COUNTY OF WEAKLEY
DEPARTMENT OF FINANCE
AUTHORIZATION FOR AUTOMATIC PAYROLL DEPOSIT

Are you currently drawing a Tennessee Consolidated Retirement check? Yes or No

NAME: _____

SOCIAL SECURITY NUMBER: _____

BANK NAME: _____
CITY, STATE: _____
CHECKING ACCOUNT #: _____
AND/OR
SAVINGS ACCOUNT #: _____
ROUTING/TRANSIT/ABA NUMBER: _____

PLEASE ATTACH A VOIDED CHECK.

I hereby authorize the Weakley County Department of Finance to automatically deposit my payroll check into the above account(s).

SIGNATURE: _____

DATE: _____

TELEPHONE NUMBER: _____

** IF YOU SHOULD HAVE ANY CHANGES, BE SURE TO SEND THE DEPARTMENT OF FINANCE WRITTEN NOTIFICATION IN A TIMELY MANNER.