed and sworn to before me this:

____ day of _____, _____

Commission expires ____/____/____ Check if seal is embossed []

_____/_____/_____
Notary Public Signature

FOR COMPANY USE ONLY

Old & New Att'd: _____

Deleted from PNDD on: ____/____/____

Terminated from SDU on: ____/____/____

Deleted fom T-KIDS on: ____/____/____