Town of Reading
16 Lowell Street
Reading, MA 01867

Fax: (781) 942-9037
Website: www.ci.reading.ma.us

Finance Department
(781) 942-9005

DIRECT DEPOSIT
AUTHORIZATION FORM

NAME_____EMP #_____
(PLEASE PRINT)

PLEASE CHECK ONE:

_____This is a new direct deposit. _____This is a change

_____This is an additional direct deposit

Amount of direct deposit $_____ or % of direct deposit _____ net ____

Name of Bank_____

Account Type (check one): (_____)Checking (_____)Savings

Account Number:_____

Routing Number: _____

Signature: _____Date:_____

*****PLEASE ATTACH A VOIDED COPY OF CHECK. NO DEPOSIT SLIPS*****

EMAILED ADVICES ARE STRONGLY ENCOURAGED
nheffernan@ci.reading.ma.us

Each employee may have up to 5 different direct deposits that total 100% net. A separate form must be completed for each.