

Cafeteria Plan Advisors, Inc.
420 Washington St. Suite LL8
Braintree, MA 02184
781-848-9848
781-848-8477 (fax)

Direct Deposit Now Available

If you would like to have your reimbursements deposited directly to your checking or savings account, please complete and sign below.

Send a copy of a voided check back to us with this Authorization form. (If you fax the Authorization form, be sure to fax this page as well and send the voided check in the mail.)

I hereby authorize Cafeteria Plan Advisors, Inc. to deposit my claim reimbursements directly to my bank. I also authorize drafts to adjust any over-deposits that were credited to my account.

Name: _____ SSN: _____

Employer: _____

E-Mail Address: _____
Required if you want notification of each deposit

Name of Bank: _____

Bank Address: _____

Checking: Savings:

Account Number: _____

Routing Number (9 digits): _____

Signature: _____ Date: _____

Note: You must notify us immediately of any change to your bank account.

Place voided check here: