

Third Account \$_____ (specify amount) or remaining balance

Routing Number _____ Account Number _____

Depository (or Bank) Name _____
Depository (or Branch) Location _____
(City, State, Zip)

Type of Account: _____ Checking _____ Savings

Fourth Account \$_____ (specify amount) or remaining balance

Please deposit the remaining balance of my paycheck into the following account:

Routing Number _____ Account Number _____

Depository (or Bank) Name _____
Depository (or Branch) Location _____
(City, State, Zip)

Type of Account: _____ Checking _____ Savings

I understand that if my paycheck is **less than** the total amount designated for the account number(s) above, all of my pay will be deposited into the first account.

Signature

Date

**Use additional forms if needed.
Please attach a voided check for each checking account or a deposit slip
for each saving account.**

Return this form to: Human Resources
 Service Building