

**City of Roeland Park  
Automatic Payroll Deduction  
Direct Deposit**

**Employee Authorization**

\_\_\_\_\_  
Employee Name

I authorize you and the financial institution(s) listed below to automatically deposit my pay to the indicated account(s) as follows:

Bank Name	State	Type (Checking or Saving)	Amount \$ or %	Account Number	Routing Number

Please Check One:

<input type="checkbox"/>	New or Additional Direct Deposit		
<input type="checkbox"/>	Change the Bank or Account Number on an Existing Direct Deposit	Account Number to be replaced:	
<input type="checkbox"/>	Change the Amount of an existing Direct Deposit	Amount Was:	Amount Changed To:

It is my responsibility to verify deposits on a per pay period basis before writing checks against these funds. I may cancel these direct deposit(s) at any time.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date