



Montana Teachers' Retirement System

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TRS Office Use Only

FORM 114: APPLICATION FOR ELECTRONIC DEPOSIT

In compliance with the Americans with Disabilities Act of 1990, alternative accessible formats of this document will be provided upon request.
PLEASE TYPE OR PRINT LEGIBLY IN DARK INK

Please review the information on page 2. MEMBER / BENEFIT RECIPIENT INFORMATION

_____		_____		_____		XXX - XX -	
Full Name: First	Middle	Last	Suffix (<i>Jr., Sr., etc.</i>)		Last 4 Digits of SSN		
_____			/ /		()		_____
Maiden or Other Name Previously Reported to TRS			Birth Date (mm/dd/yyyy)		Telephone Number		
Mailing Address: Street or P.O. Box		City	State	ZIP Code (<i>use Zip+4 if known</i>)			
Is this a new mailing address? <input type="checkbox"/> Yes <input type="checkbox"/> No							

AUTHORIZATION: I hereby authorize the Montana Teachers' Retirement System (TRS) to initiate electronic deposits of my monthly benefit into my account at the financial institution named below. (Applicable legal documentation must be provided if someone other than the member or benefit recipient signs this form.)

Member/Benefit Recipient's Signature Date

JOINT ACCOUNT HOLDER INFORMATION

_____		_____		
Joint Bank Account Holder's Full Name	Telephone Number			
Joint Account Holder's Mailing Address: Street or P.O. Box		City	State	ZIP Code (<i>use Zip+4 if known</i>)

FINANCIAL INSTITUTION INFORMATION

TRS cannot make electronic deposits to banks outside of the U.S.

_____		_____		
Name of Financial Institution	Telephone Number			
Financial Institution's Mailing Address: Street or P.O. Box		City	State	ZIP Code (<i>use Zip+4 if known</i>)
Account Type: <input type="checkbox"/> Checking → <i>Attach voided check below</i>				
(<i>Mark only one</i>) <input type="checkbox"/> Savings → _____	Savings Account Number	Financial Institution's 9-Digit Routing Number		

IF YOU MARKED "CHECKING" ABOVE,
THIS FORM IS INVALID UNLESS YOU ATTACH
A VOIDED PERSONAL CHECK IN THIS SECTION
USING CLEAR TAPE ONLY.
DO NOT ATTACH A DEPOSIT TICKET.

**OVERVIEW**

Do not close your old account until your first payment has been deposited into your new account

TRS is pleased to offer you the convenience of electronically depositing your monthly benefit. Monthly benefits are paid on the last business day of each month. Utilizing the electronic deposit option, your benefit will be electronically deposited into your bank account and posted on the last business day of each month. All requested information on the front of this form must be completed in order for TRS to initiate an electronic deposit on your behalf.

This form requests that you provide your social security number (SSN). Internal Revenue Code Sections 6041(A) and 6109 authorize TRS to solicit your SSN.

- The disclosure of the last four digits of your SSN to TRS is mandatory.
- TRS will use your SSN to ensure that any amounts disbursed under your account are properly reported to the Internal Revenue Service and as a reference number for tracking all data with regard to your retirement account.
- TRS will not disclose your SSN to any party unless required by law.

Your first payment will be deposited into your account within 60 days after this authorization is received by TRS. This includes a transfer from one financial institution to a new financial institution, or a change in account number.

The first month your benefit is electronically deposited, a check stub will be mailed to your home mailing address on file with TRS. Following your initial electronic deposit, check stubs will only be mailed to you when your net monthly deposit amount changes.

TRS does not allow the U.S. Postal Service to forward mail generated by this office. Therefore, it is imperative that TRS be notified, in writing, of all changes to your home mailing address, even if you receive your checks by direct deposit. Having your current address on file ensures prompt delivery of notices and other correspondence about your benefits, along with year-end tax statements.

SPECIAL NOTICE TO JOINT ACCOUNT HOLDERS

Joint account holders should immediately advise both TRS and the financial institution of the death of the benefit recipient. Funds deposited after the date of death or eligibility must be returned to TRS. A determination regarding any death benefits payable will be made by TRS.

CHANGING ACCOUNTS AND/OR FINANCIAL INSTITUTIONS

In order to implement a change in electronic deposit, a new form must be completed, or adequate written documentation must be submitted to TRS. A new Form 114 *Application for Electronic Deposit* can be obtained by visiting the TRS website (trs.mt.gov/trs-info/forms) or by calling TRS at 406-444-2441.

CANCELLATION

Your electronic deposit will continue to be deposited into your designated bank account until you notify TRS, in writing, that you wish to change your account or financial institution, or upon the notification of your death.