

**CITY OF OAKWOOD  
PAYROLL DEPARTMENT**

**DIRECT DEPOSIT AUTHORIZATION**

Employee Name \_\_\_\_\_  
(Please print)

I hereby authorize the City of Oakwood Payroll Department to directly deposit into my account(s) the following:

	<u>Financial Institution</u>	<u>Routing Number *</u>	<u>Type of Account (check/savings)</u>	<u>Account Number</u>	<u>\$ Amount or Net Pay</u>
1	_____	_____	_____	_____	\$ _____
2	_____	_____	_____	_____	\$ _____
3	_____	_____	_____	_____	\$ _____

\* Routing number must be nine digits. Please confirm the routing number(s) with your financial institution.

**Effective 1/1/2012 Direct Deposit is mandatory and the entire net amount of the check will be direct deposited**

**All direct deposit stubs will be emailed, please provide email address to send it to. Please print clearly.**

**Email address:** \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date