

Employee Direct Deposit Enrollment Form

Important! Please read and sign before completing and submitting.

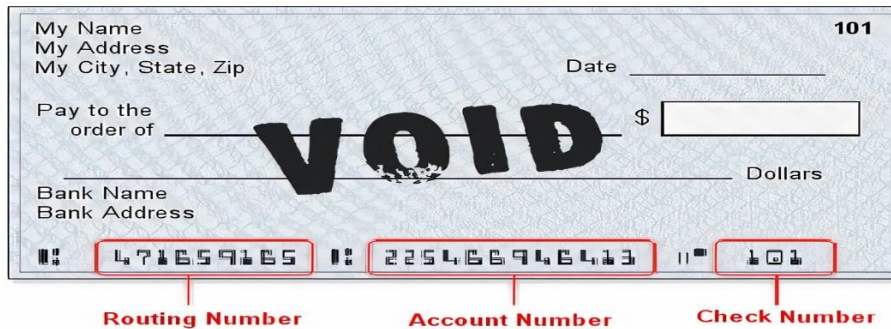
I hereby authorize the Town of Weston to deposit any amounts owed me, by initiating credit entries to my account at the financial institution (hereinafter "Bank") indicated on this form. Further, I authorize the Bank to accept and to credit any credit entries indicated by the Town of Weston to my account. In the event of any erroneous credit into my account, I authorize the Town of Weston to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until the Town of Weston has received written notice from me of its termination in such time and in such manner as to afford the Town of Weston reasonable opportunity to act on it.

Employee Name _____

Employee Signature _____ **Date** _____

To enroll in Full Service Direct Deposit, simply fill out this form and give it to your payroll manager. Attach a voided check for each checking account - not a deposit slip. Below is a sample check MICR line, detailing where the information necessary to complete this form can be found.



Name of Bank: _____

Account #: _____ 9-Digit Routing _____

Amount: \$ _____ _____ % or Entire Paycheck

Type of Account: Checking Savings (Check One)

Name of Bank: _____

Account #: _____ 9-Digit Routing _____

Amount: \$ _____ _____ % or Entire Paycheck

Type of Account: Checking Savings (Check One)

