

SAN RAMON VALLEY FIRE PROTECTION DISTRICT
DIRECT DEPOSIT AUTHORIZATION FORM

I hereby authorize the Payroll Department to initiate an electronic transfer in the amount of net pay from my paychecks and deposit such amounts into the designated accounts below. I understand that the District does not guarantee timely availability of deposits. I also authorize the Payroll Department to make up adjustments for any erroneous credits. I also understand that transactions under this Authorization will be subject to the Federal Electronic Fund Transfer Act and to other applicable laws and regulations, and that the Financial Institution(s) in which my paycheck is deposited will provide me a statement as to my rights and obligations in connection with such transactions, in accordance with The Act. This Authorization is to remain in effect until the Payroll Department has received written notice from me of its termination, change, or until I terminate my employment or the direct deposit program is cancelled.

Employee Name (Print)

Badge #

Employee Signature:

Date:

Account Information: You may choose up to three accounts. Optional Accounts #2 and #3 must have a fixed amount. The residual net pay will be deposited into the primary account (Account #1).

Submit completed form along with voided check or bank form with Account and Routing/Transit Numbers.

Account #1 - Primary Add Change Checking Savings

Bank Name: _____

Routing/Transit # (nine digits): _____ Account #: _____

I wish to deposit: Entire Net Amount

Account #2 - Optional Add Change Checking Savings

Bank Name: _____

Routing/Transit # (nine digits): _____ Account #: _____

I wish to deposit: \$ _____

Account #3 - Optional Add Change Checking Savings

Bank Name: _____

Routing/Transit # (nine digits): _____ Account #: _____

I wish to deposit: \$ _____