GREENE COUNTY
NORTH CAROLINA

Direct Deposit Authorization Form

I authorize Greene County to send credit entries, as well as appropriate adjustments and debit entries, to my accounts as indicated below.

The last item must be for the remaining amount owed to you. To distribute to more accounts, please complete another form. Make sure to indicate what kind of account, along with amount to be deposited, if less than your total net paycheck.

Account #1

Account Type: ⬜ Checking ⬜ Savings

Bank Name: _____

Routing Number: _____ Account # _____

I wish to deposit: $_____ or Entire Paycheck ⬜

Account #2

Account Type: ⬜ Checking ⬜ Savings

Bank Name: _____

Routing Number: _____ Account # _____

I wish to deposit: $_____ or Entire Paycheck ⬜

Account #3

Account Type: ⬜ Checking ⬜ Savings

Bank Name: _____

Routing Number: _____ Account # _____

I wish to deposit: $_____ or Entire Paycheck ⬜

Please attach a voided check or form from bank for each account.

_____ _____
Signature Date

_____

Revised 03/2021

Printed Name