
**Instructions For Completion Of The
DIRECT DEPOSIT SIGN-UP FORM (SF 1199A)
for Department of Health and Human Services (DHHS) Grant Recipients**

OVERVIEW

What is the purpose of this form?

It collects the information necessary for the Payment Management System (PMS) to have Federal funds electronically deposited into the recipient's bank account.

Who must complete this form?

Sections 1 and 2 are to be completed by the recipient. Section 3 is to be completed by the recipient's financial institution.

Who must disseminate copies of this form?

The recipient's financial institution is responsible for disseminating copies of the three-part form in accordance with the copy designation stamped at the foot of the form.

The "Government Agency Copy" will be forwarded to the Division of Payment Management. The "Payee(s) Copy" will be forwarded to the recipient. The "Financial Institution Copy" will be kept by the recipient's financial institution.

What if some of the information changes?

Should any of the data on the completed 1199A change, the recipient must obtain and complete a new 1199A. Blank forms are available on the DPM website at <http://www.dpm.psc.gov> and should be available at the recipient's financial institution as well.

DIRECTIONS

- The back of the 1199A must be read carefully before signatures are made.
- All information is to be typed or printed in ink on the 1199A.
- All signatures must be original and in ink.
- Alterations such as erasures, correction fluid and strike-outs are unacceptable and will invalidate the form.
- All data elements on the 1199A must be completed unless a blank is indicated.
- This form cannot be faxed.
- Please attach a business card or note with the name and phone number and/or email address of a contact person.

Send to: Division of Payment Management
Regular Mail Only - PO Box 6021, Rockville, MD 20852.
Express Mail Only - 11400 Rockville Pike, Suite 700, Rockville, MD 20852.