

BUNCOMBE COUNTY GOVERNMENT DIRECT DEPOSIT FORM

NEW I want the convenience of having my pay deposited to my bank account each payday. (This is required for all new employees.) I understand that I will receive one real check which I must take to my bank for deposit prior to the start of the direct deposit.

CHANGE I currently have direct deposit but would like to change my bank/bank account number. I understand that changing banks will result in a temporary stop of my direct deposit and I will receive one real check which I must take to my bank for deposit prior to resuming direct deposit.

FOR PERSONNEL USE ONLY

WILL RECEIVE CHECK ON THIS DATE	DIRECT DEPOSITED ON THIS DATE
SOCIAL SECURITY NUMBER:	
NAME:	
DEPT. NAME:	BANK NAME:
BANK NUMBER (First grouping of numbers printed at the bottom of your check; either 8 or 9 digits)	
<i>PLEASE CHECK ONE:</i>	
DEPOSIT INTO MY CHECKING ACCOUNT	ACCOUNT NUMBER:
DEPOSIT INTO MY SAVINGS ACCOUNT	ACCOUNT NUMBER:

E-MAIL ADDRESS:	
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<i><u>I authorize credit entries and any adjustments to be made to my account.</u></i>	
SIGNATURE:	DATE:

PLEASE REMEMBER TO ATTACH A VOIDED CHECK!