



VILLAGE OF WESTERN SPRINGS AUTHORIZATION FOR DIRECT DEPOSIT

I authorize the Village of Western Springs, hereinafter called "Company" to initiate credit entries to my account indicated below and the institution name below, hereinafter called "Institution", to deposit to the same such account.

I further authorize "Company" to initiate debits to my account to correct any errors, and "Institution" to initiate any such corrections to my account. This authority is to remain in full force and effect until "Company" and "Institution" has received written notification from me of its termination in such time and in such manner as to afford "Company" and "Institution" a reasonable opportunity to act on it prior to depositing to the account.

I elect to use this payment option. Please attach a voided check.

I do not elect to use this payment option. Please pay me normally via check.

Employee Signature

Printed Name

Address

Phone

Date

Account #1

Type (check one) Checking Savings

Bank Name

Amount to be deposited to this account

Bank Routing # (ABA#)

Account #

Account #2

Type (check one) Checking Savings

Bank Name

Amount to be deposited to this account

Bank Routing # (ABA#)

Account #

Six accounts may be used to deposit funds. If you wish to use more accounts, please fill out another form. The processing of the first direct deposit will take approximately 2 payroll periods or 4 weeks.