

# Town of Reading

## 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 \_\_\_\_\_ or 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**

To receive advices via email, simply email Nancy Heffernan at:

nheffernan@ci.reading.ma.us

You may elect up to four (4) different bank accounts for a net total of 100%.  
Each account will require a new form.

PLEASE NOTE: Any new/changes to your direct deposit will take two pay cycles  
to go into effect.

