



2021 BANK ACCOUNT VERIFICATION FORM

TAXPAYER(S) NAME: _____

You have indicated that you would like to receive your tax refund(s) via direct deposit. Sign and date at the bottom to verify that the account listed is correct and return it to our office

Account type: **Checking** **Savings**

Bank Name		
Routing Number		
Account Number		
Joint Account	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Attach a voided check for the account you wish to use for Direct Deposit below:

Taxpayer Signature	Date
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Spouse Signature	Date
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