



COLORADO

Office of the State Controller

Department of Personnel & Administration

Employee Authorization for Direct Deposit/EFT

Department: _____

EID: _____

Employee Name: _____

Employee Email: _____

Reason for Request (Check One)

- ☐ Add account(s)
- ☐ Remove account(s)
- ☐ Change account percent or amount

Note: This form **will not be processed** if the second page is not completed as required.

Employee Signature: _____

Note: Digital signatures are acceptable

Authorization (please check)

- ☐ I hereby **authorize** my employer to make the requested change for my Electronic Funds Transfer (EFT) deposit as indicated within this form.

Additional Information:

Date: _____

Important: List all account(s) you are requesting to be changed. Changes may take up to 10 business days to complete.

A voided check or bank letter must be included per account request if you are adding an account(s) or this request will not be processed. All attachments must include the institution's name, routing number and account number.

ETFs are verified by your bank to ensure account information is accurate. On the first payday or reimbursement processed following completion of this form, the employee will receive a state warrant (check), and the system will send a test record to the financial institution to confirm that all information. If no problems exist, the employee's pay or reimbursement will be electronically transferred on the next payment.

1. Primary Account

Type: Checking or Savings

Nickname: _____

Account #: _____

Routing #: _____

2. Other Account

Type: Checking or Savings

Nickname: _____

Account #: _____

Routing #: _____

Percent or Amount: _____

3. Other Account

Type: Checking or Savings

Nickname: _____

Account #: _____

Routing #: _____

Percent or Amount: _____

4. Other Account

Type: Checking or Savings

Nickname: _____

Account #: _____

Routing #: _____

Percent or Amount: _____

5. Other Account

Type: Checking or Savings

Nickname: _____

Account #: _____

Routing #: _____

Percent or Amount: _____

6. Other Account

Type: Checking or Savings

Nickname: _____

Account #: _____

Routing #: _____

Percent or Amount: _____