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Monterey Peninsula Airport District

DIRECT PAYROLL DEPOSIT AUTHORIZATION FORM

FROM: _____
PLEASE TYPE, OR PRINT LEGIBLY

DATE: _____

I hereby authorize Monterey Peninsula Airport District ("MPAD") to deposit any amounts owed me by initiating credit entries to my accounts at the financial institutions ("Bank") indicated on this form. Further, I authorize the Bank to accept and to deposit payments initiated by MPAD to my accounts. In the event that MPAD deposits funds into my account erroneously, I authorize MPAD to take the action necessary to correct the error.

I understand that Monterey Peninsula Airport District does not offer direct payroll deposit benefits to probationary employees, and that the actions authorized on this Form will not be initiated until my probationary employment period has been completed. I further understand that I may have deposits directed into as many as three (3) bank or credit union accounts, provided no more than two (2) of the deposits are to checking accounts. I have attached a voided check or a photocopy of my account number card to ensure that my bank account information is accurate.

I have been notified that, if I am hourly wage employee, my deposits will reflect hours worked through the day that payroll was processed. The hours worked between the payroll processing date and payday, normally three business days, will be reflected on the next payroll. Hours not yet worked will not be projected through the end of payroll period.

SIGNATURE: _____ Social Security #: _____

Please deposit following bank account(s):

1. Bank Name: _____

Routing/Transit #: _____ Account Number: _____

Checking Savings I wish to deposit: \$_____.____ or Entire Net Amount

2. Bank Name: _____

Routing/Transit #: _____ Account Number: _____

Checking Savings I wish to deposit: \$_____.____ or Entire Net Amount

3. Bank Name: _____

Routing/Transit #: _____ Account Number: _____

Checking Savings I wish to deposit: \$_____.____ or Entire Net Amount