



H&R BLOCK
bank

H&R Block Bank
Monthly Direct Deposit Form

Mail or FAX completed forms to:
PO Box 2569, Omaha, NE 68103
Fax: 866-812-3144

Questions? Call us at 1-800-HRBLOCK

| Account Owner | |
|-----------------------------|---|
| Name (Print Clearly) | Contact Phone Number: □□□□-□□□□-□□□□ |
| Account Number: □□□□□□□□ | SSN/TIN: □□□□-□□□□-□□□□ |

This form is used to initiate monthly direct deposits.

Name of Financial Institution ("Depository")

Street Address of Financial Institution

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Transit/ABA Routing Number

Financial Institution Account Number

Checking

Savings

Deposit Information

Initiate Service Change Service Cancel Service

Month to initiate deposits _____

Amount \$ _____ Monthly on the: 1st 15th 25th

* Minimum \$25

CURRENT YEAR ONLY Fees will apply for funds that are **returned or rejected.**

* **Systematic deposits will continue until account owner requests cancellation.**

** **If you are setting up direct deposit for an IRA, please note that for both traditional or Roth IRAs, the maximum contribution per month is \$333.33 (\$416.66 if age 50 or older)**

REQUIRED: Attach here a voided check or a letter on bank stationery confirming the account title, account number and routing number. Deposit slips and bank statements will not be accepted.

Required

X _____

Account Owner Signature

Date

Clarify Case# _____