

PAYROLL DIRECT DEPOSIT FORM

*DIRECT DEPOSIT YOUR PAY INTO A CHECKING OR SAVINGS ACCOUNT
ALL BANKS ARE ACCEPTED*

I authorize the Town of Lunenburg to activate Direct Deposit of my pay into my account as follows:

NAME OF EMPLOYEE: _____

PHONE#: _____

EMAIL ADDRESS: _____

NAME OF BANK: _____

FOR CHECKING ACCOUNTS: Please attach a Void check here, or submit a Payroll Direct Deposit Authorization Form from your bank.

FOR SAVINGS ACCOUNTS:

Contact your bank to request a Payroll Direct Deposit Authorization Form showing the Bank's routing number and your savings account number.

Employee Signature _____ Date _____