

**Keystone Flex Administrators, LLC**  
**Direct Deposit Authorization**

I hereby authorize Keystone Flex Administrators, LLC to initiate credit entries for depositing my reimbursements into my account (designated below). It is understood that a Direct Deposit could take up to 5 days to complete and I have been instructed to contact my financial institution to ensure that funds have been deposited prior to accessing them. Direct Deposit Setup requires the bank account and ACH numbers be verified for accuracy before any funds are transferred. For this reason, you may receive one or two reimbursement checks that need to be cashed.

**PLEASE NOTE:** When a consumer bank account is added or updated *by the consumer* via their portal or mobile app, a micro-deposit credit and debit verification transaction must be validated to activate the bank account. The micro-deposit is for a random amount ranging from \$0.01 and \$0.99. **If the account is added manually by the administrator through completion of this form, the micro-deposit will not be required.**

Group Name \_\_\_\_\_

Employee Name \_\_\_\_\_

(please print or type)

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Daytime Phone Number: Home(\_\_\_\_) \_\_\_\_\_ Work(\_\_\_\_) \_\_\_\_\_

1. Type of action requested: Setup \_\_\_\_\_ Change \_\_\_\_\_ Cancel \_\_\_\_\_

2. Type of Account: Checking \_\_\_\_\_ Savings \_\_\_\_\_

3. Bank Name \_\_\_\_\_ Phone#(\_\_\_\_) \_\_\_\_\_

Bank Routing (ACH) Number\* \_\_\_\_\_

Bank Account Number\* \_\_\_\_\_

This authority is to remain in full force and effect until Keystone Flex Administrators, LLC has received written notification from me of its termination in such time and in such manner as to afford Keystone Flex Administrators, LLC a reasonable opportunity to act on it.

Employee  
Signature \_\_\_\_\_ Date \_\_\_\_\_

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