

Kaysville City

Direct Deposit Authorization Form

Mark one:

New enrollment _____

Change _____

Name: _____ Department: _____

Mark one:

Direct my earnings to:

Checking account _____

Savings account _____

Attach voided check here

(Do not attach a deposit slip)

(If you don't have a check to attach, write your financial institution name, routing number and account number)

Release:

I hereby authorize Kaysville City Corporation to initiate credit entries (and if necessary, debit entries and adjustments for any credit entries in error) to my account and financial institution as indicated, to credit and/or debit the same such account.

This authority to remain in full force and effect until Kaysville City has received written notification from me of its change in such time and in such manner as to afford Kaysville City and the financial institution a reasonable opportunity to act on it. Termination of employment also voids this agreement.

Signature _____ Date _____