

Oklahoma Direct Deposit Enrollment Form

YOU ARE CURRENTLY ENROLLED IN THE OKLAHOMA DEBIT MASTERCARD® CARD PROGRAM

If you would like to sign up for Direct Deposit, you must complete this form and return it to the address below:

- You **MUST** attach either a voided check to have the funds deposited in your checking account or a **savings account deposit slip** to have the funds deposited in your savings account.
- **Staple or Tape your voided check or savings account deposit slip to this form.**
- Your name **MUST** be pre-printed on the voided check or savings account deposit slip.
- Mail this completed form to: **Conduent for OKDHS Direct Deposit
Dept. SGS
P.O. Box 80589
Austin, TX 78708**

REQUIRED INFORMATION FOR DIRECT DEPOSIT

Enrollee Information

First Name: _____ MI _____ Last Name _____

Social Security Number (SSN) _____ - _____ - _____

Oklahoma DHS Case Number (DCN) _____

Account where I want my benefits deposited

Bank or Financial Institution _____

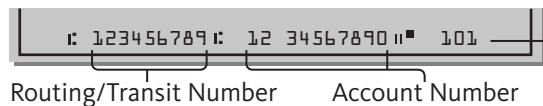
Bank Address _____

Account Type (select one): Checking Savings

Bank Routing/Transit Number: _____

Account Number
(up to 17 digits): _____

You can find your bank information on your checks as shown below:



I certify that I am eligible to receive payments from the Oklahoma Department of Human Services (OKDHS). I authorize the OKDHS to send my payments to the financial institution named above to be deposited in the account indicated above. This authorization will remain in force until Conduent receives a written notice from me asking for termination. Conduent shall have a reasonable time to process the termination.

Signature: _____ Date: _____