

CITY OF LAMAR

Authorization for Automatic Deposit

I hereby authorize the City of Lamar and my financial institution(s) to deposit my pay automatically to my account(s) each payday and, if necessary, to adjust or reverse a deposit for any payroll entry made to my account in error. This authorization will remain in effect until I terminate or instruct the City of Lamar to change my automatic deposit to another financial institution.

PLEASE ATTACH A COPY OF A VOIDED PERSONAL CHECK(S) FOR EACH ACCOUNT LISTED BELOW

DATE

NAME

SIGNATURE

ACCOUNT #1

ENTIRE NET PAY

SPECIFIED AMOUNT

\$ _____

ACCOUNT TYPE:

CHECKING

SAVINGS

FINANCIAL INSTITUTION

ACCOUNT NUMBER

ACCOUNT #2 – REMAINDER OF NET PAY

ACCOUNT TYPE:

CHECKING

SAVINGS

FINANCIAL INSTITUTION

ACCOUNT NUMBER