



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 to 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 which automatically cancels previous requests.

If I have designated a fixed amount for deposit to a saving account, the remainder will be deposited to my checking account. However, should available funds be less than the fixed amount designated, all remaining monies will be placed in the saving account

Employee Information

Employee Name		Department	
Social Security Number	Work Telephone Number	Home Telephone Number	
Employee's Signature			Date

Checking Account - Bank Information

Bank Name	
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.

Savings Account - Bank Information

Bank Name	
City, State	
Customer Account Number	Bank Routing Number
Designated Amount:	\$

Complete and **sign** this form and return it to:

Corporate Payroll Operations
10 G Street, NE 3W-132
Washington, DC 20002