

# Tax Collector's Office

If starting original direct deposit or an additional direct deposit complete sections A & B. If you want to stop your direct deposit with one institution and start it with another institution, complete sections A, B & C. To just stop a direct deposit complete section A & C.

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**Section A:** Name: \_\_\_\_\_  
SSN: \_\_\_\_\_

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**Section B:** Authorization/agreement for Automatic Direct Deposit of Payroll

Financial Institution Name, Address and Phone:

FLORIDA WEST COAST CREDIT UNION  
1225 MILLENNIUM PARKWAY  
BRANDON, FL 33511  
813-643-5572

CHECK ONE: Deposit should be made to my:  Checking Account or  Savings Account

Account Number: \_\_\_\_\_

**PLEASE ATTACH A BLANK BANK DEPOSIT SLIP WHICH WILL BE USED TO RECORD YOUR TRANSIT AND ACCOUNT NUMBERS.**

I hereby certify that I am an owner of the above account and authorize the Payroll Department to deposit the full net amount or designated portion of my payroll check to the financial institution account indicated above, and to post debit entries to correct any deposits made in error. This authorization shall remain in full force and effect until you have received written notification from me of its termination in such a manner as to afford you a reasonable opportunity to act upon it. Final pay will be issued in the form of a check.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

I understand the Tax Collector's office cannot guarantee that the Direct Deposit will be deposited in my account on my payday.

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**Section C:** STOP DIRECT DEPOSIT

I would like to stop the direct deposit of my payroll check.

Financial Institution: \_\_\_\_\_ Account Number: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_