Hidalgo County Drainage District No. 1
Authorization for Direct Payroll Deposit

PLEASE CHECK ONE

	New Direct Deposit Setup		Change Percent (%) Only
	Cancellation		Add / Remove Financial Institution
	Change Financial Institution		Change Account Number / Type

I authorize Hidalgo County Drainage District No. 1 and the financial institution named below to deposit, by Automated Clearing House (ACH) transfer, payroll payments owed to me by Hidalgo County Drainage District No. 1 and, if necessary, debit entries and adjustments for any amounts deposited electronically in error. If the designated account is closed or has an insufficient balance to allow the withdrawal in the event of an over payment, then I authorize Hidalgo County Drainage District No. 1 to withhold any payments owed to me by Hidalgo County Drainage District No. 1 until the erroneously deposited amounts are repaid. I consent to and agree to comply with the rules about electronic transfers as they exist on the date of my signature on this form or as subsequently adopted, amended or repealed. I hereby also accept responsibility for verifying that the amount deposited is correct after initial set up or changing of direct deposit. (Please read the information on the other side of this form)

EMPLOYEE INFORMATION (Must be completed by employee)

Name   Contact Telephone #
Social Security #
Address
City   State   Zip Code

FINANCIAL INSTITUTION INFORMATION

| Name	Telephone #
Routing #	Account #
Account Type (circle one) Checking Savings	Percent of funds into account (_____% of net)

Additional Financial Institution (if more than one)

Name	Telephone #
Routing #	Account #
Account Type (circle one) Checking Savings	Dollar amount to go into account $_____

Additional Financial Institution

Name	Telephone #
Routing #	Account #
Account Type (circle one) Checking Savings	Dollar amount to go into account $_____
Signature	Date

HCDD No. 1 Accounting Form
Approved by District Board of Director's
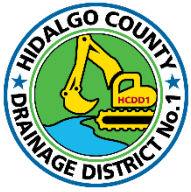
Hidalgo County Drainage District No. 1
Direct Deposit Payroll Information

Each direct deposit form **must have one** of the following:

1. Hidalgo County Drainage District No. 1 Financial Institution Verification form or the Financial Institution's Direct Deposit Set-up Form

2. The name of the employee **must** be on the account that the direct deposit funds are to be deposited into. **No exceptions.**

3. The direct deposit will remain in full force and in effect until the employee notifies the Hidalgo County Drainage District No.1's Accounting Department by completing and signing an agreement to cancel or make any changes to their direct deposit agreement with enough time for the District's Accounting Department and the financial institution the opportunity to act on it.

4. The transfer of funds through direct deposit will begin the second pay period following the date this agreement is received at the District's Accounting Department to provide time for testing by the financial institution of the routing/account information.

5. Please complete, sign, and return the original agreement to the District's Accounting Department. If you have any questions, please contact the District's Accounting Department at (956) 292-7080.

Note: The following **will not be accepted** for direct deposit process:

6. Temporary Check
7. Deposit Slips
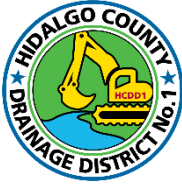
FINANCIAL INSTITUTION VERIFICATION FORM
FOR DIRECT DEPOSIT

Employee Name (Please print)	Telephone Number:

(This section must be completed by a bank representative)

Name of Financial Institution:

Address:

City:	State:	Zip Code:

Routing Transit Number (ABA):

Depositor Account Name(s):

Depositor Account Number:

Type of Account: (Circle One)	Checking	Saving

ACH Department Telephone Number:

Bank Representative Name / Title: (Please print)

*Bank Representative Signature:	Date:

*Hidalgo County Drainage District No. 1 will not deposit funds into an account that does not belong to the employee requesting the direct deposit. By signing this form, you are verifying that the District employee requesting this information is identified in the Depositor's Account Name.

Hidalgo County Drainage District No. 1 **WILL NOT** accept this form if the following apply:

- Form is not completely filled out.
- Form is not signed by Bank Representative.
- Form is filled out in pencil.
- Changes not initialed by Bank Representative

HCDD No. 1 Accounting Form
Approved by District Board of Director's