



## Authorization for Direct Deposit

Employee Name: \_\_\_\_\_  
(Please print clearly)

A. **Account status in payroll** (select one):  New  Existing, with changes  Replacement

**Account Type** (select one):  Checking  Savings **Bank Name** \_\_\_\_\_

**Bank Transit/Routing #** \_\_\_\_\_ **Account #** \_\_\_\_\_

**Amount of deposit:**  Fixed amount \$ \_\_\_\_\_  Percentage% \_\_\_\_\_ or  Balance of net pay

**\*\* Use box B if you would like your deposit split into more than one account \*\***

B. **Account status in payroll** (select one):  New  Existing, with changes  Replacement

**Account Type** (select one):  Checking  Savings **Bank Name** \_\_\_\_\_

**Bank Transit/Routing #** \_\_\_\_\_ **Account #** \_\_\_\_\_

**Amount of deposit:**  Fixed amount \$ \_\_\_\_\_  Percentage% \_\_\_\_\_ or  Balance of net pay

**IMPORTANT - PLEASE READ:**

This authorization remains in effect until you have canceled it in writing.

I hereby authorize The Arc Carroll County to initiate credit entries to my account(s) or adjustments (debit or credit) to my account(s) if a payroll transfer error occurs.

Please note that The Arc Carroll County does not typically do a pre-note cycle to verify bank routing number(s) and employee bank account number(s) for correctness upon new account activation. *This means that when you sign up for direct deposit, it will go into effect the following pay period.*

**Signing this form authorizes the deposit of my pay automatically each payday as indicated.**

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE STAPLE VOIDED CHECK(S) HERE.**