

Effective date of benefits: \_\_\_\_\_

# Banking Authorization Form

## Retiree and Surviving Spouse

This banking authorization form will set up a payment option available for retirees or surviving spouses to pay university insurance premiums out of your account and/or to give authorization for depositing applicable funds into your account. Please note that only one transaction may apply.

### How it Works

Once enrolled in Retiree/Surviving Spouse benefits, the first week of each month you will receive a billing statement detailing your benefits insurance premiums.

- Review the charges listed on your bill. Contact Employee Services regarding any discrepancies as soon as possible.  
 Discrepancies not resolved by the 10th of the month will be corrected on the following month's bill. The university will debit your checking/savings account between the 15th & 20th of each month and/or the university will credit your checking/savings account on the last business day of the month.
- You may choose to receive your monthly statement by email or postal mail.
- If you wish to change your billing statement preference, please submit a new Banking Authorization Form or contact [benefits@cu.edu](mailto:benefits@cu.edu) for assistance with this process. The form with the latest date on file by the 10th of the month will be processed record for the month.

### Instructions

1. **Complete** the entire form, sign and date.
2. To complete it electronically, **download and save** first.
3. **Return** your completed form to Employee Services by following the instructions provided on the second page of this form. The form must be received by the 10th of the month for the following month's withdrawal or deposit.

### Retiree/Surviving Spouse Information

<b>Action Type (check one):</b>	<b><input type="checkbox"/> New</b>	<b><input type="checkbox"/> Change</b>	<b><input type="checkbox"/> Terminate</b>
_____	_____	_____	_____
Last Name	First Name	MI	Employee ID
_____	_____	_____	_____
Mailing Address			
_____			
Primary Telephone Number		Email Address	
_____	_____	_____	_____
Name of Financial Institution		Address of Financial Institution	
_____		_____	
Routing Number		Account Number	
_____		_____	
Account Type (check only one):			
<input type="checkbox"/> Checking	<input type="checkbox"/> Savings		

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I elect to receive my monthly statement by:

email – personal email address: \_\_\_\_\_

mail – current address on file with the university

For debiting, I authorize the University of Colorado Employee Services (ES), or its successors and assigns, to initiate debit entries to my account at the financial institution listed above, and to initiate correcting entries to my account if necessary. For depositing, I hereby authorize the University of Colorado to deposit my paycheck each payday directly into the account named above. This authorization will remain in effect until ES has received written notice from me of its termination in such time and manner as to afford it and its bank reasonable time to act on it. I acknowledge that the origination of transactions to my account must comply with the provisions of U.S. law. I also understand that I cannot cancel this authorization through any third parties, including my financial institution, but must cancel this authorization directly with ES. I understand that I must give advanced notice to allow reasonable time for my instructions to be executed. If an incorrect deposit should be made into my account(s), I authorize my bank(s) and the University of Colorado to make the appropriate adjustment(s).

Signature

Date

## How to Submit your Banking Authorization Form

Complete all the information, sign and return to Employee Services:

### Electronic Submit

- Save your form.
- [Upload your form in your employee portal.](#)
- [Upload your form online if you do not have portal access.](#)

Or

**Fax:** 303-860-4299

Keep a copy of the fax transmission report with your form for your records.

### Mail

Make a copy for your records and send the original to:

University of Colorado  
Employee Services  
1800 Grant Street, Suite 400  
Denver, CO 80203