TOWN OF ISLIP



Authorization Agreement for Direct Deposit of Payroll

I hereby authorize and request the Town of Islip, hereinafter called TOI, to deposit my net pay automatically to my account specified below each pay day by initiating credit entries to my account electronically or by other commercially accepted methods, and I authorize the financial institution named below to credit the same to my account. If funds to which I am not entitled are deposited to my account, I authorize TOI to direct the financial institution to return said funds by any such method, and I authorize the financial institution to debit same from my account. This authority will remain in effect until TOI has received written notice from me of its cancellation in such time and manner as to afford TOI and the financial institution a reasonable opportunity to act on it.

Employee Name	Employee Number	Department
Signature		Date
_	l. Any changes to this Direct	y period after the pay period in ct Deposit must be submitted in
Please Check one.		
Please Check one. New Enrollee	Change Banks	Change Deduction Amount
Please Check one. New Enrollee Change Account Numb		Change Deduction Amount Closed Account

Account Designation for Direct Deposit

Employee Number	Employee Name	Department	
NOTE: If more than one account or financial institution is selected the First account must be designated as "MANDATORY/RESIDUAL"			
Changed Banks	Changed Account	New Account	
Full or Residual Account Bank Name Routing Number (ABA)* Account Number:	Address	Checking	
Remaining Accounts: Chg Banks Chg Account	Chg Amount	_ Closed Account New Account	
Secondary Account: Bank Name Routing Number (ABA)*: Account Number: Amount:			
Remaining Accounts: Chg Banks Chg Account	Chg Amount	Closed Account New Account	
Secondary Account: Bank Name Routing Number (ABA)*: Account Number: Amount:			

^{*}This information can be found on the bottom of your personal check, preceding your account number. If you are unsure about the routing number, please contact your financial institute representative.