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AUTHORIZATION AGREEMENT FOR ELECTRONIC DIRECT DEPOSIT

(See electronic direct deposit information
on reverse side of this form.)

PERSONAL INFORMATION

Social Security Number

Birth Date (Mo, Day, Yr)

Daytime Phone

MEMBER'S NAME & ADDRESS (PLEASE PRINT):

First

Middle

Last

Mailing Address

City/Town

State

Zip Code

Date Stamp Area

FINANCIAL INFORMATION

If you have questions concerning the information below, contact your financial institution.

TRANSIT ROUTING NUMBER

DEPOSITOR ACCOUNT NUMBER

My signature below authorizes MainePERS to remit any benefit payments due to me by crediting my account indicated above. The financial institution named above is requested to A) accept any deposits initiated by MainePERS to this account and B) credit these deposits to the account without responsibility for their correctness. I hereby authorize MainePERS to recover from this account any overpayments to this account due to death, change in benefit status, or other legitimate causes.

FINANCIAL INSTITUTION INFORMATION:

Name: _____

Address: _____

Telephone: _____

Generally, if your authorization agreement is in our office before the 15th of the month, the direct deposit will take effect in the same month.

Electronic direct deposit is not available to financial institutions outside of the U.S.

Check one:

Check one:

Checking

Whole Check

Savings

Specify Amount: \$ _____

YOUR SIGNATURE _____ DATE _____

CHECK INFORMATION

Example of a check with the fields identified that are necessary to complete the Authorization Agreement:

YOUR NAME 123 Your Street City, State Zip	1026 52-0000/1234
Pay to the Order of _____] \$	<input type="text"/>
	_____ DOLLARS
YourBank <input type="checkbox"/> Bank Address	
For _____	
⑆123456789⑆ 123456789101⑆ 1026	

ABA Routing & Transit Number
9 numbers

Depositor Account Number

Do NOT include the check number

(Electronic direct deposit information on reverse side of this form.)

Electronic direct deposit is a fast, safe and convenient way of receiving a benefit payment. Payments are generally posted to an annuitant's 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 periodically mail an advice of deposit which provides detailed information, including payment amount, deductions and tax withholding, and where the net benefit payment has been deposited. MainePERS currently distributes advices of deposit to all annuitants in any January that is accompanied by a change in the tax tables (typically every year); in June (when insurance premium adjustments are most likely to take place); when cost-of-living increases are applied in September; and in December, when annual totals may be necessary for tax and year-end planning.

Initiating Direct Deposit:

A completed, signed, and dated Authorization Agreement for Electronic Direct Deposit must be submitted to the Maine Public Employees Retirement System prior to the payment of a retirement benefit. We must receive your completed authorization form before the 15th of the month in order to issue a payment in that month. Payment will not be issued if an error is detected in either the transit routing number or the account number provided to us on the authorization form. We request that a check marked "void" be attached to your direct deposit form in order to guarantee accurate recording.

Changing the Direct Deposit Financial Institution or Account Number:

A new Authorization Agreement for Electronic Direct Deposit must be submitted in order to change the financial institution and account number, or in order to change the account number applicable to the current financial institution. If we receive the new form after the 15th of any month, the change may not be effective until the following month. The old direct deposit account should not be closed before a successful transfer has been made to the new account.

Multiple Benefit Recipients:

A service retirement benefit recipient who selects a benefit payment option that provides for concurrent benefit payments to him/herself and a designated beneficiary must submit separate authorization forms for each recipient of a benefit payment, even if the recipients use a joint account.

If you have questions or need additional information regarding electronic direct deposit, please contact Payrolls Administration at one of the numbers listed on the front of this form.