FS Form 5396-1 (Revised June 2020)

OMB No. 1530-0050

Direct Deposit Sign-Up Form Attachment

Attached to and made a part of FS Form:



Sign in ink.				
Sign Here:				
	(Print Name)			(Social Security Number)
Home Address	(Number and Street or Rural Route)			(Daytime Telephone Number)
	(City)	(State)	(ZIP Code)	(E-mail Address)
Sign Here:				
	(Print Name)			(Social Security Number)
Home Address		Street or Rural Rou	te)	(Daytime Telephone Number)
	(City)	(State)	(ZIP Code)	(E-mail Address)
Sign Here:				
	(Print Name)			(Social Security Number)
Home Address	(Number and Street or Rural Route)			(Daytime Telephone Number)
	(City)	(State)	(ZIP Code)	(E-mail Address)
Sign Here:				
	(Print Name)			(Social Security Number)
Home Address	(Number and Street or Rural Route)			(Daytime Telephone Number)
	(City)	(State)	(ZIP Code)	(E-mail Address)