

Direct Deposit Authorization Payroll

I authorized Northeast Georgia Council, B.S.A. to deposit my payroll check as indicated below.

_____ Please deposit my net pay to the following account

_____ checking _____ savings*

_____ Bank name

_____ account number

_____ transit/routing number

(a voided check must be attached for checking)

***Please verify the transit/routing number with your bank
for savings accounts-the transit/routing number is not
always correct on a deposit slip)**

_____ *Yes, I have verified the routing number with my bank for the savings account listed above.
I understand an incorrect or illegible number will delay my pay by 2 – 3 weeks.

Name (printed)

Signature

Date