



Business Solutions

Check Order Form

Instructions: Use this form to order Health Savings Account (HSA) checks. Complete and return to Avidia Bank, PO Box 370, Hudson, MA 01749. For assistance call 1-855-472-9399, or send an email to: HSA@AvidiaBank.com



Name First _____ Last _____ M.I. _____

Address Street _____ City _____ State ____ Zip _____


Mailing Address if Different

Address Street _____ City _____ State ____ Zip _____

Authorized Signer

Name First _____ Last _____ M.I. _____

I authorize Avidia bank to order checks: _____ **Date** _____

 **FDIC** The balance in your HSA is insured by the Federal Deposit Insurance Corporation (FDIC), and subject to applicable deposit limits.

