Electronic Direct Deposit

City of Marshfield employees are required to have their compensation and expense reimbursements direct deposited to the financial institution of their choosing.

Here's how Direct Deposit works:
On payday, you'll receive an earnings statement which shows gross pay, taxes, other deductions, benefits and net pay. The net pay will be deposited in your account and appear on your bank statement.

Please Note: Payday is **Friday,** unless specifically superseded by policy or labor contract due to holidays.

1. The authorization form below gives the City of Marshfield and your financial institution the authority to deposit your pay to your account. Mark the account-type box to indicate whether your pay should be deposited to your checking or savings account. You can have up to 3 accounts (one form completed per account, please.)
2. If depositing to:
   - **checking** account, attach a **voided check**
   - **savings** account, attach a copy of your **bank card**

   bank's routing # and your account # must be provided.

   NO DEPOSIT SLIPS WILL BE ACCEPTED!!
3. **Fill in all areas below and be sure to sign the form!**

……..……..…….

Employee's Authorization – Please fill out and return to the **Finance Department**.

I authorize my employer, **City of Marshfield**, and the financial institution listed below to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries which were incompletely funded by my employer or for any credit entries otherwise in error to my:

____ checking account ____ savings account $ _____ each payday.
(If you checked the savings box, insert a dollar amount on the line only if you are not depositing your entire check in savings)

MANDATORY: (If depositing a portion of your pay in savings, you must complete a 2nd form for the **balance** of your check to go into checking or another savings account.)

This authority will remain in effect, until I cancel it in writing.

_____ _____
Financial Institution Date

_____ _____
Branch Employee's Name (Please Print)

_____ _____
City, State Employee's Signature

Transit/Routing (ABA) Number

Account Number at Financial Institution

If you do not have the documentation to support the account numbers, please take this form to your bank and have them fill the form out and sign below:

_____
Signature of Bank Employee