## **DIRECT DEPOSIT AUTHORIZATION FORM**

PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit data, by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

AUTHORIZATION  I hereby authorize U. S. Army Corps of Engineer, hereinafter called USACE, to initiate direct deposit credit entries to my (our) account indicated below and the financial institution named below, hereinafter called DEPOSITORY, to credit the same to such account  (1) Check One of the following Statements:  I am not currently participating in the Direct Deposit Program  ( ) ADD - Deposit my payment to the account shown.  ( ) CHANGE - Change financial institutions and/or account number.
(2) Installation EROC
Name or (Company as shown on Invoice): $\int \delta h n  \rho \delta e$
Address: 123 West Street
City: Winchester State: VA Zip: 22601
Mailing Address (if different): 5 ame as above
Daytime Phone: ( ) 540 - 665 - 9988
Contract # (Optional):  If more than one contract, please list on a separate sheet.
Please ask your Financial Institution for your Depositor Account Number and Routing Number
(Indicate which type account to credit)
Type of Depositor Account Checking (8) Saving (9)
Please check a box.
Depositor Account Number (10) 123456789
Name of Financial Institution:
(11) Winchester Notional Bank
Address: 714 601f Rd
City
(13) Winchester VA 22601 Routing
Number: 5 1 4 3 7 8 9 1 0
Depositor Account Title:
(15) John Doe
Tax ID No. (TIN) for Business: (16)
SIGNATURE: (17) John De DATE: (18) 5 Oct 05

Mail To: USACE Finance Center, ATTN: EFT/DISB, 5720 Integrity Drive, Millington, TN 38054-5005

FORM: UFC-DISB-4 (Rev 5/99)