

This authorization remains in full force and effect until the County department HR receives written notification from the employee of its termination, or until the Sacramento County Department of Finance, Auditor/Controller Division or appointing authority deems it necessary to terminate the agreement.

## **SECTION A**

1. Personnel Number	2. Department					
3. First Name Last Name						
4. Phone Number	Other Phone Number					
All of the information on this form must be completed for all banks even if the information is not changing.  If any of the information is left blank or incorrect, the form will be returned to you.						
SECTION B  Main Bank Account Selection-  New Change Cancel No Change						
1. TYPE OF ACCOUNT  CHECKING  SAVINGS	PAYROLL CHECK					
Verify these numbers with your financial institution 2. ROUTING NUMBER	3. DEPOSITOR ACCOUNT NUMBER					
4. FINANCIAL INSTITUTION NAME						
5. FINANCIAL INSTITUTION ADDRESS Street Address	City State Zip					
ACCOUNT DEPOSIT OPTIONS     Net pay to be deposited into your main bank account selection						
If other accounts are selected the specified amounts will be deposited to the other accounts in priority order first and the remaining amount will be deposited into your main bank account selection as net pay.						
First Priority Other Bank Account Selection- Add Change/Replace Cancel No Change						
1. TYPE OF ACCOUNT  CHECKING  SAVINGS						
Verify these numbers with your financial institution  3. DEPOSITOR ACCOUNT NUMBER						
4. FINANCIAL INSTITUTION NAME						
5. FINANCIAL INSTITUTION ADDRESS Street Address	City State Zip					
ACCOUNT DEPOSIT OPTIONS     Specific amount to be deposited into the account selection above						
\$						
> This specific amount will be deposited in your account prior to your net pa	ay being deposited into your main bank account selection or payroll check.					

	Second Priority Other Bank Account Selection-					
1.	TYPE OF ACCOUNT  CHECKING  SAVINGS					
2.	Verify these numbers with your financial institution ROUTING NUMBER	3. DEPOSITOR AC	COUNT NUMBER			
<b>4. 5.</b>	FINANCIAL INSTITUTION NAME  FINANCIAL INSTITUTION ADDRESS Street Address	City	State	Zip		
6. ACCOUNT DEPOSIT OPTIONS  Specific amount to be deposited into the account selection above  \$						
SECTION C Read below and sign						
In signing this form I authorize Sacramento County, Department of Finance/Auditor Control Division to send the designated amounts of my net pay to the financial institution(s) named above for deposit. If at anytime the amount of salary or wages so deposited exceeds the amount of salary or wages actually due and payable to me I hereby authorize Sacramento County, to either:  a) Withhold a sum equal to the overpayment from future salary or wages; or  b) Recover such overpayment from the above designated account(s).  If the County is legally obligated to withhold any part of my wages or salary for any reason or if I no longer meet eligibility requirements for the deposit program, I understand Sacramento County may terminate my enrollment in the program. If any action taken by me results in direct nonacceptance of a direct deposit by the designated financial intuition(s), I understand that the County assumes no responsibility for processing a supplemental salary of wage payment until the amount of the non-acceptance deposit is returned to the County by the financial institution(s).						
	Signature		Date			

For new, adding, or changing account(s) you MUST attach a <u>pre-printed</u> voided check(s) or letter(s) from the financial institution(s).

If necessary, use a separate sheet of paper for additional attachments.

### PLEASE READ THIS INFORMATION CAREFULLY

To sign up for Direct Deposit of your payroll checks, complete this form as follows

# COUNTY OF SACRAMENTO

**Direct Deposit Instructions** 

## Section A

Enter Personnel Data information - Item 1- Personnel Number, Item 2- Department, Item 3- Name, Item 4- Phone Number

#### Section B

#### Main bank account:

New- to be completed for new enrollment or re-enrollment after cancellation.

Replace/Change- to be completed when changing accounts, financial institution/ branch (routing number), or depositor account number.

Cancel- to be completed when canceling direct deposit to any of the accounts.

No Change- to be completed when none of the bank information for the account is changing.

Item 1- Indicate checking or savings. Only one box must be checked. If left blank, it will be processed as checking.

- Item 2- Enter Routing Number.
- Item 3- Enter Account Number.
- Item 4- Enter the financial institutions name.
- Item 5- Enter the financial institutions address.

## > If selecting other bank account deposit amounts these deposits will be made first and the remaining balance will go into the main bank.

## First/ Second Priority Other Bank Account(s) Selection:

Add- to be completed when adding other bank account selections with a new or existing main bank.

Replace/Change- to be completed when changing accounts, financial institution/ branch (routing number), or depositor account number.

Cancel- to be completed when canceling direct deposit to any of the accounts.

No Change- to be completed when none of the bank information for the account is changing.

Item 1- Indicate checking or savings. Only one box must be checked. If left blank, it will be processed as checking.

Item 2- Enter Routing Number.

Item 3- Enter Account Number.

Item 4- Enter the financial institutions name.

Item 5- Enter the financial institutions address.

Item 6- Check the box and enter a specific dollar amount to be deposited to first/ second priority other bank account selections.

#### Section C

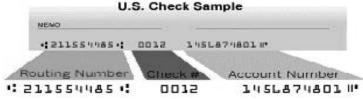
Read section, sign and date to authorize Sacramento County to make changes listed on form.

### **Bank Routing Number**

Bank Account Number

Is the numbers located between the \*\* symbols.

Comes before symbol and its exact location and number of digits can vary from bank to bank.



#### IMPORTANT: PLEASE VERIFY YOUR DEPOSIT ACCOUNT NUMBER AND ROUTING NUMBER WITH YOUR FINANCIAL INSTITUTION.

- Return the completed original form and a <u>voided check and/ or a letter from your financial institution</u> that is <u>pre-printed</u> with your name, address, and account info to your department payroll clerk.
- Your first payment will be deposited into your designated account within 14 days after the department Human Resources office receives your form.
   If it does not, please contact your department HR office.

## **DIRECT DEPOSIT POSTING DATES**

While most financial institutions post funds to accounts at the beginning of the bank business day, this is not a universal practice. Some institutions post funds in the afternoon instead of the morning. It is strongly recommended that you check with your financial institution to determine when your funds will be available.

## CHANGING FINANCIAL INSTITUTION OR DEPOSITOR ACCOUNTS

Your Direct Deposit will continue to be deposited into your designated account(s) at your financial institution(s) until the Sacramento County department HR office is notified that you wish to re-designate your account and/or your financial institution. To re-designate, complete and submit a new form with the new information. **DO NOT** CLOSE YOUR OLD ACCOUNT UNTIL YOUR FIRST PAYMENT IS DEPOSITED INTO YOUR NEWLY DESIGNATED ACCOUNT AND/OR FINANCIAL INSTITUTION. Your first payment into your new account will be within 14 days after the Department's Human Resources receive your form. You may receive a paper warrant during this period.

## PRIVACY NOTICE

The Information Practices Act of 1977 (Civil Code Section 1798.17) requires that this notice be provided when collecting personal information from individuals. Information requested on this form is used by Sacramento County for the purposes of identification and enrollment processing. It is mandatory to furnish all information requested on this form except for financial institution name, address and branch number or name. Failure to provide the mandatory information may result in the enrollment action not being processed or being processed incorrectly.

Copies of the Enrollment Authorization are maintained in confidential personnel files of the department Human Resources office. Employees have the right of access to copies of their Enrollment Authorization forms upon request.