



B. J. Walker, Commissioner

Georgia Department of Human Resources • Office of Financial Services
Suite 27-232 • Two Peachtree Street, NW • Atlanta, Georgia 30303-3142
Phone 404-656-2072 • Fax 404-651-9337

**Authorization Agreement for Electronic Payment
Employee Vendor**

Employee Name	
Street Address	
City, State, Zip Code	
Social Security Number	

I authorize the Georgia Department of Human Resources (DHR) to deposit payments directly into my bank account. DHR is also authorized to adjust any over/under deposit that it has caused to be made to this account. I recognize that the deposit of the payment shall be made by electronic means through electronic data interchange (EDI). I further acknowledge that the responsibility of DHR to provide this payment shall be satisfied by DHR providing a correct credit entry in accordance with the automatic deposit services agreement (credits) between DHR and First Union National Bank.

Payments are to be deposited into my checking account at _____
(name of financial institution). Attached below is a voided check showing the correct information for the account. If my bank or bank account changes or if I decide to stop the electronic payment process, I am responsible for notifying the DHR Office of Financial Services (OFS) in writing of the change immediately.

Employee Signature	Date	Business Telephone #

ATTACH VOIDED CHECK HERE

Mail this form and voided check to: Georgia Department of Human Resources
Office of Financial Services Vendor Desk
2 Peachtree Street, N. W. Suite 27.402
or Atlanta, Ga 30303-3142

FAX this form and voided check to: (404) 657-6945