

FIS GOVERNMENT SOLUTIONS BANK INFORMATION CHANGE REQUEST FORM

To: FIS Government Solutions P.O. Box 290 Milwaukee, WI 53201-0290 Tel #: 1-800-894-0050 Fax #: 1-414-341-7085 or email to: merchant.services.support@fisglobal.com

From:

(First Name, Last Name)

(IRS Legal Filing Name)

Store Name: _____

Store Address: _____

Store Telephone # :(____)

Email Address:

FNS #/ WIC Vendor ID/ Provider ID:_____

This letter serves as a written request to change store bank information. Please route my EBT deposits

From: Old Bank Information
Old Bank Name:
Old Bank *FRDABA # (Routing/Transit #):
Old Bank **Account #:
To: <u>New Bank Information</u> New Bank Name:
New Bank *FRDABA # (Routing/Transit #):
New Bank **Account #:

*FRDABA # is a 9-digit number located in lower left hand corner of your check **Account # is located to the right of the FRDABA number

Please attach a voided check with the new bank information to this form

Printed Name:	
(Please print	and sign the name of the person who holds the FNS license or who signed the contract)
Authorized Signatu	re: Date:

***Upon receipt of this document at our location, please allow up to 10 business days for this change.