



Authorization Agreement for Direct Deposit

To accurately show bank account number and bank transit number:

- for checking account, please attach a copy of a VOIDED CHECK, deposit slip or bank documentation
- for savings account, please attach a copy of a deposit slip or bank documentation.

Direct deposit will not be processed without the attached documentation. Also, any new accounts will take one payroll cycle before the money is deposited. For our weekly staff (stage, musicians, projectionist) direct deposits takes two pay cycles. Please plan accordingly.

I, _____, hereby authorize the Hartford Symphony to initiate credit entries, and if necessary, debit entries and adjustment for any credit entries in error to my account(s) indicated below.

Bank Name

Address

City

State

Zip

Savings Checking

Account Number

Routing Number

Amount of Deposit

\$

Authorization Agreement for Direct Deposit

Bank Name

Address

City

State

Zip

Savings Checking

Account Number

Routing Number

Amount of Deposit

\$

.

Bank Name

Address

City

State

Zip

Savings Checking

Account Number

Routing Number

Amount of Deposit

\$

This authorization is to remain in full force and effect until The Symphony has received written notification from me of any change.

Employee Signature

Date

Payroll initials & entry date _____