

**City of Ripon**  
**ELECTRONIC FUNDS TRANSFER AUTHORIZATION**

\*\*\*Please attach a pre-printed voided check or if the account you want to setup is new or is a Savings account, a letter, on bank letterhead, stating your account information (routing# & account#) signed by a teller will suffice. Please submit proper backup for each account you wish to setup. \*\*\*

## Employee Information

Name \_\_\_\_\_

Address \_\_\_\_\_  
(# and Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Phone # (\_\_\_\_\_) \_\_\_\_\_

(City)

(State)

(Zip)

## Authorization

I hereby authorize my employer, the City of Ripon, to directly deposit my pay in the bank account(s) listed below in the amounts specified. I have attached a pre-printed voided check or other proper backup for each account specified below. I understand that any amount not specified will automatically result in a check being issued to me. This authorization is to remain in force until the City of Ripon has received written authorization from me of its termination or change.

Also, I grant the City of Ripon the right to correct any Electronic Fund Transfer resulting from an erroneous overpayment by debiting my account to the extent of such overpayment.

 \_\_\_\_\_

### Employee Signature

### Effective Date

## Financial Institution Information

<b>Account #1</b> <input checked="" type="checkbox"/> Check one <input type="checkbox"/> Checking <input type="checkbox"/> Savings Account # _____ Financial Institution _____	<b>Account #2</b> <input checked="" type="checkbox"/> Check one <input type="checkbox"/> Checking <input type="checkbox"/> Savings Account # _____ Financial Institution _____
Address _____ City _____ State _____ Zip _____	Address _____ City _____ State _____ Zip _____
\$ Amount <b>OR</b> % of Pay to be deposited _____	\$ Amount <b>OR</b> % of Pay to be deposited _____
<b>Account #3</b> <input checked="" type="checkbox"/> Check one <input type="checkbox"/> Checking <input type="checkbox"/> Savings Account # _____ Financial Institution _____  Address _____ City _____ State _____ Zip _____	<b>Account #4</b> <input checked="" type="checkbox"/> Check one <input type="checkbox"/> Checking <input type="checkbox"/> Savings Account # _____ Financial Institution _____  Address _____ City _____ State _____ Zip _____
\$ Amount <b>OR</b> % of Pay to be deposited _____	\$ Amount <b>OR</b> % of Pay to be deposited _____