



CITY OF NEWPORT BEACH Direct Deposit Form

NEW

CHANGE

CANCEL

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSIT

I authorize the City of Newport Beach to initiate credit entries to the **Checking**
or Savings account provided below. If necessary, a debit entry may be made to
correct an erroneous credit and/or overpayment made to the account.

IF REQUESTING 2nd DIRECT DEPOSIT INDICATE \$ AMOUNT _____

FINANCIAL INSTITUTION ACCOUNT INFORMATION

BANK NAME: _____

**Please attach a voided check or a direct deposit form from your bank
with the account and routing numbers.**

This authority will remain with the City of Newport Beach until a written notification is made to
the City to terminate this direct deposit arrangement.

I am a Vendor Instructor Employee Number: _____

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

EMAIL ADDRESS/TELEPHONE _____

DATE _____ SIGNATURE _____

Please note: New Direct Deposit transactions (not changes to existing accounts) are tested to ensure the set-up is
accurate. Therefore, depending on when you submit your Direct Deposit Enrollment Form, you may receive one or two
paper checks.