US Army Corps of Engineers Finance Center (UFC)

# DIRECT DEPOSIT AUTHORIZATION

For use of this form, see Public Law 104-34; the proponent agency is CEFC-FD.

**See instructions on the reverse of this form**

**PRIVACY ACT STATEMENT**

**Authority**: All information collected on this form is required under the provision of Public Law 104-134, 31 U.S.C. § 3322 and 31 C.F.R. § 210.

**Principal Purpose**: This information will be used by the Treasury Department to transmit payment data by electronic means to the vendor's or USACE employee's financial institution.

**Routine Uses**: In addition to those disclosures generally permitted under 5 U.S.C. § 552a of the Privacy Act, this information may be disclosed for any of the DoD "Blanket Routine Uses" set forth at the beginning of the Army's Compilation of Systems of Record Notices in the Federal Register.

**Disclosure**: Disclosure is voluntary; however, failure to provide the requested information may delay or prevent the receipt of payment through the Automated Clearing House Payment System.

1. Check One of the Following Statements

☐ **ADD** – Deposit my Payment to the account shown ☐ **CHANGE** - Financial Institutions and/or Account Number

2. Installation EROC or Name of District Office

3. Corps of Engineers Employee Name or Company Name (*as shown on invoice*)

4. Address | 5. City | State | Zip

6. Mailing Address (*If different*)

7. Daytime Phone | Email

**Note:** Contract # (*Optional*): If more than one contract, please list on separate sheet. Please ask your Financial Institution for your Depositor Account Number and "ACH" Routing Number

Type of Depositor Account (*Please Check a Box*)

☐ 8. Checking ☐ 9. Savings

10. Depositor Account Number

| | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

11. Name of Financial Institution

12. Address | 13. City | State | Zip

14. Routing Number | 15. Depositor Account Title

16. Tax ID Number (TIN) for Business or SSN for Individuals

17. Signature | 18. Date

**Mail to:**
USACE Finance Center
ATTN EFT/Disbursing
5722 Integrity Drive
Millington TN 38054-5005

You may fax your document directly to
the Corps of Engineers Finance Center
Disbursing Office at:
901-873-9260 or 901-873-9261

# EFT IS MANDATORY

## FOR VENDOR PAYMENTS AND EMPLOYEE TRAVEL PAYMENTS

(UNLESS A WAIVER IS GRANTED)

Public Law (PL) 104-134, the Debt Collection Improvement Act of 1996, requires that all federal payments with few exceptions be made via Electronic Funds Transfer (EFT).

Reference: Department of the Army, U.S. Army Corps of Engineers, CERM-F letter dated 8 Feb 1999,
Subject: Implementation for Electronic Funds Transfer (EFT) for Federal Payments

In order to comply with this requirement, complete the Direct Deposit Form and return it. If you are unsure of routing or account numbers consult with your financial institution to fill out the bottom portion of the form. Once EFT is established, instead of receiving checks, you will have payments directly deposited into your checking or savings account.
(If you have already signed up, please disregard).

Utility and Phone Companies – In order to facilitate establishing acceptable invoice numbers please call point of contact.

For questions contact 901-873-9177 (Commercial) or CEFC-FC-EFT@usace.army.mil

## INSTRUCTIONS FOR COMPLETING UFC FORM 23

(1) Vendors and/or travelers should indicate if this transaction is an "add" as a new Direct Deposit to be set up or a "change" to the already existing information. USACE employees already on payroll Direct Deposit that have not completed a form for travel reimbursements should mark Add.

(2) Include the Corps of Engineers District name (example Mobile) or EROC (example: K5) that wrote the contract authorizing payment. If more than one District issued contracts, prepare a separate form for each District.

(3) Include the Name Or Company as it appears on the invoice. If the contract was written to Bill and Betty Smith, the bill and Direct Deposit form should include both names, not just Bill. If you are a Corps Employee, this will be your name.

LOOK AT YOUR TREASURY CHECK
. Check #
*CONTRACT NUMBER*
COMPANY NAME & ADDRESS
EROC

(4) This address is the physical address of the business. If you are a Corps employee, this is your home address.

(5) The city, state, and zip that match the physical address.

(6) The mailing address will include any and all remit to/payment addresses that are different from the physical address. If more space is needed, include as attachment page with all addresses listed. This is VERY IMPORTANT as the routing and bank account number is loaded on specific payment addresses.

(7) Include Daytime phone number in case there are questions concerning the completed form.

(8) Check if the bank account number furnished is a checking account.

(9) Check if the bank account number furnished is a savings account.

(10) Include bank account number, one number in each slot. This number for checking account is located on the bottom portion of your checks, usually after a nine digit number. Do not include the check number which sometimes appears in front or behind the actual account number.

(11) The full name of your bank.

(12) The actual street address or PO BOX of your bank/financial institution.

(13) The City, State, and Zip Code of your bank/financial institution.

(14) The Bank's routing number. This is your bank's identification number in the Federal Reserve System. Every bank's routing number consists of exactly nine numbers. To locate your bank's routing number look at the bottom of your check at those series of numbers. You should find a series of nine numbers either "off to themselves" or between colons. This is your bank's routing number.

John Citizen Check ###
Your Address
Your Bank

Pay to the Order of _____ $_____

_____Dollars

Bank Name
Bank Address
Bank City/State/Zip

**123456789*: Check ### Your Account Number**

(15) Depositor Account Title (Name on bank account)

(16) For Corporations and Businesses, use the company's IRS Tax ID number. For Sole Proprietorships and Individuals, write your social security number.

(17) Forms for businesses should be signed by a company officer. Forms for Employees/individuals should be signed by the specific person.

(18) Date of Authorization (i.e. Date Signed)

**COMPLETED FORMS MAY BE EMAILED TO THE POINTS OF CONTACT OR FAXED TO THE DISBURSING OFFICE AT 901-873-9260 or 901-873-9261**