



Direct Deposit Enrollment Form

Routing and Transit Number (RTN): 3243-7751-6

Complete and fax this form to (801) 778-8079 for immediate processing.

First Name: _____ Last Name: _____ MI: _____

Social Security Number: ____ - ____ - ____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip Code: _____

Telephone: (____) ____ - _____

Please list account number without dashes or other characters in ONE of the account type fields below.
Your account number, up to eight digits, can be found on your America First account statement.

Savings	-----	1
Money Market	-----	7
Checking	-----	9

Type of Payment:

- Civil Service (OPM)
- Social Security
- Supplemental Security Income
- Railroad Retirement
- Veterans Administration

Is payment being received for another individual (i.e. child)? Yes No

If yes, please list his or her name: _____

Please list his or her Social Security Number: ____ - ____ - ____

