

**TOWN OF NORFOLK
AUTHORIZATION FOR DIRECT DEPOSIT**

This authorizes The Town of Norfolk (the "Company") to send credit entries (and appropriate debit and adjustment entries), electronically or 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.

Account #1	
Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Employee Bank Name:	
Bank Routing Number (ABA#):	
Account Number:	
Amount to be deposited to this account:	% or \$

Account #2	
Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Employee Bank Name:	
Bank Routing Number (ABA#):	
Account Number:	
Amount to be deposited to this account:	% or \$

Please attach a voided check for each account here.

Note: You may also use a document provided from your bank, in the even that you do not have checks. This document **MUST** include your name, the name of the financial institution, your account number, and the banks routing number.

This authorization will be in effect until the Company receives a written termination notice from myself and has a reasonable opportunity to act on it.

Signature _____

Date _____

Printed Name _____

IMPORTANT: This document must be signed by employees requesting automatic direct deposit of paychecks and retained on file by the employer. Employees must attach a voided check for each of their accounts to help verify thir account numbers and bank routing numbers.