



# ELECTRONIC ACH/EFT OR WIRE TRANSFER FORM

## Group Information (Information needed by Further)

Group Name: \_\_\_\_\_ Group Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Location: \_\_\_\_\_

Funds are being sent for (check all that apply):

Administration Fees     Claim Reimbursements     HSA/VEBA Contributions     HSA/VEBA transfer from another group

## Group Signature

Group contact signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Important note:** as soon as a wire has been initiated, please alert Further by forwarding the remittance confirmation from your bank to [contributions@hellofurther.com](mailto:contributions@hellofurther.com).

## Further Bank Detail (Information needed by the bank sending payment)

Financial Institution: Wells Fargo Minneapolis, MN

Account Type: Checking

### VEBA Contributions Only:

Wire Routing number: 121000248

ACH Routing number: 091000019

Account number: 6681501810

### All Other Transactions:

Wire Routing number: 121000248

ACH Routing number: 121000248

Account number: 4122245061

Please return completed form to Further c/o CareFirst.

Questions? Call the Group Leader Line at 866-758-6119.

**Send via secured email only:**  
[CareFirstDocuments@hellofurther.com](mailto:CareFirstDocuments@hellofurther.com)

**Fax to:**  
866-231-0214

**Mail to:**  
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