

Gwinnett, Newton & Rockdale County Health Departments
AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSIT OF NET PAY



Automatic direct deposit is mandatory

I, _____, authorize the Gwinnett, Newton & Rockdale County Health Departments (GNR Health) to deposit my net pay directly into my bank account. GNR Health is also authorized to adjust any over/under deposit which it has caused to be made to my account.

I RECOGNIZE THAT THE DEPOSIT OF MY NET PAY SHALL BE MADE BY ELECTRONIC MEANS. I ACKNOWLEDGE THAT THE RESPONSIBILITY OF GNR HEALTH TO PROVIDE ME MY NET PAY SHALL BE SATISFIED BY GNR HEALTH PROVIDING A CORRECT CREDIT ENTRY IN ACCORDANCE WITH THE AUTOMATIC DEPOSIT SERVICES AGREEMENT BETWEEN GNR HEALTH AND EACH OF ITS COUNTY'S FINANCIAL INSTITUTIONS.

Attached is a voided check, or a direct deposit set-up form, showing the correct information of my account at _____
(name of employee's financial institution). If I change banks, or bank accounts, I am responsible for notifying my payroll representative in writing of the change immediately.

<p>The net amount of my check is to be deposited into the following account: Check only one: <input type="checkbox"/> Checking <input type="checkbox"/> Savings</p>

In signing this authorization for Direct Bank Deposit, I understand that certain checks will not be automatically deposited into my account but will be given to me.

These checks are:

1. First check after Payroll Office sets up Direct Bank Deposit (bank requires pre-notification)
2. First check after authorized changes in my bank or bank account
3. Travel checks

Employee Signature

Date