MOODY AFB
|| 23rd Comptroller Squadron ||
RETIREMENT/SEPARATIONS

MEMORANDUM FOR RETIREE/SEPARATEE
FROM: 23 CPTS/FMF
23 Flying Tiger Way, STE 170
Moody AFB, GA 31699-1596
SUBJECT: Retirement and Separations Information

1. FINAL PAY: This is the last paycheck you will receive for your active duty service and it will include unpaid pay and allowances and accrued leave, if applicable. Final pay is processed manually through the base Finance Office, not DFAS. Since it is processed manually, your LES will reflect a $0.00 for your last paycheck. <u>You will receive your final pay within 5-10 business days after your retirement or separation date.</u> The payment will be sent to the same account where you normally receive your Active Duty pay. If you would like the payment to go to a different account, please provide us with an updated SF 1199A (direct deposit form attached).

2. BAH: You will continue to receive the local rate of BAH through your DOS even if you relocate while on your final leave. If you are *mil-to-mil*, your spouse will need to update their BAH with their servicing finance office to claim you as a civilian dependent. They will need to provide a AF 594, your DD 214, and a copy of your marriage certificate.

3. LEAVE SETTLEMENT: You can only be paid a TOTAL of 60 days of leave during your military career. Leave is payable at the daily rate of your basic pay. To get this rate, divide your monthly basic pay by 30 days to get the daily rate; multiply the daily rate by the number of leave days you are eligible to sell back to get the total amount of your leave settlement. Federal Taxes will deduct at a rate of 22% plus any additional state taxes, if applicable.

4. PERMISSIVE TDY: All members retiring are authorized permissive TDY. The only separatees eligible PTDY are voluntary separation incentive, special separation benefits and involuntary separatee. Permissive TDY is only used for house and/or job search per AFI 36-3003, Table 3.6, Rule 2. A member is authorized up to twenty days of permissive TDY for CONUS members and up to thirty days is authorized for overseas retirees.

5. TAXES: Your regular pay during the last month of active duty will be taxed as normal from the tax tables provided by the IRS. State tax will be taken out for the entire month, regardless of your DOS (if applicable). Accrued leave is considered a one-time payment and is taxed at 22% for federal and any applicable state tax percentage.

6. ALLOTMENTS:
<u>*Separatees:*</u> Your allotments will be paid through your last **FULL** month of active duty. If you separate after the 15th of the month, your mid-month pay will indicate a deduction for your allotments, however, the amount will be refunded in your final pay.
<u>*Retirees:*</u> All of your allotments, with the exception of charity, TSP, SGLI, and Met Life allotments, will transfer to your retired pay. TSP does not deduct from your pay the last month on Active Duty. Changes to your allotments must be made NLT 30 days prior to your retirement date to affect your active duty pay. After you retire, you may start, stop, or make changes to your allotments by contacting DFAS or using myPay. Insurance allotments cannot be started after retirement.

7. OUTSTANDING DEBTS: All debts on your record at the time of separation will be satisfied with any available funds on your military pay account. If the FSO is aware of a debt, the repayment will be accelerated to satisfy as much of the debt as possible before your DOS. If you anticipate having a debt(s) that may not be satisfied by your DOS, you are advised to make arrangements to satisfy the debt(s). Once a debt becomes Out of Service debt, Active duty finance office cannot arrange any options.

8. FINANCE RETIREMENT/SEPARATION OUT-PROCESSING:
Customer Office Hours: Tuesday & Thursday 0900-1200
Email: moody.finance@us.af.mil
Comptroller Services Portal: https://csp.cce.af.mil/#/
Address: 23rd CPTS/FMF 23 Flying Tiger Way, STE 170 Moody AFB, GA 31699-1596

9. RETIRED PAY INQUIRIES: For any questions concerning your AD Pay up until your last AD paycheck, please contact the local Finance Office. Retired pay inquiries should be directed to DFAS. The CPTS does not compute retirement pay. A retired pay estimate can be obtained via the AFPC Retired Pay Calculator located at http://www.dfas.mil/retiredmilitary/plan/estimate.html

You should ensure that you have created a myPay pin and password so that you can access your final LES, W-2, and 1099-Rs. You should be able to see the shell of your retired myPay account before your DOS. If not, ensure you filed your Survivor Benefit Plan (SBP) paperwork with the A&FRC counselor. If it was properly filled out and filed with their office, contact us so that we may establish a CMS case for AFPC and DFAS to resolve the issue.

The Air Force Retiree Services site is located at http://www.retirees.af.mil/
Retired and Annuity Pay Contact Center: 1-800-321-1080 or (216) 522-5955
Defense Finance and Accounting Service
U.S. Military Retired Pay
8899 E 56th Street
Indianapolis, IN 46249-1200

10. RETIREMENTS AND SEPARATIONS TRAVEL ALLOWANCE INFORMATION: Travel time for POV is determined by the official distance between the ordered points. One day of travel is allowed for each 350 miles of the official distance with an extra day allowed from a remainder of 51 or more miles. If a commercial carrier is used (i.e. airplane, rail, or bus), the actual fare paid must be claimed in block #18 of the travel voucher and the paid, zero-balance receipt provided. Expenses will be reimbursed not to exceed the government rate for the same mode of transportation. The use of two POVs is authorized for military personnel whose authorized dependent operates the second vehicle; this must be annotated on the travel voucher. Unlike a regular PCS move, Retirees/ Separatees are **not authorized additional travel time, Dislocation Allowance (DLA) or Temporary Lodging Expense (TLE).** In accordance with **AFMAN 65-114 para 6.7.5,** a member may depart the PDS **on** or **after** the **START DATE** of permissive TDY/ Terminal Leave. Departing **prior** will cause excess travel time charge. Separatees serving less than **90%** of their initial active duty enlistment or service commitment receives no per diem for travel (applies to dependents too). Reimbursement of transportation allowances for services members and dependents is limited to the least expensive mode of transportation available. If transportation is personally procured reimbursement is limited to the amount the Government would have paid for the least costly mode of transportation (normally a bus ticket).

Retirees: Travel is authorized from the permanent duty station to the home of selection for retirement. Retiring members have three years from the date of retirement for completing a move to a home of selection.

Separatees: Travel is authorized to the place of enlistment or home of record (indicated on orders). Separatees have six months to complete a final move limited to the cost of return to the PLEAD or Home of Record. Contact your nearest Traffic Management Office (TMO) for guidance of a possible extension.

Effective September 1, 2016 members will need to provide their DD Form 1172-2 DEERS printout to substantiate the dependents claimed on their final travel voucher.

- How to pull your 1172:
    1. Log on to the following link: https://www.dmdc.osd.mil/self_service/rapids/unauthenticated?execution=e4s1
    2. *Click* Print Family List
    3. Select all family members
    4. Review privacy act statement then select “I Agree”
    5. Review the Summary page then select “Proceed”
    6. Select “Display Form” and then Print DD Form 1172-2

I acknowledge all of the above about final payments & fully understand the estimated timeframe of when my final payment will be made.

______________________________　　　　　　　　　　__________________

SIGNATURE　　　　　　　　　　　　　　　　　　　　**DATE**

DO NOT FILL THIS PORTION OUT UNTIL AFTER YOU HAVE MADE YOUR FINAL TRAVEL

Travel Voucher Instructions

- **Block 2 - Block 4:** Self-explanatory.
- **Block 5:** This block is for who traveled.
  - If you do not have dependents, check "Member/Employee."
  - If you have dependents that traveled concurrently, check "Member/Employee" and "Dependent(s)."
  - If you have dependents that traveled separately, you will need to file two separate travel vouchers. One, mark only "Member/Employee" and the other mark only "Dependent(s)."
- **Block 6:** This is the address that you are relocating to, NOT your previous address.
- **Block 8:** Order number.
  - This will be found at the top left corner of retirement orders or block 30 of separation orders. Annotate the order number as the first two letters and last four numbers (AL-123456 = AL3456)
- **Block 9:** Previous government advances.
  - Annotate the type and amount (ex. DITY Adv.) or write "N/A."
- **Block 10c:**
  - Mark the number of Privately Owned Vehicles (POVs) were driven in conjunction with this move.
  - Initial the line indicating the account you wish to use is the same as where your AD pay was sent.
- **Block 11:** The organization that you separated from (ex. 11 CES / JB Andrews).
- **Block 12:** Dependent(s).
  - If you have no dependents, mark unaccompanied.
  - If you have dependents that traveled concurrently with you, mark "accompanied" and list them below.
  - If you have dependents that traveled separately, mark unaccompanied on both vouchers. On the member's voucher, do not list their information. On the dependents' voucher, list their information.
- **Block 13:** Dependents' address when you received your orders.
  - If you have dependents that traveled, this will be the address where they lived prior to moving.
- **Block 14:** Have your household goods been shipped?
  - Yes or no. If no, explain in the blank space in block 10d.
- **Block 15:** Itinerary.
  - The departure location in the first block **must match the duty location on your orders.**
  - Driving: The next block will be the address listed above in block 6.
  - Flying: The next block will be your departure airport (ex. Reagan National Airport). Layovers are NOT annotated, the next block will be your arrival airport. The final block will be the address listed above in block 6.
  - Block 15a: "Date," you will write the year you completed your travel in this large block "20XX" (blocks underneath will only be day and month).
  - Dates: Ensure dates are formatted as "1 Aug." This ensures no confusion when processing your voucher.
  - Means/Mode of Travel: "PA" for personal auto, "CA" for commercial auto, and "CP" for commercial plane.
  - Reason for Stop: "AT" (awaiting transportation) for stops at airports and "MC" for mission complete.
  - Lodging costs do not need to be annotated, as they will be reimbursed by per diem.
- **Block 16:** Check whether you were the operator or passenger in the vehicle used for travel.
- **Block 17:** Check the applicable duration of travel for your entire trip.
- **Block 18:** Reimbursable expenses.
  - You will claim Airfare, Taxi or Tolls here, as applicable.
- **Block 22:** Applies only to Retirees.

Please sign blocks 20a and 22 once you have completed the voucher and email it to the Moody Finance Org Box: moody.finance@us.af.mil with a copy of your orders, direct deposit form, PDT checklist, applicable receipts, and DD Form 1172-2 for retirees (if you are claiming dependent travel).

Active Duty PDT Entitlements (PDT, PPM, TLE, Dep Tvl, etc.) Checklist

	CUSTOMER USE			
	Traveler's Name:			
	Traveler's SSN: **Order #:**	**YES**	**NO**	**N/A**
1	**DATA MASKED** Information-Does voucher or supporting documents contain data masked (classified) information? Was any portion of your travel to/from a data masked (classified) location?			
2	Is your personal information correct and legible? (Name, grade, SSN, mailing address, **email address** and phone number)			
3	Does the travel order number on the voucher match the travel order number filed with the voucher?			
4	Is itinerary correct and legible to include verification of dates traveled, places, modes of travel, reasons for stops, lodging costs and POC/Terminal mileages (if applicable)?			
5	Split disbursements are **mandatory** for Government Travel Charge Card (GTCC) holders. Is split disbursement amount identified?			
6	Are previous advances claimed on the DD Form 1351-2 (Annotated in Block 9)?			
7	Are your dependents listed on DD Form 1351-2 and is the accompanied or unaccompanied block checked? Does this information match your orders?			
8	Did you check Block 16, POC Travel? Check appropriate block (Owner/Operator or Passenger)			
9	Are all **expenses claimed** and **required receipts** attached to include itemized lodging and any expense $75.00 or more? Use DD Form 1351-2C for additional expenses. **If you are missing receipts for any expense claimed, use a local "missing receipt form" (obtained from The Finance Office).**			
10	Are Non-Availability Statements or Contract Quarters Authorization numbers attached for off-base lodging not authorized in orders? (if applicable)			
11	If you shipped a vehicle at government expense, is DD Form 788 (front and back) with appropriate signatures attached?			
12	For Personally Procured Moves (PPM), did you attach TMO required worksheets?			
13	Are you claiming expenses not authorized in your orders? Did the approving official print name, sign, list telephone number, date DD Form 1351-2 in Block 21a? Did they specify what reimbursable expense(s) they're approving and annotate on the DD Form 1351-2 in Block 29? (MANDATORY, if you claim expenses not authorized in orders)			
14	Are copies of travel orders attached to include amendments? NOTE: Front and back of orders (if applicable) are required.			
15	If TDY enroute and leave was taken, Is any period(s) of leave taken while at the TDY enroute location annotated on the voucher to prevent the payment of Per Diem while on leave? Is the leave form(s) approved by the TDY Commander attached?			
16	Did you sign and date the DD Form 1351-2? **(MANDATORY)**			
17	If this is your first Permanent Duty Travel (PDT), ensure you establish your travel payment account information by completing SF 1199A or FMS 2231. NOTE: You cannot be reimbursed for travel expenses until this information is provided.			
18	For TDY enroute only: 1) If locations listed are not on orders, are amendments attached or variations authorized? 2) If TDY was LESS THAN 12 hours, did you claim actual meal cost in reimbursable expenses?			
19	Did you complete the PDT arrival worksheet and included it with your voucher?			
20	Traveler's signature: Date:			

* ONLY ONE COPY OF THE TRAVEL VOUCHER, ORDERS AND RECEIPTS ARE REQUIRED WITH THIS CHECKLIST

* TO BE CONSIDERED A VALID RECEIPT IT MUST SHOW THE COMPANY NAME, DATE SERVICES WERE PROVIDED, UNIT PRICE OF ITEM/SERVICE, AMOUNT "PAID" AND "AMOUNT DUE" OF $0.00 OR EVIDENCE OF PAYMENT

* IT IS YOUR RESPONSIBILITY TO RETAIN A COPY OF THE TRAVEL VOUCHER, ORDERS, AND RECEIPTS. THE FINANCE OFFICE DOES NOT RETAIN COPIES.

	FINANCE USE ONLY			
		YES	**NO**	**N/A**
1	**DATA MASKED** Information-Does voucher or supporting documents contain data masked (classified) information that needs to be submitted on an AF Form 32? (refer to AFFSC-Base Level Business Rules) If so, remove classified data, complete AF Form 32 and submit via FM Workflow.			
2	Verification check - has the customer completed requirements listed above? Are all expenses claimed and required receipts attached to include itemized lodging and any expense $75.00 or more? If not, **RETURN VOUCHER TO CUSTOMER**			
3	Is the voucher date stamped?			
4	Split Disbursements are mandatory for GTC holders. Is split disbursement amount identified?			
5	Is the member's banking account information built in RTS? If not, attach SF 1199A or FMS 2231.			
6	Is the PDT arrival worksheet attached and dates verified against itinerary? Has member provided current mailing address for their W-2 and a valid email address for payment/debt notification?			
7	For Ret/Sep final vouchers, have DJMS, RTS and DTS been checked for outstanding debts? Ref: AFMAN 65-116V1, Para 69.14.3. If debts are found document them and include in the voucher submission to AFFSC with a screen shot from DJMS showing outstanding debt amount. The remaining debt will be collected from any amounts due the member for transportation of dependents, shipment of personal property, and separation travel (officers only).			
8	Are copies of the travel orders attached (to include amendments)? NOTE: Front and back page of orders are required.			
9	Are orders properly certified and the line of accounting legible?			
10	For TDY enroute only: 1) Are meal statements on all orders validated for accuracy to ensure computation of correct daily per diem? Are CED order meal statements circled or underlined? 2) If member is entitled to FSA (for TDY over 30 days), advise member to submit a DD Form 1561 with the voucher and provide the location of dependents. 3) Are FSR and PSR annotated and legible? 4) Verifed TDY obligation has been recorded in the accounting system.			
11	Checklist completed by (Printed Name): Date:			
12	Checklist audited by (Printed Name): Date:			

Privacy Act-1974 as amended applies to this memo. This memo may contain information which must be protected IAW AFI 33-332 and DoD Regulation 5400.11 and is for Official Use Only (FOUO)

Version 1 Nov '17

TRAVEL VOUCHER OR SUBVOUCHER

Read Privacy Act Statement, Penalty Statement, and Instructions on back before completing form. Use typewriter, ink, or ball point pen. PRESS HARD. DO NOT use pencil. If more space is needed, continue in remarks.

1. PAYMENT

- [X] Electronic Fund Transfer (EFT)
- [ ] Payment by Check

SPLIT DISBURSEMENT: The Paying Office will pay directly to the Government Travel Charge Card (GTCC) contractor the portion of your reimbursement representing travel charges for transportation, lodging, and rental car if you are a civilian employee, unless you elect a different amount. Military personnel are required to designate a payment that equals the total of their outstanding government travel card balance to the GTCC contractor.

NOTE: A split disbursement is only necessary when a GTCC is used while on official travel for the Government.

[X] Pay the following amount of this reimbursement directly to the Government Travel Charge Card contractor: $ 0.00

2. NAME *(Last, First, Middle Initial) (Print or type)* | **3. GRADE** | **4. SSN**

5. TYPE OF PAYMENT *(X as applicable)*

- [ ] TDY
- [X] PCS
- [ ] Dependent(s)
- [ ] Member/Employee
- [X] Other
- [ ] DLA

6. ADDRESS. a. NUMBER AND STREET | b. CITY | c. STATE | d. ZIP CODE

e. E-MAIL ADDRESS

7. DAYTIME TELEPHONE NUMBER & AREA CODE

8. TRAVEL ORDER/AUTHORIZATION NUMBER

9. PREVIOUS GOVERNMENT PAYMENTS/ ADVANCES

10. FOR D.O. USE ONLY

a. D.O. VOUCHER NUMBER

b. SUBVOUCHER NUMBER

c. PAID BY

11. ORGANIZATION AND STATION

12. DEPENDENT(S) *(X and complete as applicable)*

- [ ] ACCOMPANIED
- [ ] UNACCOMPANIED

a. NAME *(Last, First, Middle Initial)*	b. RELATIONSHIP	c. DATE OF BIRTH OR MARRIAGE

13. DEPENDENTS' ADDRESS ON RECEIPT OF ORDERS *(Include Zip Code)*

14. HAVE HOUSEHOLD GOODS BEEN SHIPPED? *(X one)*

- [ ] YES
- [ ] NO *(Explain in Remarks)*

d. COMPUTATIONS

Moody AFB - 23 CPTS/FMF

moody.finance@us.af.mil

1 POV/2 POVs [ ] [ ]

15. ITINERARY

a. DATE		b. PLACE *(Home, Office, Base, Activity, City and State; City and Country, etc.)*	c. MEANS/ MODE OF TRAVEL	d. REASON FOR STOP	e. LODGING COST	f. POC MILES
	DEP					
	ARR					
	DEP					
	ARR					
	DEP					
	ARR					
	DEP					
	ARR					
	DEP					
	ARR					
	DEP					
	ARR					
	DEP					
	ARR					

e. SUMMARY OF PAYMENT

(1) Per Diem	
(2) Actual Expense Allowance	
(3) Mileage	
(4) Dependent Travel	
(5) DLA	
(6) Reimbursable Expenses	
(7) Total	
(8) Less Advance	
(9) Amount Owed	
(10) Amount Due	

16. POC TRAVEL *(X one)*

- [ ] OWN/OPERATE
- [ ] PASSENGER

17. DURATION OF TRAVEL

- [ ] 12 HOURS OR LESS
- [ ] MORE THAN 12 HOURS BUT 24 HOURS OR LESS
- [ ] MORE THAN 24 HOURS

18. REIMBURSABLE EXPENSES

a. DATE	b. NATURE OF EXPENSE	c. AMOUNT	d. ALLOWED

19. GOVERNMENT/DEDUCTIBLE MEALS

a. DATE	b. NO. OF MEALS	a. DATE	b. NO. OF MEALS

20.a. CLAIMANT SIGNATURE | b. DATE

c. REVIEWER'S PRINTED NAME | d. SIGNATURE | e. TELEPHONE NUMBER | f. DATE

21.a. APPROVING OFFICIAL'S PRINTED NAME | b. SIGNATURE | c. TELEPHONE NUMBER | d. DATE

22. ACCOUNTING CLASSIFICATION

I CERTIFY, I SELECT ______________________________(CITY,STATE) AS MY HOME OF SELECTION (HOS).____________________________

I ALSO CERTIFY THAT I DID ACTUALLY MOVE, WHICH ENTITLES ME TO TRAVEL AND TRANSPORTATION.________(INITIAL)

23. COLLECTION DATA

24. COMPUTED BY | **25. AUDITED BY** | **26. TRAVEL ORDER/ AUTHORIZATION POSTED BY** | **27. RECEIVED** *(Payee Signature and Date or Check No.)* | **28. AMOUNT PAID**

PREVIOUS EDITION IS OBSOLETE.

Exception to SF 1012 approved by GSA/IRMS 12-91.
Adobe Professional 8.0

FASTSTART DIRECT DEPOSIT

INSTRUCTIONS FOR PROCESSING FEDERAL EMPLOYEE PAYMENTS

Use: For processing Federal employee net salary, allotments, and other agency - approved payments associated with Federal employment (i.e. travel reimbursement, uniform allowance, etc). Employee must complete items 1,2,3 and 5. Complete item 4 only if you want to start, cancel or change the amount of a savings or discretionary allotment - see instructions on back of form.

1. EMPLOYEE INFORMATION

(SSN) EMPLOYEE PAYROLL IDENTIFICATION NUMBER

EMPLOYEE NAME (as on payroll records)

(Last, First, Initials)

TELEPHONE NUMBER (WORK) (HOME)

2. TYPE OF ACCOUNT

☐ Checking

☐ Savings

TYPE OF PAYMENT

☐ Net Pay

☐ Travel

☐ Other Federal employment related payments

3. DIRECT DEPOSIT ACCOUNT INFORMATION - NET PAY/TRAVEL/OTHER (Use Sec. 4 for allotments)

A voided personal check/sharedraft may be attached in lieu of completing this section.
See instructions on back of this form.

ROUTING TRANSIT NUMBER

Check Digit

ACCOUNT NUMBER

ACCOUNT TITLE ____________________
(Account Holder's Name)

FINANCIAL INSTITUTION NAME

4. ALLOTMENT INFORMATION

Complete this section only if you want to start, cancel or change the amount of a savings or discretionary allotment - see instructions on back of form.

TYPE OF ALLOTMENT (Check One)

☐ Savings (whole dollar amounts only)

☐ Discretionary or Third Party

TYPE OF ACCOUNT (Check One)

☐ SAVINGS

☐ CHECKING

ACTION (Check One)

☐ START

☐ CANCEL

☐ CHANGE

AMOUNT (Check One)

☐ INCREASE TO:

☐ DECREASE TO:

New Total $____________

ALLOTTEE NAME (person/company who will receive allotment)

ALLOTTEE'S ROUTING NUMBER

Check Digit

ALLOTTEE'S ACCOUNT NUMBER

ALLOTTEE'S ACCOUNT TITLE ____________________
(Account Holder's Name)

FINANCIAL INSTITUTION NAME

5. AUTHORIZATION

* ____________________ EMPLOYEE'S SIGNATURE

____________________ DATE

6. AGENCY USE:

PRIVACY ACT STATEMENT

The collection of the information you are requested to provide on this form is authorized under 31 CFR 209 and/or 210. The information is confidential and is needed to prove entitlement to payments. The information will be used to process payment data from the Federal agency to the financial institution and/or its agent.

INSTRUCTIONS FOR PROCESSING FASTSTART AUTHORIZATION

PURPOSE

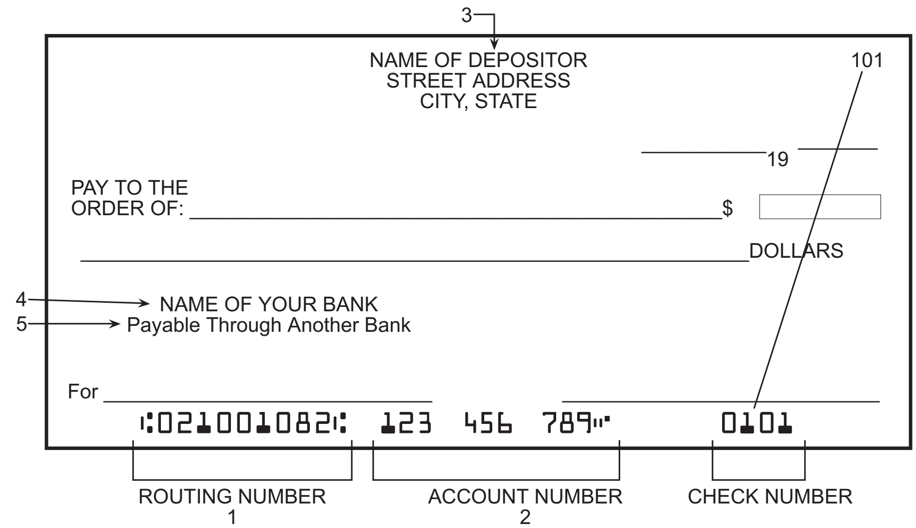
You may use this form to provide instructions for processing your net salary. You may also use this for to provide instructions for processing allotments and other agency - approved payments associated with your Federal employment.

1. EMPLOYEE INFORMATION (always complete this section)

2. TYPE OF ACCOUNT/PAYMENT (Put an “X” in the appropriate space to indicate a checking or savings account and type of payment.)

3. DIRECT DEPOSIT ACCOUNT INFORMATION
   ROUTING TRANSIT NUMBER (your financial institution’s 9-digit routing transit number)
   ACCOUNT NUMBER (your account number at your financial institution)
   ACCOUNT TITLE (the depositor’s name on the account to which payments are to be directed)
   FINANCIAL INSTITUTION NAME (the name of the institution to which payments are to be directed)

The Routing Transit Number (RTN) can be obtained from the financial institution or found on the bottom of a check.



1. ROUTING TRANSIT NUMBER - Here you would put “021001082”

2. ACCOUNT NUMBER - Here you would put “123-456-789”. Note the use of the dash symbol. (Include dashes where the symbol appears on the check or card.

3. ACCOUNT TITLE (must include employee name)

4. FINANCIAL INSTITUTION NAME

5. If your check or sharedraft includes “payable through“ under the bank name, contact the financial institution to help obtain the correct Routing Transit Number for Direct Deposit processing.

4. ALLOTMENT INFORMATION
   ALLOTMENT TYPE

SAVINGS (If this option is checked, this will allow the specified allotment to be credited to an account owned by the payee.) Savings allotments are limited to <u>two</u>. Savings allotments must be in whole dollar amounts (no cents). The dollar amount of allotments may not exceed the pay due an employee per pay period.

DISCRETIONARY OR THIRD PARTY (If this option is checked, this will allow the specified allotment to be credited to an account not owned by the payee.) Certain restrictions may apply as to the kind of allotments your agency will allow. Check with your agency to determine what kinds of allotments it will allow. ANY CHANGES TO THE ALLOTMENT INFORMATION FURNISHED ON THIS REQUEST MUST BE MADE USING A NEW FASTSTART FORM.

TYPE OF ACCOUNT (Put an “X” in the appropriate space to indicate a checking or savings account.)
ACTION (Put an “X” in the appropriate space to indicate start/cancel/change.)
AMOUNT (Put an “X” in the appropriate space to indicate if an allotment is an increase, decrease and always indicate $ amount.)

ALLOTTEE’S ROUTING NUMBER: Enter person’s/company financial institution 9-digit routing transit number.
ALLOTTEE’S ACCOUNT NUMBER: Enter the account number to which the allotment payment will be deposited.
ALLOTTEE’S ACCOUNT NUMBER: Enter account holder’s name on the account at the financial institution.
FINANCIAL INSTITUTION NAME: Enter the name of the financial institution to which the payment should be sent.

5. AUTHORIZATION
   Sign and date the request form after you have carefully read the instructions and Privacy Act Statement.

6. AGENCY USE (This space is reserved for agency use.)

CHANGES AND CANCELLATIONS - Contact your agency for instructions.