

**CITY OF FOLSOM**

**AUTOMATIC PAYROLL DEPOSIT AUTHORIZATION & CANCELLATION FORM**

I AUTHORIZE THE CITY OF FOLSOM TO INITIATE CREDIT ENTRIES (DEPOSITS) AND/OR DEBIT ENTRIES AND ADJUSTMENTS TO CORRECT ANY PREVIOUS CREDITS WHICH MAY HAVE BEEN POSTED IN ERROR TO MY ACCOUNT. THIS AUTHORIZATION IS TO REMAIN IN FULL EFFECT UNTIL I NOTIFY THE CITY OF FOLSOM IN WRITING TO CANCEL THIS AUTHORIZATION.

**FINANCIAL INSTITUTION**

INSTITUTION NAME: \_\_\_\_\_

ROUTING NUMBER: \_\_\_\_\_

**ACCOUNT INFORMATION**

TYPE OF ACCOUNT:  CHECKING  
 SAVINGS

ACCOUNT NUMBER: \_\_\_\_\_

**DEPOSIT INSTRUCTIONS**

TYPE OF DEPOSIT:  FULL NET PAY  
 PARTIAL AMOUNT \$ \_\_\_\_\_

\*Please note: Direct deposit takes two pay periods for the actual deposit to take place. First period is a trial run (\$0 sent), second period the account will be credited if no error on the trial run.

**CANCELLATION**

I AUTHORIZE THE CITY OF FOLSOM TO STOP AUTOMATIC DEPOSIT TO THE

ACCOUNT \_\_\_\_\_ (number) AT \_\_\_\_\_

(financial institution).

**AUTHORIZATION**

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_