



City of Round Rock Direct Deposit Authorization Agreement

I authorize and request the City of Round Rock to deposit my payroll check to the financial institutions named below. If at any time there is an error with the direct deposit, the City of Round Rock is authorized to credit or debit my account with the appropriate amounts to equal my earnings for such period.

Note: Any changes will be effective at the start of a new pay period. However, if your bank account has been compromised, we will discontinue your direct deposit upon notice. Please contact HRD for further assistance.

Section I – New Account			
Bank Name		Amount	Type of Account
1	Bank Name:	\$ or % (circle one)	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
	Routing No:		
	Account No:		
2	Bank Name:	\$ or % (circle one)	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
	Routing No:		
	Account No:		
3	Bank Name:	\$ or % (circle one)	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
	Routing No:		
	Account No:		

Section II – Terminate Existing Account		
Bank Name	Account Number	Type of Account
1		<input type="checkbox"/> Checking <input type="checkbox"/> Savings
2		<input type="checkbox"/> Checking <input type="checkbox"/> Savings

Section III – Change Amount of Existing Account			
Bank Name	Account Number	New Amount	Type of Account
1		\$	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
2		\$	<input type="checkbox"/> Checking <input type="checkbox"/> Savings

Print Employee Name

Employee Number

Employee Signature

Date Signed

Effective Payroll Date