



Dana Moon
*County Treasurer
of McDonough County
#1 Courthouse Square
Macomb, IL 61455*

*Treasurer's Office 309/833-2032
Accounting/Payroll 309/837-3120*

DIRECT DEPOSIT FORM

Employee Name: _____

Employee Email: _____

Checking: _____ **Savings:** _____

Financial Institution: _____

Routing Number:

--	--	--	--	--	--	--	--	--

Account Number:

--	--	--	--	--	--	--	--	--

EMPLOYEE AUTHORIZATION

I authorize McDonough County, 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 the account listed above. This authority will remain in effect until I cancel or change it in writing with the County Payroll Deputy.

Employee Signature: _____