1417 Campaign Information System

Part 6. EFT and Payroll Contact Information
**CFC of the XXXXXXX (000) was last updated on: 2006-02-02 11:58:26.0 (EST)

Instructions: Complete the fields below and use the save/continue buttons to complete your work.
(This information is provided only to federal payroll providers and does not appear at the OPM-CFC website.)

PCFO Primary Contact for Payroll Issues (Required)

Prefix: [_____ ▾] or [_____]   First Name: [_____]   Last Name:
[_____]

Telephone (including area code): ([____]) [____] - [____] Ext. [____]   Fax (including area code): (
[____]) [____] - [____]

Email: [_____]

Mailing Address: [_____]

City: [_____]   State: [_____ ▾]   Zip: [____] - [____]

EFT Information (All fields required)

Financial Institution Name:
[_____]

Routing Number (Must be nine digits): [_____]

Account Number: [_____]   Account Type (Select one): ☐ Checking ☐ Saving ☐ Money Market

Save/Continue to PCFO   **Save/Continue to LFCC**   **Save/Continue to FEBFEA**   **Save/Back to Main**