



ARIS SOLUTIONS

VD-HCBS Program DIRECT DEPOSIT AUTHORIZATION

Payroll checks must be deposited into ONE ACCOUNT only.

NAME: _____

TELEPHONE: _____

BANK NAME: _____

A VOIDED CHECK, COPY OF A CANCELED CHECK OR OTHER BANK DOCUMENT WITH YOUR ROUTING AND ACCOUNT NUMBERS MUST BE ATTACHED TO THIS REQUEST.

SAVINGS ACCOUNT

CHECKING ACCOUNT

(CIRCLE ONE OF THE ABOVE)

SIGNATURE

DATE

PLEASE NOTE THAT IT MAY TAKE ONE FULL PAYROLL PERIOD FOR YOUR DIRECT DEPOSIT TO BE IN EFFECT. YOU WILL RECEIVE HARD COPY CHECKS UNTIL THE DIRECT DEPOSIT PROCESS HAS BEEN COMPLETED

**** To make changes to your account please mail or fax a written request to ARIS Solutions. For your protection, we are unable to accept changes by phone.*

ATTACH VOIDED OR CANCELED CHECK HERE

**Mail to:
ARIS Solutions
PO Box 4409
White River Junction, VT 05001**