

Direct Deposit Authorization

Employee Information

Name:		Employee #:
(Last)	(First)	
New Direct Deposit (supersedes all previous direct d	leposits)	Changing Your Current Direct Deposit
<u>Account 1</u> :		I wish to stop direct deposit for Payroll (including draws). I elect to begin receiving a paper check for all
Bank Name:		future payrolls.
ABA Routing Number:		
Account Number:		□ I wish to continue my current direct deposit with money being divided between my current accounts as listed below. **
Amount of check:		
Account type: Checking – Attach a voided check. 		
Savings – Attach verification of bank and account number.	unt	
<u>Account 2</u> (optional):		
Bank Name:		
ABA Routing Number:		
Account Number:		
Amount of check (remaining or \$) [*] :		
Account type: Checking – Attach a voided check.		* If splitting deposits across two accounts, refer to direct deposit memo for instructions *
Savings – Attach verification of bank and account number.	unt	** If currently using one direct deposit account, use "New Direct Deposit" to set up 2 nd account. **

Authorization

- 1. It is my responsibility to verify payment has been credited to my account, and that the City assumes no liabilities for bank fees for any reason.
- 2. I have provided accurate and current bank account information.
- 3. I acknowledge that the origination of ACH transactions to the authorized account must comply with the provisions of Oregon and U.S. law. I hereby authorize the City of Sweet Home to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to the account and depository I have indicated above. This authority is to remain in full force and effect until the City has received written notifications from me of its termination no less than ten (10) days prior to payday.

(Signature)

(Date)