Missouri First Steps - Early Intervention
Central Finance Office

Direct Deposit Authorization/Change Request

The Missouri First Steps program provides a safe, easy, and trouble-free way for you to receive your payments.* Direct Deposit places your payments electronically into your checking account instead of having to wait to receive your check by mail.

Authorization/Change

I hereby authorize the Missouri First Steps-Central Finance Office, hereinafter called DESE-CFO, to initiate credit entries, and debit entries for any erroneous credit, to the following bank account (checking accounts only).**

Payee Information:

Payee Name:_____ FEIN/Social Security Number:_____

Payee Address:_____

City:_____ State:_____ Zip: _____

Payee Telephone Number: _____

Financial Institution Name: _____

Account Information: Attach a voided or canceled check. A copy is acceptable.

Name on Account:_____

Routing Number									

Account Number																

This authority is to remain in full force until DESE-CFO has received notification from me of its termination in such time and in such manner as to afford DESE-CFO and Depository a reasonable opportunity to act on it.

Furthermore, It is agreed that this agreement can be terminated by DESE-CFO with reasonable notification to the party.

Authorized Name:_____

Signature:_____ Date: _____

Please Return Completed Form and Documentation to:

Mail: Attn: Provider Enrollment
Missouri First Steps – Central Finance Office
P/O Box 29134
Shawnee Mission, KS 66201-9134

For CFO Use Only	Date Received	Date Entered	Entered by	Test Complete date

* If you elect to receive payments electronically, all funds must be designated to **one** account.
* *Negative balances at month end will not be debited from your checking account. The negative amount will be deducted from future payments.