

# ePath / Direct Deposit: Screen Package

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SSN: [redacted] Name: [redacted] Claimant Spouse: **None**  
Claimant's Representative Payee: **None** Spouse's Representative Payee: **None**

Show Help Cancel

	OLD	NEW
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**\*Have you moved?** **Residence Address**  
 Yes  No [redacted]

**\*Has your mailing address changed?** **Mailing Address**  
 Yes  No [redacted]

**\*Has your telephone number changed?** **Telephone**  
 Yes  No [redacted]

**\*Do you want to change your direct deposit?** **Direct Deposit Information**  
 Yes  No  
BANK OF AMERICA, N.A. Savings  
Routing Number [redacted]  
Account Number [redacted]

Change  Enroll in Direct Express  Cancel

**\* Is your name on the account?**  
 Yes  No

**\* Is anyone else's name on the account?**  
 Yes  No

**\*Select Account:**

**BANK OF AMERICA, NATIONAL ASSOCIATION - Savings**  
Account Number: [redacted]

**BANK OF AMERICA, NATIONAL ASSOCIATION - Savings**  
Account Number: [redacted]

**Other Account**

Prior Page Continue

SSN: 0 [redacted] Name: [redacted] Claimant Spouse: **None**

Claimant's Representative Payee: **None** Spouse's Representative Payee: **None**

Show Help Cancel

**OLD** **NEW**

\*Have you moved?

Yes  No

Residence Address

[redacted]

\*Has your mailing address changed?

Yes  No

Mailing Address

[redacted]

\*Has your telephone number changed?

Yes  No

Telephone

[redacted]

\*Do you want to change your direct deposit?

Yes  No

Direct Deposit Information  
BANK OF AMERICA, N.A.  
Savings

Routing Number

[redacted]

Account Number

[redacted]

\*  Change  Enroll in Direct Express  Cancel

\* Is your name on the account?

Yes  No

\* Is anyone else's name on the account?

Yes  No

\*Select Account:

BANK OF AMERICA, NATIONAL ASSOCIATION - Savings

Account Number: [redacted]

BANK OF AMERICA, NATIONAL ASSOCIATION - Savings

Account Number: [redacted]

Other Account

Continue