

Direct Deposit Form

Complete this form to add direct deposit to your account. Please provide the completed form and a copy of a voided check. Important: Additional steps are required to activate your bank account after your form is processed. See Step 4 for more details.

* = Required Fields

Step 1: Participant Information

*Employer Name (Do not abbreviate)

Employee ID

*Participant Name (First, MI, Last)

*Social Security Number

Updates or changes to your profile can be made by logging in to your account at <https://chard.lhondemand.com/Login>

Step 2: Financial Institution Information

*I am choose one
beginning canceling changing a direct deposit account.

*Account Type: choose one
Checking Savings

JON SMITH 1200
1234 8TH ST. S.
FARGO, ND 58102 DATE _____

PAY TO THE ORDER OF _____ \$

MEMO _____

0123456789 68590134 1200

Routing Number Account Number

*Routing Number (must be 9 digits)

*Account Number

*Financial Institution Name

Financial Institution Address

City

State

Zip

Step 3: Participant Authorization

I hereby certify the information provided on this form is accurate. Further, I understand my completion and submission of this form authorizes Chard Snyder to issue payment directly to the specified account unless I notify them otherwise.

*Participant Signature

Date

Step 4: Validate Your Bank Account

Further action is required to activate this bank account. A deposit followed by an immediate withdrawal not exceeding \$0.99 will be made to the account within the next 3-5 business days. Once you confirm the deposit, the account will be activated and available for use. To confirm the deposited amount from Chard Snyder, you can access your account online at <https://chard.lhondemand.com/Login>. Click the link in the Tasks section of your home page. If you have questions on confirming your bank account information, please contact Participant Services at 800.982.7715.