

**SECTION 1**

**YOUR INFORMATION**

Print your full name: \_\_\_\_\_

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Daytime Telephone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you receive more than one monthly MainePERS payment?

☐ NO ☐ YES: Use this account for all? ☐ Yes ☐ No (explain: \_\_\_\_\_)

**SECTION 2**

**BANK ACCOUNT INFORMATION (Only one account per form)**

**Checking Account  
Information:**

Please **tape** or **glue** a voided or cancelled personal check here to have your payment deposited to your checking account. Please **do not staple** or **paper clip** the check to this form or provide a deposit slip.

**Your name must be on this account or we cannot deposit your benefit.**

If you are unable to provide a voided or cancelled check, please enter your checking account information below.

\_\_\_\_\_  
Name of Financial Institution Phone #

\_\_\_\_\_  
Routing # (9 digits) Account #

**OR** \_\_\_\_\_

**Your name must be on this account or we cannot deposit your benefit.**

**Savings Account  
Information:**

\_\_\_\_\_  
Name of Financial Institution Phone #

\_\_\_\_\_  
Routing # (9 digits) Account #

**SECTION 3**

**NUMBER OF ACCOUNTS**

**Are you depositing to two accounts?**

☐ NO - Deposit **all** of my benefit in the account indicated above.

☐ YES - Fill out two forms (one for each account) and check below which applies to **this** account.

☐ Deposit the exact amount of: \$ \_\_\_\_\_ in this account (and any balance in my other account).

☐ Deposit any balance after the deposit to my other account in **this** account.

**SECTION 4**

**YOUR AUTHORIZATION**

By signing this form, you authorize MainePERS to:

1. Remit any benefit payments due to you by crediting your account(s) indicated above and;
2. Recover from this account any overpayments to the account due to death, change in benefit status, or other legitimate causes.

You authorize the financial institution named above to:

1. Accept any deposits initiated by MainePERS to this account and;
2. Credit these deposits to the account without responsibility for their correctness.

\_\_\_\_\_  
Recipient Signature

\_\_\_\_\_  
Date

### MONTHLY BENEFIT APPLICANTS

Electronic direct deposit is a fast, safe and convenient way of receiving a benefit payment. Monthly benefit payments are generally posted to your account on the next to the last day of the month for which the payment is issued. When the last day of the month falls on a weekend, payments are posted on the preceding Friday.

MainePERS will mail an advice of deposit whenever the amount of your deposit changes by more than a dollar. An advice of deposit gives you details including payment amount, deductions and tax withholding, and where we deposited the net benefit payment. We will also mail your year-end advice in December for your tax preparation purposes.

#### **Starting Direct Deposit:**

You must submit a completed, signed, and dated *Direct Deposit Form* form prior to the payment of your retirement benefit. We must receive your completed authorization form by the last business day of the month in order to issue a payment or make a change in the following month (i.e., by December 31st for January payment). We will not issue payment if we detect an error in either the transit routing number or the account number provided on the authorization form. If depositing to your checking account, we request that you attach a check marked "void" to your direct deposit form in order to guarantee accurate processing. We can deposit your benefit payment in up to two checking and/or savings accounts.

#### **Changing the Direct Deposit Financial Institution or Account Number:**

You must submit a new *Direct Deposit Form* in order to change your financial institution and account number or to change the account number at your current financial institution. Changes we receive by the end of one month will be effective with the next month's payment. For example, forms received in May will be effective with June's payment. **You should not close your old direct deposit account before we have made a successful transfer to your new account.**

#### **Multiple Benefit Recipients:**

If you select benefit payment option 5, both you and your beneficiary must submit separate authorization forms, even if you use a joint account.

If you have questions or need additional information about electronic direct deposit, please contact us at 1-800-451-9800 or via e-mail at **[Retirement.Services@mainepers.org](mailto:Retirement.Services@mainepers.org)**.

### REFUND APPLICANTS

Electronic direct deposit is a fast, safe and convenient way of receiving your contribution refund. We issue refunds every other Friday. Your refund will post to your account on the date we pay your refund. We will write to let you know your refund date and amount, once they are determined. We must receive your completed *Direct Deposit Form* or any changes to a form submitted with your application, at least one week before your refund date in order to deposit the funds in your account.

You can find more information about when you can expect to receive your refund in the Refund Application Packet or online at **[www.mainepers.org](http://www.mainepers.org)**