

# Verizon Benefit Payment Direct Deposit Authorization

Please complete the following information, then return your signed form to the Verizon Benefits Center at the address below to have all of your benefit payments made directly to your designated account.

## Financial Institution Information

Type of Account:  Checking or  Savings

Name of Bank or Financial Institution: \_\_\_\_\_

Verify the numbers provided below with your bank or financial institution to avoid errors that may delay your benefit payments. You may also attach a check to this form, as it will include your account number and bank routing number (make sure you write "VOID" across the check in large letters).

Account Number: \_\_\_\_\_

FRB Routing Number (nine digits) \_\_\_\_\_

## Establish or Change Direct Deposit Option

I authorize the Verizon benefits payer to deposit all of my benefit payment(s) directly into the account named above. This authorization will remain in effect until I change it by submitting a new *Verizon Benefit Payment Direct Deposit Authorization*, or until I have requested that this authorization be canceled by calling the Verizon Benefits Center. I understand that I must give adequate notice and allow reasonable time for my instructions to be processed. If an incorrect amount should ever be paid into my account, I authorize the Verizon benefit payer to direct my bank or financial institution to make the appropriate credit or debit adjustment to correct the error.

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Last four digits of Social Security Number: XXX-XX-\_\_\_\_ (Required)

## For More Information:

If you need additional information, call the Verizon Benefits Center. Make sure you have the last four digits of your Social Security number, your date of birth, and Benefits Center password available, then dial **1-855-4Vz-Bens (1-855-489-2367)**. Listen to the main menu to make your selection and then follow the prompts to reach a representative.

## Return this completed form to:

**Verizon Benefits Center  
P.O. Box 8998  
Norfolk, VA 23501-8998**