



## Authorization of Direct Deposit

I authorize the National Railroad Passenger Corporation and the bank(s) indicated below to deposit my pay automatically into my account(s) each payday. If monies to which I am not entitled are deposited into my account, I authorize my employer to direct the bank to return said funds.

I certify that my name appears on the account(s) into which I have requested my pay be deposited. This authority will remain in effect until I have cancelled it in writing via the Cancellation of Deposit form, NRPC 2031 or by filling out a new form for direct deposit that automatically cancels previous requests.

If I have designated amount to a secondary account, Amtrak funds this amount first with the remaining money going to my primary account. If net pay is less than my designated amount only my secondary account will be funded.

### Employee Information

Employee Name		Department	
Employee ID No.	Work Telephone Number	Home Telephone Number	
Employee Signature			Date

### Primary Bank Information

Bank Name	<input type="checkbox"/> Checking <input type="checkbox"/> Savings		
City, State			
Customer Account Number	Bank Routing Number		

**For Checking Account, please attach a voided check. Your request for direct deposit into a checking account will be denied if a voided check is not provided.**

### Secondary Bank Information

Bank Name	<input type="checkbox"/> Checking <input type="checkbox"/> Savings		
City, State			
Customer Account Number	Bank Routing Number		
Designated Amount	\$	Please circle one ( <b>Bi-Weekly</b> / Weekly )	

Complete and **sign** this form and return or fax to:

**Jersey Central F.C.U.**

**P.O. Box 661**

**Cranford, NJ 07016**

**Fax: (908) 272-6029**

**-OR-**

Corporate Payroll Operations

10 G Street, NE 3W-132

Washington, DC 20002

(202) 906-4617