

DIRECT DEPOSIT FORM: Please fill out this form in its entirety, including the signature line(s). You may choose to have your pay deposited in one or two separate accounts; if you only want it in one account, choose 100% on your first account. If you want to split your pay between accounts, please indicate the percentage of each paycheck; the total must be 100%. YOU MUST PROVIDE either a 1) Voided check or deposit slip or 2) a bank letter stating your routing and account number for each account you desire to use. YOU CANNOT BE PAID AFTER JANUARY 1, 2015 WITHOUT THIS INFORMATION.

UMC FOOD MINISTRY

Authorization Agreement

I hereby authorize UMC FOOD MINISTRY to initiate automatic deposits to my account at the financial institution named below. I also authorize UMC FOOD MINISTRY to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold UMC FOOD MINISTRY responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until UMC FOOD MINISTRY receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Payroll Department.

Account Information

Name of Financial Institution: _____ Percent in this account: _____
Routing Number: _____ %
Account Number: _____ Checking | Savings

Name of 2nd Financial Institution _____ Percent in this account _____
Routing Number _____ %
Account number _____ Checking | Savings

Signature

Authorized Signature (Primary): _____ Date: _____

Authorized Signature (Joint): _____ Date: _____

