

# Direct Deposit Authorization

*Note* : This document must be signed by employees requesting automatic deposit of paychecks and retained on file by Humboldt County. Employees must attach a voided check for each of their accounts to help verify their account numbers and routing numbers.

Full Name (Print) \_\_\_\_\_ E-mail Address for Remittance \_\_\_\_\_

**Account 1**      *Account 1 Type:*      Checking      Savings      Bank Name: \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

*Deposit:*      Net Pay      Fixed Dollar Amount\*: \_\_\_\_\_      Percentage of Check\*: \_\_\_\_\_

**Account 2** (Optional)      *Account 2 Type:*      Checking      Savings      Bank Name: \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Attach voided check for Account 1 here

Attach voided check for Account 2 here (if applicable)

This authorizes Humboldt County, Nevada (the "County") to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my (our) account(s) indicated below and to other accounts I (we) identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries. I agree that the ACH transactions authorized herein shall comply with all applicable U.S. Law. This authorization will be in effect until the County receives a written termination notice from myself and has a reasonable opportunity to act on it. I understand that my first paycheck will be a physical paycheck and that subsequent paychecks will be directly deposited into my account(s).

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

For Office Use Only

\*Remainder to be deposited to Account 2

Last Revised 11/01/2018  
All Previous Versions Obsolete

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