Town of Monroe
Employee Direct Deposit Enrollment Form

To enroll in Full Service Direct Deposit, simply fill out this form and give to the Accounting Department. Attach a voided check for each checking account - not a deposit slip. If depositing to a savings account, ask your bank to give you the Routing/Transit Number for your account. It isn’t always the same as the number on a savings deposit slip. This will help ensure that you are paid correctly.

Below is a sample check MICR line, detailing where the information necessary to complete this form can be found.

IMPORTANT! Please read and sign before completing and submitting.

I hereby authorize the Town of Monroe to deposit any amounts owed me, initiating credit entries to my account at the financial institution (hereinafter “Bank”) indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by the Town of Monroe to my account. In the event that the Town of Monroe deposits funds erroneously into my account, I authorize the Town of Monroe to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in effect until the Town of Monroe and Bank have received written notice from me of its termination.

Employee Name: _______________________________ Social Security #: __ __ __ - __ __ - __ __ __ __
Employee Signature: _______________________________ Date:____________________

Account Information

Make sure to indicate what kind of account, along with amount to be deposited, if less than your total net paycheck.

1. Bank Name/City/State: _______________________________
Routing Transit #: __ __ __ __ __ __ __ __ __ __ __ __ __ __ Account Number: _______________________________

☐ Checking  ☐ Savings  ☐ Other  I wish to deposit: $ _______.____ or  ☐ Entire Net Amount

2. Bank Name/City/State: _______________________________
Routing Transit #: __ __ __ __ __ __ __ __ __ __ __ __ __ __ Account Number: _______________________________

☐ Checking  ☐ Savings  ☐ Other  I wish to deposit: $ _______.____ or  ☐ Entire Net Amount

3. Bank Name/City/State: _______________________________
Routing Transit #: __ __ __ __ __ __ __ __ __ __ __ __ __ __ Account Number: _______________________________

☐ Checking  ☐ Savings  ☐ Other  I wish to deposit: $ _______.____ or  ☐ Entire Net Amount

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