

**City of De Pere  
Authorization for Direct Deposit  
Seasonal Employees**

☐ New ☐ Amended

Employee Name: \_\_\_\_\_ Employee #: \_\_\_\_\_

**Employees must have a checking or savings account in their name, not parents, etc.**

Financial Institution Name: \_\_\_\_\_  
Routing/transit number: \_\_\_\_\_  
Account number: \_\_\_\_\_  
Type of account: ☐ Checking ☐ Savings/other

I authorize the City of De Pere, "City", to initiate deposits to and to initiate, if necessary adjustments for any errors to the accounts indicated above. This authorization shall remain in full force and effect until both the City and my Financial Institution(s) have received written notification from me revoking this authority in such time as to afford the City and Financial Institutions a reasonable opportunity to act.

Employee signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Please complete form and attach a voided check or direct deposit information from your financial institution. For direct deposit to a savings account, contact your financial institution, request the information and attach to this form. **Deposit slips are not acceptable.**

John Doe  
123 Your Street  
Yourtown, AA 12345

2400

PAY TO THE ORDER OF \_\_\_\_\_

\_\_\_\_\_ DOLLARS

Your Bank  
Anywhere USA

MEMO \_\_\_\_\_

122105278 6724301068 2400

Routing Number Account Number Check Number