

EMPLOYEE FUNDS DEPOSIT AUTHORIZATION

AGENCY NAME: **Board of Governors of the Federal Reserve System**

Name _____ Social Security Number _____

Mailstop _____ Phone Ext. _____

PAYROLL

I hereby authorize the Board of Governors of the Federal Reserve System to initiate direct deposits for payroll to the accounts listed below:

	Amount per pay period	Depository (Bank) Name, City, State	Transmittal Information	
Net Pay Deposit	<i>DO NOT MARK</i>		Bank Transit/ABA Number	<input type="checkbox"/> Checking
				<input type="checkbox"/> Savings
Account #1 ...			Bank Transit/ABA Number	<input type="checkbox"/> Checking
				<input type="checkbox"/> Savings
Account #2 ...			Bank Transit/ABA Number	<input type="checkbox"/> Checking
				<input type="checkbox"/> Savings
Account #3 ...			Bank Transit/ABA Number	<input type="checkbox"/> Checking
				<input type="checkbox"/> Savings

NON-PAYROLL

I hereby authorize the Board of Governors of the Federal Reserve System to initiate electronic funds transfers (EFT) to the account below:

Depository (Bank) Name, City, State	Transmittal Information	
	Bank Transit/ABA Number	<input type="checkbox"/> Checking
		<input type="checkbox"/> Savings
	Account Number	

This authorization is to remain in full force and effect until the Board of Governors of the Federal Reserve System has received written notification from me of its termination in such a time and manner as to afford Agency a reasonable opportunity to act upon it.

Signature _____

Effective Date _____

Return to Mail Stop 152.