City of Virginia Beach Finance Payroll Division

Employee Direct Deposit Authorization

2424 Courthouse Drive, Bldg 18, Room 209 Tel: 385-4301 Fax: 385-8943 FinancePayroll@vbgov.com

Instructions

- For each checking account(s) attach a voided check
- For each savings account(s) attach bank documentation for verification of bank routing and account number(s)
- A deposit slip is not acceptable documentation
- Provide at least two (2) weeks notice to the Finance Payroll Division prior to changing or closing any account(s)
- For one account, complete Section 1 ONLY. For two accounts, complete Section 1 and 2. For 3 accounts, complete Section 1, 2 and 3. Return completed form to the Finance Payroll Division. (Maximum of three accounts.)

Employee Name: (Last First	MI)	Employee Number	Organization
SECTION 1) Deposit Net Pay		Effective Date	
-	☐ Checking	☐ Savings	New ☐ Change ☐ Stop
Name of Financial Institution	Account Typ	e (Select one)	Action Requested (Select one)
Routing Number		Account	Number
SECTION 2) Deposit Fixed Amount \$			Date
			New Change Stop
Name of Financial Institution	Account Typ	e (Select one)	Action Requested (Select one)
Routing Number		Account	Number
SECTION 3) Deposit Fixed Amount \$	Effective Date		
] New □ Change □ Stop
Name of Financial Institution	Account Typ	e (Select one)	Action Requested (Select one)
Routing Number		Account	Number
I authorize the City and Financial Institution(s) listed above to deposit automatically to the indicated account(s) all amounts payable to me by the City. If funds to which I am not entitled are deposited into my account(s), I authorize the City to direct the Financial Institution to return said funds. This authority shall remain in effect until canceled in writing.			
Employee Signature		Date	Daytime Phone Number
For Finance Payroll Office Use Only: System	Input:		Date:

Revised: 06/28/12