

Employee Direct Deposit Authorization

Instructions

Employee: Fill out form and return via United States Postal Service. Faxed documents will NOT be accepted for Direct Deposit purposes.

This document must be signed by the employee requesting automatic deposit of paychecks. Employee must attach a voided check for each of their accounts to help verify their account numbers and bank routing numbers. NOTE: Debit/Cash cards may also be used.

Account 1 Bank Name:

Account 1 type: CIRCLE ONE

Checking

Savings

Bank routing number (ABA number): _____

Account number: _____

Percentage or dollar amount to be deposited to this account:

Account 2 (remainder to be deposited to this account) Bank Name:

Account 2 type: Checking

Savings

Bank routing number (ABA number): _____

Account number: _____

Attach a voided check for each account here

Please write name of employer here: _____

Employee authorized signature: _____

Print employee name: _____ **Date:** _____

This document must be mailed to:

CTD / CDS Division
PO Box 12368
Austin, Texas 78711