DIRECT DEPOSIT AUTHORIZATION FORM
BALTIMORE COUNTY OFFICE OF BUDGET AND FINANCE

PAYEE'S AUTHORIZATION - Please fill out and return to:

Baltimore County Office of Budget and Finance
Pay Systems Division
400 Washington Avenue - Room 169
Towson, MD 21204
410-887-2420

I authorize Baltimore County Office of Budget and Finance and the financial institution listed below to deposit my net pay automatically to my checking or savings account each payday. In the event that funds are deposited to my account that I am not entitled to, the Baltimore County Office of Budget and Finance is authorized to notify the financial institution to debit my account to return said funds.

ITEMS (1) THROUGH (6) MUST BE COMPLETED TO PROCESS THIS REQUEST:

(1) _____ _____
Print Name Social Security Number

(2) _____ _____
Name of Your Financial Institution Your Account Number

(3) Deposit to: [ ] Checking Account - attach a VOID check below

[ ] Savings Account _____
Banks Routing # or ABA # **(REQUIRED)**

(4) _____ _____ _____
SIGNATURE DATE HOME PHONE #

(5) TYPE OF REQUEST: [ ] NEW [ ] CHANGE*

(6) Attach a VOID CHECK below (for checking) or fill in your Bank's ABA # (for savings) on line 3 above.

<<<<< ATTACH VOID CHECK HERE >>>>>

Pending account verification, this transaction will be effective the second payday after the receipt of this form.
*ANY CHANGE IN ACCOUNT NUMBER OR FINANCIAL INSTITUTION MAY CAUSE A BREAK IN YOUR DIRECT DEPOSIT. A CHECK WILL BE MAILED TO YOU THE NEXT PAY AFTER YOUR ACCOUNT CHANGE.
This authorization agreement is to remain in full force and effect until written notification is received from the payee, in such a manner as to afford the payor a reasonable opportunity to act on it. For information call (410) 887-2420.

Office Use Only Pre-Note Date _____
DPAUTH (REV 09/98)