# DIRECT DEPOSIT AUTHORIZATION

TMRS Texas Municipal Retirement System

TMRS PO Box 149153 Austin, TX 78714-9153 800.924.8677 fax 512.476.5576 www.tmrs.com

## PERSONAL DATA

*Please use black ink and do not highlight. Mail or fax completed form to TMRS.*

Name (First, Middle, Last) _____ Social Security Number _____

Mailing Address (Street or PO Box) _____ Date of Birth _____

City _____ State _____ ZIP _____

Daytime Phone Number _____ E-Mail Address _____

## FINANCIAL INSTITUTION DATA

Name of Financial Institution _____ Phone Number _____

To ensure accuracy, please tape a voided check here **(no deposit slips).**

Routing Number (first nine digits) _____ Payee Account Number _____

**Type of Account:** ☐ **Checking** ☐ **Savings**

## PAYEE'S AUTHORIZATION

I authorize the Texas Municipal Retirement System (TMRS) to deposit my monthly retirement benefit electronically to the financial institution and the account indicated above. I also authorize TMRS to correct any credit entries made in error.

**Payee's Signature** _____ **Date** _____

* T M R S 0 8 0 E *

### Important Information About Direct Deposit

- **ACCOUNT CHANGES** If you change your account or account number, you must file another direct deposit authorization.
- **FUND AVAILABILITY** Generally, your money will be deposited to your account and available by the last business day of the month.