

# RUSK COUNTY

## Direct Deposit Authorization – Vendors

I hereby authorize RUSK COUNTY to initiate credit entries to the account(s) below. If necessary, debit entries will be initiated as adjustments for any credit entries in error to my account(s) listed below.

Name, Address and Telephone of Vendor:

*Please include email address if you would like notification of the deposit.*

Click here to enter text.

Click here to enter text.

Click here to enter text.

Click here to enter text.

Click here to enter text.

Type of account: ☐ Checking ☐ Savings

Account or ACH #: Click here to enter text.

Transit Routing #: Click here to enter text.

Name, Address and Telephone of Financial Institution:

Click here to enter text.

Click here to enter text.

Click here to enter text.

Click here to enter text.

This direct deposit authorization is to remain in full force until Rusk County has received written notification of its termination in such manner as to afford Rusk County and my financial institution(s) a reasonable opportunity to act upon it.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Click here to enter a date.

**You must include a voided check or share draft for checking accounts with this form. A deposit slip may only be attached for savings accounts. Failure to do so may result in a deposit error with is not the responsibility of Rusk County.**

You must contact your credit union to obtain the proper ACH (automated clearing house) account and transit routing numbers. Credit union account and routing numbers used for direct deposit transactions may be different than those indicated on the share draft you attach.

Batch #: \_\_\_\_\_ Approval Date: \_\_\_\_\_