



KPERS-15B Rev. 6/09

DIRECT-DEPOSIT AGREEMENT FOR PAYMENT OF BENEFIT TO FINANCIAL INSTITUTION

■ **Contact Us** – toll free: 1-888-275-5737 • phone: 785-296-6166 • fax: 785-296-6638
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■ **Part A – Benefit Recipient Information**

- 1. Social Security Number: _____ - _____ - _____
- 2. Name (First, MI, Last): _____
- 3. Telephone Number: (____) _____
- 4. Mailing Address: _____
City, State, Zip: _____

■ **Part B – Financial Institution Information** – Please verify the **nine-digit** routing number for electronic transfers with your financial institution.

- 1. Financial Institution: _____
- 2. Location (City, State): _____
- 3. Telephone Number: (____) _____
- 4. Type of Account: Checking Savings
- 5. Routing Number for Electronic Transfers: _ _ _ _ _
- 6. Bank Account Number: _____

■ **Part C – Benefit Recipient Authorization** – If this form is signed by anyone other than the benefit recipient, a copy of legal authorization (e.g., durable power-of-attorney, guardianship or conservator documents) must be attached or currently on file with KPERS.

“I authorize the named financial institution to act as my agent to receive my monthly benefit from the Kansas Public Employees Retirement System (KPERS) for the purpose of making direct deposits to my account. If monies to which I am not entitled are deposited to my account, I authorize the financial institution to return the funds to KPERS. By signing this form, I and each joint tenant on my account agree to allow KPERS to debit the account in order to recover any funds that were deposited in error.

I understand that this means of recovery shall not prevent KPERS from utilizing other lawful means to retrieve funds deposited in error. This authorization hereby revokes all prior payment directions given to KPERS and remains in effect until I give KPERS written notice.”

Benefit Recipient Signature: _____ Month/Day/Year: ____/____/____

DIRECT DEPOSIT INSTRUCTIONS

It is not necessary to fax this instruction page with your form.

■ Instructions

All information requested on this form is necessary to direct your payment to your financial institution. The Retirement System cannot accept forms that are incomplete or have been altered in any way.

It is very important that you notify KPERS if your address changes, even though your benefit is directly deposited. The address listed on this form will update our records.

Please verify the financial information with your financial institution before completing Part B. Be sure that the routing number reflects the number for *electronic transfers*. This nine-digit number may be different from the routing number for the branch bank at which the account is held. You should be able to find the correct routing number on your checks. See the sample check below. If you are depositing into a savings account, contact your financial institution for the correct routing number.

Your monthly benefit payments will be directly deposited in your account on the last working day of each month. In the event of your death, payments dated after the last day of the month in which your death occurs must be returned to the Retirement System. The Retirement System will then determine survivor benefits, if any, and begin payments.

■ Changing Financial Institutions

Your monthly benefit payment will be sent to the financial institution you select until you notify the Retirement System that you wish to change financial institutions. You can make a change at any time by completing a new direct deposit form for the new financial institution. You may want to consider maintaining accounts at both financial institutions until the transaction is complete. This change may take 30-60 days to become effective.

■ Cancellation

Notify the Retirement System immediately if this direct deposit authorization is cancelled. The financial institution cannot cancel your authorization for you.

■ Sample Check

YOUR NAME 123 Main Street Anyplace, KS 60000	DATE _____	1234
PAY TO THE ORDER OF: _____		\$ <input type="text"/>
		DOLLARS
ANYPLACE BANK Anyplace, KS 60000		
MEMO _____		
(250250025)	(202 020 8)	(1234)

9-Digit Bank
Routing Number

Your Account
Number

Check
Number