



**Finance Department - Agreement for Electronic Funds Transfer (EFT)
For Child Care Provider Food Program Payments**

This form authorizes Family Resources, Inc. to deposit childcare food program payments directly into the bank account listed below. Once your account has been established and payments are being direct deposited, you will receive a notification of those payments via the email address below.

NOTE: The effective date of the direct deposit may take one month to process following receipt of this information.

Please check one: **New Application** **Change Direct Deposit Information**

Child Care Provider Information:

Provider Name: _____
Address: _____
City: _____ State _____ Zip _____
Telephone Number: _____
Email Address: _____ <i>(Required)</i>

Financial Institution Information:

Submit completed form to:

Account Information (<i>Check one</i>): <input type="checkbox"/> Checking OR <input type="checkbox"/> Savings
Bank Transit / Routing Number: _____ <i>(Ask bank for the transit/routing number for direct deposit)</i>
<i>Bank Customer Information:</i>
Bank Account Number _____
<i>* A voided check must accompany this application *</i>
Signature of Provider _____ Date: ____/____/____

**Family Resources, Inc.
Finance Department
5180 62nd Ave North
Pinellas Park, FL 33781**