

DIRECT DEPOSIT

Sign-up and change form

To sign up for Direct Deposit, the payee (employee) is to read these instructions and **fill in the information requested in Sections 1, 2 and 3. Return this completed form along with a "VOIDED CHECK" or a bank document** to the Mohave County Finance Department. The information will be entered into the payroll system in the following pay period. There will be a two-week waiting period during which time the bank will verify the information. You will receive a regular paycheck during this verification period. After Direct Deposit is in effect, you will have access to a copy of your payroll check stub, which will list all of the same payroll information for each pay period as your "regular" pay-check stub listed. Your funds will be available for withdrawal on payday. Access to your payroll check stub is located at the Mohave County employee's intranet.

Original Sign Up
If you decide to cancel Direct Deposit, you must request the cancellation in writing. Submit a signed request form to Mohave County Finance Department. Mark the BOX below with an X.

Cancel my previous Direct Deposit

If you decide to change banks, you must fill out a new "Direct Deposit Sign-Up Form" along with a "VOIDED CHECK" or a bank document and submit it to Mohave County Finance Department. Also, mark the box above to cancel your previous Direct Deposit. You will receive a regular paycheck for one pay period while your bank information is being verified.

Cancel my previous Direct Deposit and replace it with the information on this form.

Update my accounts payable vendor (for meal and mileage reimbursements) with this new information

_____ Vendor number (if known)

SECTION 1 (To Be Completed by the employee)				SECTION 2 (To Be Completed by the Employee or Bank)			
Name of Employee:				Type of Depositor Account :			
				<input type="checkbox"/> Checking		<input type="checkbox"/> Savings	
Employee Number		Department		Bank (Depository) Name		Branch Number	
Address				Address			
		City State Zip Code				City State Zip Code	

SECTION 3

Depositor Account Number

Bank Routing Number (must be 9 digits)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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I (WE) hereby authorize "Mohave County" to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) checking or savings account indicated above at the "Depository" named above, to credit and/or debit the same to such account. This Authorization is to remain in full force and effective until "Mohave County" has received written notification from me (or either of us) of its termination in such time and in such manner as to afford "Mohave County" and "Depository" a reasonable opportunity to act on it.

Signature:

Date: