

BH & I/DD Mini Grant Program | AGENCY ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION FORM

Managed & Administered by Information Insights on behalf of the Alaska Mental Health Trust Authority

Payments of awarded grant funds through the Behavioral Health (BH) and Intellectual & Developmental Disabilities (I/DD) Mini Grant Programs are issued through direct deposit into your business bank account after a signed grant agreement is processed by Information Insights. **Important:** The bank account receiving these grant funds must be a business bank account associated with your agency. All approved goods and services must be paid for using a payment method associated with your agency's account (check, card, e-payment, etc.). Your agency must be able to receive and administer these grant funds, as well as provide the required expense documentation for reporting.

Please have the appropriate staff member complete, sign, and date this form in black or blue ink. **A copy of a voided check or account verification document is also required**, which must display the financial institution name, your agency name, routing number, and account number. Please submit this form and the voided check or account verification document to Information Insights via email (minigrants@iialaska.com) or fax (888-394-0731).

Agency Name: _____

Agency Address: _____
 (main, if multiple locations) _____

Bank Name: _____

Authorization: I hereby request direct deposit and authorize Information Insights, Inc. to deposit grant funds and administrative stipends into the business bank account provided.

Printed Name

Title

Phone Number

Email Address

Signature

Date