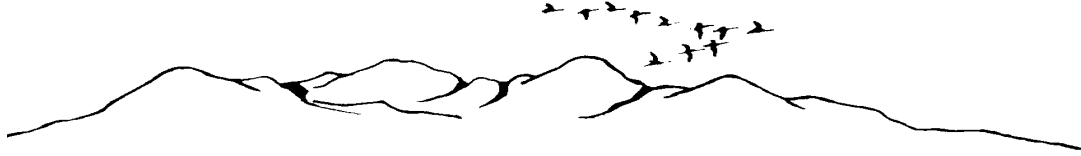


City of Yuba City



Request for Direct Deposit of Payroll

Name: _____

Date: _____

Employee Number: _____

Routing Number	Account Number	Checking or Savings	Fixed/Percent Amount	Start/Stop
1.				
2.				
3.				
4.				
5.				

Please attach a voided check or a Xerox copy of your check to this form. The numbers at the lower left hand corner of your check are used for the direct deposit process. If you do not have a checking account, but a savings account, then attach a deposit slip to this form. If direct deposits are broken down into percentages, the sum of the direct deposits must equal 100%. List all accounts each time a change is made for a complete record. If you are stopping a deposit please write the bank account number and stop.

I understand that I may change the account number or bank at any time. I also understand that I will receive a pay check and direct deposits will NOT occur during the period of change. Direct deposits will occur once my bank has notified the City that the account number information is correct.

Signature: _____