

DIRECT DEPOSIT

All you need do is:

1. Mark the box before type of account to indicate whether your pay will be deposited in your checking or savings account.
2. Fill in your name, financial institution name and location, and date.
3. Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please fill in your account number.

NOTE: Be sure to sign the form!

AUTHORIZATION Please fill out and return to the Finance Department

AUTHORIZATION FOR DIRECT DEPOSIT

I authorize Allen Metropolitan Housing Authority to initiate electronic credit entries to my: ___checking account or ___savings account each pay period. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until I have cancelled it in writing.

Date_____

Financial Institution Name (Please Print)_____

Account Number at Financial Institution_____

Financial Institution Routing/Transit Number_____

Financial Institution City and State_____

Signature_____

PLEASE KEEP A COPY OF THE AUTHORIZATION FOR YOUR RECORDS