



Phone & Fax: 530-273-3300

Direct Deposit Sign-Up Form

I hereby authorize **Sierra Fiduciary Services, LLC** to deposit monies directly into my bank account.

Name:	
Address:	
Name of Bank:	
Account Number:	
Routing Number (9 digits):	
Client Signature:D	Oate:
Please check one box: Checking □	Savings □
Note: You must notify us immediately of any chang	ge to your bank account.
Place copy of cancelled or voided of If a check is not available. A bank verification	

Direct Deposit Disclosure

It is your responsibility to verify monies have been deposited to your account. Sierra Fiduciary Services, LLC will not reimburse you for bank charges due to anticipated monies in your account.

Please read and understand the following points regarding Direct Deposit.

- Payments due on a weekend or holiday are moved to the next processing day.
- Every bank handles electronic payments differently. Sierra Fiduciary Services, LLC has no control of how your bank will handle the transaction.
- Sierra Fiduciary Services, LLC cannot guarantee the funds will be available when anticipated.
- Your Social Security or Tax ID number is required by our bank for federal reporting purposes. It is used as an identifying number of account ownership for the purpose of properly applying funds to the correct account, notices of return and to identify corruptions. Your Social Security or Tax ID number may be shared with agencies Sierra Fiduciary Services, LLC is required to report to.
- It is your responsibility to verify each deposit has been made.
- Sierra Fiduciary Services, LLC will not reimburse you for bank charges due to anticipated deposits not made.

Please sign below only if you understand and agree to the conditions stated above.

I agree to allow Sierra Fiduciary Services, LLC to deposit monies directly to my personal bank account.

Client Signature: _	Date:
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