



# DIRECT DEPOSIT ELECTION FORM

## State Of Connecticut

### Instructions to setup direct deposit:

1. Updates will be made to your account within 10 business days.
2. Setup your direct deposit immediately via your TASC Online Account or the TASC Mobile App; or

Submit this completed form to TASC via one of the following methods:	Online Service Request	Fax	Mail
	Log onto your online account and attach completed form via Support Request <a href="http://cttasc.com">cttasc.com</a> (click <i>Contact Us</i> )	(608) 663-2759	TASC PO Box 7308 Madison WI 53707-7308

### INDIVIDUAL/PARTICIPANT INFORMATION

Employer Name:	State Of Connecticut		Employer TASC ID #:	4721-0392-1958	
Individual First Name:			Last Name:		
Individual TASC ID #:			Email Address:		
Primary Address:	Address 1:				Apt:
	Address 2:				
	City:				
	State:		ZIP/Postal Code:		+4

### FINANCIAL INSTITUTION/BANK ACCOUNT INFORMATION

Account Type:	Personal Checking	Personal Savings	Business Checking	Business Savings
Routing Number (9 Digit):		Account Number:		
Financial Institution Name:				
Name on Account:				
Financial Institution Address:	Address:			
	City:			
	State:		ZIP/Postal Code:	

**IMPORTANT:** Please provide a voided check for the account listed above. We will not process without a voided check. Do not use a deposit slip, as the number may be invalid.

### AUTHORIZATION

I authorize TASC to initiate and send reimbursements from my TASC Account(s) to the financial institution named above and deposit such funds in my account and, if necessary, to electronically debit my account to correct erroneous entries. I understand that all direct deposits are made through the automated clearing house (ACH) and fund availability is subject to the terms and limitations of the ACH as well as my financial institution. I certify that my account allows for direct deposits and all such transactions comply with applicable laws. My signature below indicates that I am either the accountholder or have the authority of the accountholder and authorize TASC to make direct deposits into my account. My authorization is to remain in full force and effect until TASC has received written notification from me of its termination and in such time and in such manner as to afford TASC with a reasonable opportunity to act on it.

Authorized Signature

Date