

Mandatory Direct Deposit Exemption Procedures

The OPERS Board of Trustees has voted to require the use of direct deposit for benefits or lump sum payments. The Board made this decision with the best interest of both the System and our recipients in mind.

OPERS is not alone in enacting this policy. Numerous state agencies and local governments require their employees to receive wages by direct deposit. This requirement is in place for all OPERS employees. In addition, many government agencies, the largest being Social Security, have launched large campaigns that strongly encourage recipients to receive their benefits via direct deposit. Direct deposit helps our recipients by eliminating the risks of theft, non-delivery, or loss of checks. It could take up to a month to replace a check that has been lost in the mail. Direct deposit funds are securely transferred with no risk of delay or loss. Using direct deposit also eliminates the need to make special arrangements when you are going to be away from home.

Because of the financial advantages and added convenience, most OPERS recipients either already use direct deposit or will make this transition easily. We will consider special exemptions in unique cases where a recipient's inability to use direct deposit is proven. However, being strongly opposed to the concept of electronic transfer of funds is not a valid reason for exemption.

There are three types of recipients who will definitely receive an exemption and be allowed to continue receiving their monthly benefit or payment by check:

- Recipients who reside outside of the United States (recipients who reside outside the United States **do not have to submit** a request for exemption; they will automatically receive a paper check);
- Recipients who reside in remote areas where direct deposit is not available through a local financial institution (a remote area has been defined to mean more than a 15 mile drive to any bank that provides direct deposit); or
- Recipients whose payments go to a third party such as a nursing or convalescent home.
- Recipients who are victim of fraud or identity theft.

Recipients who reside within the United States, and believe they qualify for an exemption on the basis of the previously stated reasons or their inability to use direct deposit, **are required to submit** a *Request for Exemption from Mandatory Participation in Direct Deposit (*found on the back page of this document). OPERS staff will review each request and advise each recipient whether their request has been approved or denied. If the request is denied, the recipient will be required to participate in the direct deposit program.

If you have any questions please contact OPERS at 1-800-222-7377.

Request for Exemption from Mandatory Participation in Direct Deposit Complete this form to request to have your lump sum payment or retirement allowance sent by paper check.

Section 1	- Persona	al Inforr	nation	I														
Social Securit	Date of Birth						Mor	h	Day	Y	'ear							
First Name							MI	Last	Name									
Street or Mail	ing Address													Apt. N	Numbe	er		
City										Sta	te	ZIP	Code					
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Home Phone N	lumber				/ork Ph	one N	lumber											
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Fax Phone Nur	mber			E-	mail A	dres	s											
Section 2 Please indic deposit. NO NOT a valio	ate below t DTE: A reci	he reasoi	n(s) for	which	you aı receiv	re rec re the	questir eir lum	ng to I p su i	be exe n pay	empt men	fron tor	n the mont	mana hly bo	dator enefi	y use t by p	of dir Daper	ect checl	k is
	There is r	no financ	ial inst	itutio	n that	acc	epts d	irect	depo	osit v	vithi	n 15	mile	s of r	my re	siden	ice.	
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	Facilit	y Addres	ss															_
	City/S	state/Zip																_
	Conta	ct name <u>.</u>																-
	Conta	ct phone	numb	er														
	I am a victim of fraud or identity theft. (Please provide one of the following forms of documentation as validation: a letter from the Attorney General's office, a police report or a letter from your financial institution indicating you are a victim of fraud or identity theft.)																	
Section 3	- Recipie	nt's Ac	knowl	edgei	ment													
State of				,	Count	y of .												
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2	5												Mon	th	Day	Ye	ear	

Member Signature_

EFT Exemption (1/19)