



Missouri State Employees' Retirement System
 PO Box 209
 Jefferson City, MO 65102
 Phone: (573) 632-6100 (800) 827-1063
 Fax: (573) 632-6103



EFT

DIRECT DEPOSIT AUTHORIZATION

An incomplete or altered Direct Deposit Authorization form will not be accepted.



Online Form Available

Please complete a **separate** Direct Deposit Authorization if you:

- Receive **more than one** type of benefit payment from MOSERS.
- Would like the payments deposited in **different** accounts.

Instructions: 1) Complete and sign form. 2) Attach a voided check or deposit slip (samples on back). 3) Mail it to MOSERS.

BENEFIT RECIPIENT INFORMATION

Social Security or Member Number:		Name: (Last)		(First)	(MI)
PO Box/Street Address:		City		State	Zip Code
Work Phone Number: ()	Home Phone Number: ()	E-mail Address:			
Employee Classification:	<input type="checkbox"/> Regular State Employee <input type="checkbox"/> Elected State Official	<input type="checkbox"/> Judge <input type="checkbox"/> Legislator	<input type="checkbox"/> Administrative Law Judge or Legal Advisor		
Type of Benefit Payment:	<input type="checkbox"/> Retirement <input type="checkbox"/> Survivor (of a retired member)	<input type="checkbox"/> Survivor (of an active member)			

NOTE: Detailed information regarding your monthly benefit payment will be readily available through the secured "Member Login" area of our website (www.mosers.org). A letter will be mailed to you **only** when the amount of your benefit payment changes. Generally, the amount changes for one of the following reasons: COLAs, insurance premiums, tax withholdings, or other deductions.

BANK/FINANCIAL INSTITUTION INFORMATION

(see sample check on reverse side of form)

Bank Routing Number (ABA Number): □ □ □ □ □ □ □ □ - □		Bank Account Number:
Type of Account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	Bank Phone Number: ()	
Name of Bank or Financial Institution:		
PO Box./Street Address:		
City	State:	Zip Code:

BENEFIT RECIPIENT SIGNATURE

I hereby authorize the Missouri State Employees' Retirement System (MOSERS) to initiate credit entries to my checking or savings account (as indicated above) at the depository financial institution named above and to credit the same to such account. This authorization is not an assignment of my right to receive such payments. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authorization hereby revokes all prior payment directions given to MOSERS. This authorization is to remain in full force and effect until MOSERS has received written notification of its termination from me or anyone with legal authority to act on my behalf.

Benefit Recipient's Signature:*	Date:
---------------------------------	-------

*Must be signed by the member, benefit applicant, authorized agent under Section 104.1093, RSMo, authorized agent under a power of attorney, conservator, or guardian. If an agent under a power of attorney completes and signs the form, a certified copy of the power of attorney must be attached (unless on file at MOSERS). If a court appointed conservator or guardian completes and signs the form, a certified copy of the appointment must be attached (unless on file at MOSERS).

For Your Convenience:

The sample check and deposit slip below show where to locate the required bank information to complete your *Direct Deposit Authorization*.

Sample Check

<p>My Name My Address My City, State, & Zip</p>	<p>72-74/893 9255254</p>	<p>1152</p>
	DATE _____	
<p>_____ \$ <input style="width: 80px;" type="text"/></p>		
<p>PAY TO THE ORDER OF _____</p>		DOLLARS
<p><input type="checkbox"/> Bank Name Bank Address</p>		
<p>MEMO _____</p>		
<p>+ 001862862 925 525 4 1152</p>		
<p>9 Digit Bank Routing Number</p>	<p>Your Account Number</p>	<p>Check Number</p>

Sample Deposit Slip

DEPOSIT TICKET		
<p>My Name My Address My City, State, & Zip</p>		
	DATE _____	
<p><small>DEPOSITS MAY NOT BE AVAILABLE FOR IMMEDIATE WITHDRAWAL</small></p>		
<p><small>SIGN HERE IF CASH RECEIVED FROM DEPOSIT</small></p>		
<p>Account routing number 001862898</p>		
<p><input type="checkbox"/> Bank Name Bank Address</p>		
<p>+ 001862862 925 525 4</p>		
<p>9 Digit Bank Routing Number</p>	<p>Your Account Number</p>	

	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%; text-align: right;">CASH ▶</td> <td style="width: 80%;"></td> </tr> <tr> <td></td> <td style="text-align: right;">OR TOTAL FROM OTHER SIDE</td> <td></td> </tr> <tr> <td style="text-align: right;">TOTAL ITEMS</td> <td style="text-align: right;">SUBTOTAL ▶</td> <td></td> </tr> <tr> <td style="text-align: right;">LESS CASH ▶</td> <td></td> <td></td> </tr> <tr> <td style="text-align: right;">NET DEPOSIT</td> <td style="text-align: right;">\$</td> <td></td> </tr> </table>		CASH ▶			OR TOTAL FROM OTHER SIDE		TOTAL ITEMS	SUBTOTAL ▶		LESS CASH ▶			NET DEPOSIT	\$	
	CASH ▶															
	OR TOTAL FROM OTHER SIDE															
TOTAL ITEMS	SUBTOTAL ▶															
LESS CASH ▶																
NET DEPOSIT	\$															

Note: Your bank may use different routing numbers for deposits. If your deposit slip has this notation, use this routing number for your direct deposit.