



**Town of Oxford
Direct Deposit Authorization Form**

Employee Name: _____ **Employee Number:** _____

Direct deposits are distributed to accounts in order of the priority starting with priority "1".

If you already have direct deposit and are adding a new account, please list this along with all existing accounts in order of priority.

The total of the percentages cannot exceed 100%.

1.)	Bank Name		New / Change / Delete	
	Routing Number		\$ Amount to be Deposited	
	Account Number		% Percent of Net Pay	
	Checking / Savings		Remainder of Net Pay	
2.)	Bank Name		New / Change / Delete	
	Routing Number		\$ Amount to be Deposited	
	Account Number		% Percent of Net Pay	
	Checking / Savings		Remainder of Net Pay	
3.)	Bank Name		New / Change / Delete	
	Routing Number		\$ Amount to be Deposited	
	Account Number		% Percent of Net Pay	
	Checking / Savings		Remainder of Net Pay	
4.)	Bank Name		New / Change / Delete	
	Routing Number		\$ Amount to be Deposited	
	Account Number		% Percent of Net Pay	
	Checking / Savings		Remainder of Net Pay	

The last account listed will be where the balance of your pay will be deposited.

Please attach a voided check and/or savings account deposit slip to this form and return to the Treasurer's Office (Town Employees) or Central Office (School Employees).

I authorize the Town of Oxford to direct deposit funds to **my** account with the financial institutions listed above or to reverse any erroneous entry they may have processed against my account. If I elect to stop this electronic credit, I understand I must notify the Town of Oxford and the Bank in writing to revoke my authorization. I also understand that I must place a stop payment request with the Bank, indicating the originating Company name and the amount of the Debit/Credit, to insure that no future electronic entries from the Company are accepted and paid against my account.

Employee Signature: _____

Date: _____