

DIRECT DEPOSIT AUTHORIZATION

clai

reserve	Name:
ox 631458, Littleton, CO 80163 3-722-1223, FAX: 866-557-0109 @rmrbenefits.com RockyMountainReserve.com	Employer:
•	SSN:
ailing Address:	
aytime Phone Number	r: Plan Year:
	ARRIES FORWARD FROM YEAR TO YEAR. IF A FORM IS ON FILE WITH ROCKY IT IS NOT NECESSARY TO SEND IN A NEW FORM EACH YEAR.
	rize and request the payment of all future claims be by direct deposit to my account. I up to 10 days for the change to be effective.
STOP: I hereby authoriz record.	ze and request the payment of all future claims be by check and mailed to my address of
	I haraby authorize and request the navment of all plaims he by direct deposit to the nav
	I hereby authorize and request the payment of all claims be by direct deposit to the new tand it may take up to 10 days for the change to be effective.

PLEASE DO NOT STAPLE

Policies of Direct Deposit:

- Participants have the opportunity to receive their claim payment by direct deposit into their checking account or by check mailed directly to them. If participants make no election a check will be mailed directly to the address of record.
- Rocky Mountain Reserve agrees to mail a check or initiate a direct deposit within seven business days from the date a claim is received or the date a contribution is received from the employer to initiate the claim reimbursement.
- Due to banking limitations, the initial direct deposit, for any participant, may take up to ten days from the date the direct deposit authorization is received. Because of this banking limitation, the first reimbursement may be by check.
- If a check is sent, the check stub will contain the participant's account balance and activity. If a direct deposit is requested, notification of payment will be sent to the email on file. Participants may look up their account activity on our website.
- Participants requesting direct deposit must provide, or have previously provided an election for direct deposit and a voided check.

Employee Signature	Date