

Direct Deposit of Payroll

Direct deposit of payroll earnings is required for all staff. Please fill out the authorization form on the other side of this form or take it to your financial institution for assistance. If your direct deposit is to a checking account(s), staple a voided check(s) to the authorization form. Return the completed form to your payroll office.

You must designate a primary account and you may designate a secondary account. The account(s) can be checking **or** savings. If you only have a primary account 100% of your net pay will be direct deposited to your primary account. If you choose to have a secondary account you must designate either a flat dollar amount or a percent of your net pay to go into the secondary account. If you select a flat dollar amount and your net pay is less than the dollar amount designated, your entire pay will be deposited to your primary account.

The first payroll after you sign up for direct deposit will be a test run to make sure that all the bank systems and numbers are working correctly. This is called the pre-note process and is required by the Federal Reserve Bank. During that test run, you will receive a paper check.

Your direct deposit remittance will automatically be e-mailed to your county e-mail address if it ends in “@co.dunn.wi.us.” You have the option to choose an alternative e-mail address by providing that e-mail address on the direct deposit authorization form. If you do not have a Dunn County e-mail address and choose not to have your remittance sent to an alternative address, you will receive a paper copy of your direct deposit remittance notice.

If you have any questions about this, please contact your Payroll Office.

Direct Deposit of Employee Reimbursements

Effective January 1, 2008, all non-union employees, board members, and committee members will have direct deposit of employee reimbursements.

On the bottom of the direct deposit form you can choose whether you want your employee reimbursements to be direct deposited into your primary **or** secondary account. 100 percent of your employee reimbursement will go into the account you select.

The first reimbursement after you sign up for direct deposit will be a test run to make sure that all the bank systems and numbers are working correctly. This is called the pre-note process and is required by the Federal Reserve Bank. During that test run, you will receive a paper check with a message that your account was pre-noted.

Remember if you close any account that is receiving a direct deposit, you need to fill out a new direct deposit form with the new account number(s) or your direct deposit will be rejected and will be returned to the County.

DIRECT DEPOSIT EMPLOYEE AUTHORIZATION

Please fill out and return to your Payroll Office.

Send direct deposit remittance to this email address _____ . (This option is required if your county e-mail address ends in @co.dunn.wi.us. You can choose to have it sent to an alternative e-mail address)

I do not have a County email address ending in @co.dunn.wi.us and prefer notification by paper copy.

Staple Voided
Check Here ↕

PRIMARY ACCOUNT - REQUIRED

I authorize you and the financial institution listed below to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries in error to my: checking account savings account

This authority will remain in effect until I have turned in a new form.

_____ Date

_____ FINANCIAL INSTITUTION

_____ NAME (PLEASE PRINT)

_____ CITY STATE

_____ SIGNATURE

TRANSIT ROUTING NUMBER

□□□□□□□□□□

ABA

ACCOUNT NUMBER INFORMATION

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Staple Voided
Check Here ↕

SECONDARY ACCOUNT - OPTIONAL

I authorize you and the financial institution listed below to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries in error to my: checking account savings account – as long as my net pay covers the amount.

I designate \$_____ (amount) or _____ percentage of my pay each payday.

This authority will remain in effect until I have turned in a new form

_____ Date

_____ FINANCIAL INSTITUTION

_____ NAME (PLEASE PRINT)

_____ CITY STATE

_____ SIGNATURE

TRANSIT ROUTING NUMBER

□□□□□□□□□□

ABA

ACCOUNT NUMBER INFORMATION

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REIMBURSEMENT ACCOUNT

I authorize you to use my Primary Account or Secondary Account (need to select one) for employee reimbursements from the County Clerk's office.

_____ SIGNATURE

Copy to County Clerks Office _____ (initial) _____ (date)