



DIRECT DEPOSIT AUTHORIZATION/CHANGE FORM

PLEASE FILL IN ALL THE INFORMATION:

Choose one: New Add Change Stop

Employee Name: _____
Please Print Last Name First Name

Social Security # or Employee ID: _____ Site Location: _____

Bank Name (Required): _____ Bank Branch Phone #: _____

Signature: _____ Daytime Phone #: _____

Bank Rounting ABA (9 Digit Number) _____

Account Type: Checking Savings

Account #: _____

Please attach the acceptable forms of documentation

For Checking Accounts:

1. Voided Check or Copy of Bank Account Identification (must show routing number as well as Account Number)

For Savings Accounts:

1. Copy of Bank Account Identification (must show Routing number as well as Account Number)

After submitting this completed form to the Payroll Office, data will be forwarded to the County Office for the next available payroll run. Errors cause delays, otherwise the following payroll should be "direct deposited". You will receive a paycheck as usual, except ****VOID**VOID**VOID**VOID**** will be imprinted across the front of the check.

IF CHANGES ARE MADE DURING THE YEAR, THE PROCESS STARTS OVER AND YOU WILL RECEIVE A "LIVE" PAYCHECK INBETWEEN THE STOP OF THE OLD DIRECT DEPOSIT AND THE START OF THE NEW.

Direct Deposits do not need to be renewed annually. They will continue until you notify the Payroll Office in writing to discontinue the process.