

**U.S. OFFICE OF PERSONNEL**

**DIRECT DEPOSIT SIGN-UP FORM (Turkey)**

**APPLICATION FOR PAYMENT OF UNITED STATES OFFICE OF PERSONNEL MANAGEMENT MONTHLY BENEFITS BY DIRECT DEPOSIT**

- Complete Section 1 and "SIGN YOUR NAME"
- Ask your bank to complete Section 3
- Mail completed form back using address in Section 2

**SECTION 1 (TO BE COMPLETED BY PAYEE)**

Name and Complete Mailing Address:		<b>CSA or CSF number (do NOT put a social security number)</b> <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> </tr> </table>									
Telephone Number:		THIS BOX IS FOR ALLOTMENT OF PAYMENT ONLY (if applicable) <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Type</td> <td style="width: 30%;">Amount</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> </table>		Type	Amount						
Type	Amount										
<b>PAYEE CERTIFICATION</b> I certify that I have read and understand the back of this form. In signing this form, I authorize the Social Security Administration to send my payment to my bank and deposit it in the designated account. I understand that personal information in these payments will be treated confidentially, but I consent to disclosure of payment information that is compelled by law or necessary to protect against fraud or crime.		<b>JOINT ACCOUNT HOLDER'S CERTIFICATION (optional)</b> I certify that I have read and understand the back of this form, including the SPECIAL NOTICE TO JOINT ACCOUNT HOLDERS.									
Your Signature	Date	Signature	Date								
Email address :		This account is: <input type="checkbox"/> My own account <input type="checkbox"/> A joint account									

**SECTION 2 (MAILING ADDRESS)**

<b>GOVERNMENT AGENCY NAME:</b>  US Office of Personnel Management	<b>MAIL COMPLETED FORMS TO:</b>  Office of Personnel Management-IDesk 1900 E Street, NW #2347 Washington, DC 20415 Fax : 202-606-2339
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**SECTION 3 (TO BE COMPLETED BY YOUR FINANCIAL INSTITUTION)**

Name of Bank (Nom de la banque)	Bank Phone Number (Numéro de téléphone de la banque)
Address of Bank (Adresse de la banque)	
Print Name of Bank Official	Signature of Bank Official
Type of Depositor Account <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
Print the IBAN number in the blocks below. Fill all blocks	Print the entire SWIFT/BIC code in the blocks below