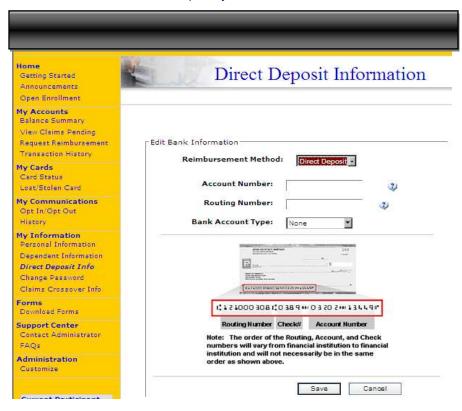
Direct Deposit Authorization Form

Employer: <u>Ivy Tech Community College</u> - 248					
Employee Last Name: (Please Print)	Employee First Name	Employee Middle Initial	SSN		
Email Address		Daytime Phone Number () -			

TWO WAYS TO CHOOSE TO SIGN UP:

Choice #1: Log on to: www.benefitspaymentsystem.com

- a. Select Direct Deposit under "My Information" on the left side of the screen
- b. Follow the instructions to complete your bank information



NOTE: In the event of a bank deposit rejection because the enrollee participant fails to advise KBA of a change in the banking account utilized for Direct Deposits, a fee of \$30.00 may be assessed.



Choice #2: Complete, sign and return this form

a.	Account Number:		
b.	Bank Account Transit Routing Number:(Use the TRN from your Checking Account, not the numb	er on the Savings Deposit Slip)	
C.	Checking: or Savings:		
	Employee Signature	Date	

^{**}SPECIAL NOTE: You may update your direct deposit information online anytime. No need to submit this form if enrolling for the Direct Deposit feature online. Claims processed before the direct deposit is set up will be paid by check **