

DIRECT DEPOSIT AUTHORIZATION FORM

PRIVACY ACT STATEMENT

The following information is provided to comply with the privacy Act of 1974 (P.L.93-579). All information collected on this form is required under the provision of 31 U.S.C. 3322 and 31CFR210. This information will be used by the Treasury Department to transmit data by electronic means to the vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payment through the Automated Clearing House Payment System.

I hereby authorize the U.S. Army Corps of Engineers, hereinafter called USACE to initiate direct deposit credit entries to my (our) account indicated below and the financial institution named below, hereinafter called DEPOSITORY to credit the same to such account.

(1) Check One of the Following Statements:

() **ADD** – Deposit my Payment to the account shown

() **CHANGE** - Financial Institutions and/or Account Number

(2) Installation EROC or Name of District Office _____

(3) _____
Name or (Company as shown on Invoice) Corps of Engineers Employees (Your Name):

(4) _____
Address:

(5) _____
City: _____ State: _____ Zip: _____

(6) _____
Mailing Address (if different):

(7) _____
Daytime Phone: _____ Email: _____

Contract # (Optional):

If more than one contract, please list on separate sheet

Please ask your Financial Institution for your Depositor Account Number and "ACH" Routing Number

Type of Depositor Account Please Check a Box	<input type="checkbox"/>	Checking (8)	<input type="checkbox"/>	Savings (9)
Depositor Account Number (10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(11) _____
Name of Financial Institution:

(12) _____
Address:

(13) _____
City: _____ State: _____ Zip: _____

(14) _____
Routing Number:

(15) _____
Depositor Account Title:

Tax ID Number (TIN) for Business or
SSN for Individuals (16)

SIGNATURE: (17) _____ DATE: (18) _____

Mail to:
USACE Finance Center
ATTN EFT/Disbursing
5722 Integrity Drive
Millington TN 38054-5005

You may fax your document directly to
the Corps of Engineers Finance Center
Disbursing Office at:

901-874-8572 or 901-874-8574

EFT IS MANDATORY

FOR VENDOR PAYMENTS AND EMPLOYEE TRAVEL PAYMENTS

(UNLESS A WAIVER IS GRANTED)

Public Law (PL) 104-134, the Debt Collection Improvement Act of 1996, requires that all federal payments with few exceptions be made via Electronic Funds Transfer (EFT).

Reference: Department of the Army, U.S. Army Corps of Engineers, CERM-F letter dated 8 Feb 1999,
Subject: Implementation for Electronic Funds Transfer (EFT) for Federal Payments

In order to comply with this requirement, complete the Direct Deposit Form on the back of this notice and return it. If you are unsure of routing or account numbers consult with your financial institution to fill out the bottom portion of the form. Once EFT is established, instead of receiving checks, you will have payments directly deposited into your checking or savings account.
(If you have already signed up, please disregard).

Utility and Phone Companies – In order to facilitate establishing acceptable invoice numbers please call point of contact.

POINTS OF CONTACT for questions are:

901-874-8543 (Commercial)
882-8543 (DSN)

901-874-8478 (Commercial)
882-8478 (DSN)

CEFC-FC-EFT@usace.army.mil

INSTRUCTIONS FOR COMPLETING FORM UFC-DISB-4

- (1) Vendors and/or travelers should indicate if this transaction is an "add" as a new Direct Deposit to be set up or a change to the already existing information. USACE employees already on payroll Direct Deposit that have not completed a form for travel reimbursements should mark Add.
- (2) Include the Corps of Engineers District name (example Mobile) or EROC (example: K5) that wrote the contract authorizing payment. If more than one District issued contracts, prepare a separate form for each District.
- (3) Include the Name Or Company as it appears on the invoice. If the contract was written to Bill and Betty Smith, the bill and Direct Deposit form should include both names, not just Bill. If you are a Corps Employee, this will be your name.
- (4) This address is the physical address of the business. If you are a Corps employee, this is your home address.
- (5) The city, state, and zip that match the physical address.
- (6) The mailing address will include any and all remit to/payment addresses that are different from the physical address. If more space is needed, include as attachment page with all addresses listed. This is VERY IMPORTANT the routing and bank account number is loaded on specific payment addresses.
- (7) Include Daytime phone number in case there are questions concerning the completed form.
- (8) Check if the bank account number furnished is a checking account.
- (9) Check if the bank account number furnished is a saving account.
- (10) Include bank account number, one number in each slot. This number for checking account is located on the bottom portion of your checks, usually after a nine digit number. Do not include the check number which sometimes appears in front or behind the actual account number.
- (11) The full name of your bank.
- (12) The actual street address or PO BOX of your bank/financial institution.
- (13) The City, State, and Zip Code of your bank/financial institution.
- (14) The Bank's routing number. This is your bank's identification number in the Federal Reserve System. Every bank's routing number consists of exactly nine numeric numbers. To locate your bank's routing number look at the bottom of your check at those series of numbers. You should find a series of nine numbers either "off to themselves" or between colons. This is your bank's routing number.
- (15) Depositor Account Title (Name on bank account)
- (16) "For Corporations and Businesses, use the companies IRS Tax ID number. For Sole Proprietorships and Individuals, write your social security number.
- (17) Forms for businesses should be signed by a company officer. Forms for Employees/individuals should be signed by the specific person.
- (18) Date of Authorization (i.e. Date Signed)

LOOK AT YOUR TREASURY CHECK

Check #

CONTRACT NUMBER

COMPANY NAME & ADDRESS

EROC

John Citizen	Check ###
Your Address	
Your Bank	
Pay to the Order of _____	\$ _____
[REDACTED]	
Bank Name	
Bank Address	
Bank City/State/Zip	
123456789*: Check ### Your Account Number	

**COMPLETED FORMS MAY BE EMAILED TO THE POINTS OF CONTACT OR FAXED TO
THE DISBURSING OFFICE AT 901-874-8572 or 901-874-8574**