



## Direct Deposit/Electronic Funds Transfer Authorization Form

FrontStream Admin Only:  
Check #

### Organization Details

|                       |  |
|-----------------------|--|
| Name of organization: |  |
| EIN:                  |  |
| Street Address:       |  |
| State:                |  |
| Zip Code:             |  |
| Telephone Number:     |  |

### Bank Details

Please enter the details of the account where you want FrontStream to deposit funds

|                 |  |
|-----------------|--|
| Account Name:   |  |
| Bank Name:      |  |
| Routing Number: |  |
| Account Number: |  |

### Authorized Officer of Organization

|                           |  |
|---------------------------|--|
| Name:                     |  |
| Position at organization: |  |
| Date:                     |  |
| Email address:            |  |

Authorized Signature: \_\_\_\_\_ Date \_\_\_\_\_

To complete your direct bank deposit/EFT setup and receive payments from FrontStream, please [submit a request here](#) and attach:

1. This completed form
2. A copy of your driver's license
3. Imprinted voided check or bank letter

[Learn more about how your organization gets paid](#)