

**FERGUS COUNTY  
EMPLOYEE DIRECT DEPOSIT AUTHORIZATON**

This document must be signed by employees requesting automatic deposit of paychecks and retained on file by the employer. Employees must attach a voided check for each of their accounts to help verify their account numbers and bank routing numbers.

**ACCOUNT 1** \_\_\_\_\_

Account Type        \_\_\_\_\_ Checking                                \_\_\_\_\_ Savings

Bank Routing Number (ABA number): \_\_\_\_\_

Account Number: \_\_\_\_\_

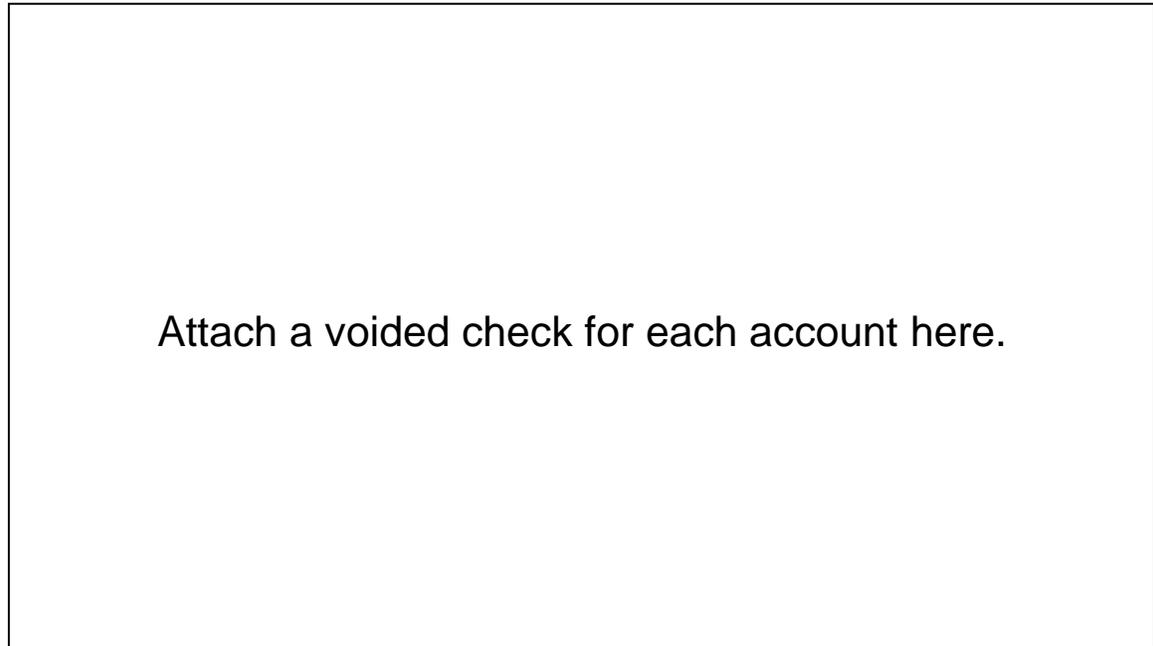
Percentage or dollar amount to be deposited to this account: \_\_\_\_\_

**ACCOUNT 2** \_\_\_\_\_

Account Type        \_\_\_\_\_ Checking                                \_\_\_\_\_ Savings

Bank routing number (ABA number): \_\_\_\_\_

Account number: \_\_\_\_\_



**Authorization Fergus County** \_\_\_\_\_

This authorizes Fergus County to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my (our) account(s) indicated below and to other accounts I (we) identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries. I agree that the ACH transactions authorized herein shall comply with all applicable U.S. Law. This authorization will be in effect until Fergus County receives a written termination notice from myself and has a reasonable opportunity to act on it.

Authorized Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_