Authorization for Electronic Funds Transfer (EFT) / Direct Deposit



Set up is quick and easy

You can submit your EFT/direct deposit information securely through our member portal, <u>PSA.Consumer.PacificSource.com</u>, or our mobile app. Learn more about the app at <u>PacSrc.co/app</u>.

Once you're logged in, just follow these steps:

- **1.** Under the Accounts tab, select Banking.
- 2. Click Add Bank Account.
- 3. Complete the online form and click "Submit."

No voided check is needed, and your bank account will be verified in real time, so you'll have next-day access to EFT reimbursements.

Alternate set-up option

You may complete the enclosed paper form and mail or fax it to us. This set-up can take up to 10 business days, and it requires a micro-deposit verification process—see form for details.

Important notes

- Once you agree to the EFT/direct deposit process, all reimbursement transactions will be in this format until we receive your written request to cancel the process.
- You'll receive email confirmations when EFT/direct deposits are sent to you.

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Note: All EFT additions or changes submitted using this form are subject to a "micro-deposit verification process." We will deposit a random amount ranging from \$0.01 to \$0.99. You must confirm the micro-deposit amount via the PSA consumer portal at <u>PSA.Consumer.PacificSource.com</u> or the PSA mobile app to activate and use the requested bank account.

Please allow up to 10 business days for processing of this authorization. You will receive regular reimbursement checks until this request is processed or if the micro-deposit amount is not confirmed or the bank account fails the verification process.

Member	
Member last name	First name, MI
Employer	Member ID
Account information	
Please check one of the following:	Type of account. Please check one of the following
Add: Deposit my reimbursement funds to the account shown.	Checking (default if none selected)
Change: Change my financial institution and/or account number.	Savings
Cancel: Stop my participation in the direct deposit program.	

Authorization

I hereby authorize PacificSource Administrators, Inc. to initiate deposits to the bank account indicated below. I authorize credit entries and, if necessary, debit entries or adjustments for any credit entries made in error to my account. This authority will remain in effect until PacificSource Administrators has received written notification from me of its termination in a manner that allows PacificSource Administrators a reasonable opportunity to act upon it. I have read and understand the information that precedes this form.

Member signature ____

Date ___

Attach voided check below

Please tape your voided check here.

(Do not send deposit slips.)

If faxing, plain checks work best. Decorated checks and security watermarks can distort or hide the account numbers.

PO Box 2797, Portland, OR 97208-2797 | Phone: **800-422-7038**, TTY:711. We accept all relay calls. Fax: 866-446-6090 | <u>PacificSource.com/PSA</u>