



# DIRECT DEPOSIT AUTHORIZATION FORM

You have 2 options to request Direct Deposit:

**1. FILL OUT FORM**

Fill out this form and return to Surency by either email, fax, or mail.

**2. MEMBER ACCOUNT AT SURENCY.COM**

Log into your Member Account at Surency.com to set-up direct deposit immediately.

## Employer Information

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Plan Year

## Employee Information

\_\_\_\_\_  
Employee Name (Last Name, First Name, MI) (Please Print)

\_\_\_\_\_  
Social Security Number

## Bank Information

\_\_\_\_\_  
Bank Name

Checking     Savings

\_\_\_\_\_  
Bank Routing Number

Adding Direct Deposit

Changing the Account

\_\_\_\_\_  
Bank Account Number

## Authorization

I authorize the direct deposit of funds reimbursed from my Pre-tax Accounts into the bank account specified above. Surency will continue to use this as my "Account of Record" until notified, in writing, to discontinue use of the account. I understand that direct deposit will continue automatically into each new Plan Year unless I notify Surency, in writing, of a change. I authorize my bank account to be debited for any reimbursements sent in error or claims denied after reimbursement. I certify that I have read, and understand, the information on the Authorization form.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**\*\*Attach a voided check for a checking account.\*\***

**Return completed form back to Surency at email: [flex@surency.com](mailto:flex@surency.com) - fax: 316-272-4841  
or mail: P.O. Box 789773, Wichita, KS 67278-9773**

**866-818-8805 | [Surency.com](http://Surency.com)**