



*Mamaroneck U.F.S.D
1000 W. Boston Post Rd
Mamaroneck, NY 10543*

RETIREE PAYMENT FORM

TO: ALL RETIREES
FROM: Benefits Department, Mamaroneck Business Office
DATE: January 1, 2024
SUBJECT: MEDICARE REIMBURSEMENT PAYMENTS

Payments to Retirees from the Mamaroneck Union Free School District will be sent electronically via ACH.
ONLY COMPLETE BELOW IF YOUR ACCOUNT INFORMATION HAS CHANGED FROM 2022.

To facilitate receipt of your next payment, please complete the following with your information and your spouse's information **if they are receiving benefits from the District:**

NAME OF RETIREE: _____

NAME OF SPOUSE: _____

ADDRESS: _____

PHONE #: _____

*****VALID E-MAIL ADDRESS:** _____

RETIREE SSN#: _____ - _____ - _____

SPOUSE SSN#: _____ - _____ - _____

NAME OF BANK: _____

TYPE OF ACCOUNT: _____

RETIREE BANK ACCOUNT NUMBER: _____

RETIREE ROUTING NUMBER: _____

SPOUSE BANK ACCOUNT NUMBER: _____
(If Different Than Retiree)

SPOUSE ROUTING NUMBER: _____
(If Different Than Retiree)

*****REQUIRED PLEASE PROVIDE AN EMAIL ADDRESS FOR DEPOSIT NOTIFICATONS**

Please return this information to: Mamaroneck Union Free School District, ATTN: LAUREN TUCCITTO
1000 W. Boston Post Rd.
Mamaroneck, NY 10543

Tel: (914) 220-3048

Fax (914) 220-3091

E-Mail: benefits@mamkschools.org