

## AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS

EVERY ENROLLED MEMBER OF YSLETA DEL SUR PUEBLO (YDSP) 18 YEARS OF AGE OR OLDER MUST

## PROVIDE INDIVIDUAL BANK ACCOUNT INFORMATION, UNLESS OTHERWISE SPECIFIED:

( ) Married Joint Account	( ) Appointed Guardian or Conservatorship (Attach Court Order)			
Please check the appropriate space:				
New Account	Change Account	Cancel Account	;	
Name as it Appears on Bank Account	::			
Depository (Bank) Name:				
Bank Transit and Routing No.:				
Bank Account No.:				
Account Type (Check One): (	) Savings Account	() Checking Account		
Inclu	le a voided check or b	ank letter to verify the account		

## AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT COMMUNITY FUND DISTRIBUTION

By signing this form I agree to the following terms and authorize my Community Fund Distribution to be deposited directly to my checking/saving account at the financial institution shown above.

- This request will remain in effect until I have made a change request to the Community Portal to stop or change Direct Deposit.
- It is my responsibility to submit a change request of any changes or closed bank accounts.
- I authorize Ysleta Del Sur Pueblo Finance Department to initiate any credit and debit adjustments to my account for deposits processed in error.

## Tribal Member Name (Print Legibly)

First		Middle			
Last		(Sr. Jr. II etc.)	Enrollment#		
DOB	SSN	Email	Phone (	)	
Tribal Member Signature_		Date			
	Please submit the form via the Community Portal at the following web address:				
	https://ydspportal.p	powerappsportals.us/			



Scan to Sign Up