

City of Sterling Authorization Form for Direct Deposit

Employee Name _____

For Paydate ____/____/____

Check One Box	<input type="checkbox"/> Initiate payroll direct deposit (will prenote)
<input type="checkbox"/> Change my current payroll direct deposit	
<input type="checkbox"/> Discontinue payroll direct deposit	
Check One Box	<input type="checkbox"/> Checking
<input type="checkbox"/> Savings	
Check One Box	<input type="checkbox"/> Net Pay
<input type="checkbox"/> Flat Amount \$ _____	

Financial Institution
Routing Number
Account Number

↓ Attach Voided Check Here ↓

Employee Authorization	
<p>"I authorize City of Sterling to deposit my payroll check into an Account(s) at the Financial Institution(s) listed above. If funds to which I am not entitled are deposited to my account, I authorize City of Sterling to direct the Financial Institution to return such funds. This authorization shall remain in effect until I have cancelled it in writing or upon rejection of deposit by the bank because the account is closed."</p>	
Employee Signature	Date
Submit with a VOIDED check(s). Forms will not be processed without complete information.	