



Taxpayer Disbursement Change Request Form

EFIN #:	Date:
Taxpayer Name:	Spouse Name:
Taxpayer SSN:	Spouse SSN:
Address:	
<input type="checkbox"/> Change from Direct Deposit to Check <input type="checkbox"/> Change from E1 Card to Check	
Taxpayer Signature:	Date:
Spouse Signature:	Date:

By submitting this form, you are giving EPS Financial, LLC the approval to change your disbursement from a Direct Deposit or E1 card to a Check. If your original disbursement is a check, you cannot change this disbursement method. Please note that with the e-Collect program the Account Set up fee will be increased to \$20 and additional deposit fee to \$10. Please call 484-546-2240 if you have any questions.

Please note: EPS can only change the disbursement method for funds not received yet by the IRS or State. If we receive your funds before receiving this form, your disbursement method for those funds will remain as-is.

 **ATTENTION: Have you attached the following REQUIRED DOCUMENTS?**

PHOTO ID

Fax To: 484-546-2997 or Email To: Forms@EPSFinancial.net