



**Department of Veterans Affairs  
Central Iowa Health  
Care System**

**Direct Deposit Enrollment Form**

Dear Veteran,

The U.S. Department of Treasury, under 31 CFR Part 208, now requires Federal payments, including beneficiary travel and compensated work therapy, to be made electronically. The information you provide on this form will be used by the Treasury to transmit payment data though electronic funds transfer to your financial institution.

Complete **all** fields in the Information Section below. To return your form, you may:

- **Bring** the completed form to the Agent Cashier Office at your next appointment; or
- **Fax** it to our secure fax line at (515) 278-4145; or
- **Mail** it to ATTN: Finance Office - 04, 3600 30<sup>th</sup> Street, Des Moines, IA 50310

<b>First &amp; Last Name</b> _____	<b>Social Security#</b> <input type="text"/>
<b>Address</b> _____	<b>City</b> _____ <b>State</b> _____ <b>Zip</b> _____
<b>Bank Name</b> _____	<b>City</b> _____ <b>State</b> _____ <b>Zip</b> _____
<b>Routing Transit #</b> <input type="text"/>	<b>Account #</b> _____
<small>(Routing Transit # Found on the bottom of your personal check, <u>must have 9 digits</u> and begin with "0", "1", "2" or "3")</small>	
<b>Circle Account Type:</b>	Checking      Savings
<b>Signature</b> _____	<b>Phone #</b> (      ) _____

For questions concerning the EFT process, please contact Fiscal Service at (515) 699-5999 ext. 4267.

