



Jefferson County
Vendor Direct Deposit Authorization

Name: _____

Company: _____

Address: _____

I hereby authorize direct deposit of payment from Jefferson County into the company account at the following bank: _____

Routing #: _____

Checking

Account #: _____

Savings
(Please check one)

One of the following is required in order for this request to be processed (please check one):

- Voided check (no starter checks)
- Pre-printed deposit slip
- Bank letter or specification sheet
(the signature of your local bank representative **MUST** be included)

A detail of the invoice(s) being paid will be emailed. Please provide at least one valid address:

Email #1: _____

Email #2: _____

Email #3: _____

Signature: _____ Date: _____