

[Your Name]  
[Your Address]  
[Your Phone Number]  
[Your Social Security Number or Case Number]

[Date]

[Agency Name]  
[Agency Address]  
[City, State, Zip Code]

**Subject: Enrollment in Direct Deposit for Government Benefits**

To Whom It May Concern,

I am writing to formally request that my benefit payments be deposited directly into my bank account. Please update my records to reflect the following banking information:

- **Bank Name:** [Name of Bank]
- **Account Type:** [Checking/Savings]
- **Routing Number:** [9-digit Routing Number]
- **Account Number:** [Your Account Number]

I have attached a voided check to verify these details. I understand that it may take one to two billing cycles for this change to take effect and that I may receive a paper check in the interim.

If you require any additional information or documentation, please contact me at [Your Phone Number] or [Your Email Address].

Thank you for your assistance with this matter.

Sincerely,

[Your Signature]  
[Your Printed Name]