

# Direct Deposit Authorization Form

**Return to your Kaiser Permanente HR or Payroll Department – not Mechanics Bank.**

Complete each field in this form.

## Company Information

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

## Employee Information

Name \_\_\_\_\_ Employee ID # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

## Bank Information

### Mechanics Bank

1111 Civic Drive  
Walnut Creek, CA 94596

For any direct deposit related questions, please call 800.719.8080.

**Routing Number 121102036**

## Deposit Information

Account type:  Checking  Savings

Account # \_\_\_\_\_ Amount \$ or % \_\_\_\_\_

Account type:  Checking  Savings

Account # \_\_\_\_\_ Amount \$ or % \_\_\_\_\_

I authorize the above named employer to make deposits in the Mechanics Bank account(s) identified above and authorize the bank to accept such deposits. It is agreed that these deposits and adjustments may be made electronically and under the Rules of the National Automated Clearing House Association. I understand that this authorization replaces any previous authorization and will remain in full force and effect until the company named above has received written notification from me of its termination in time to afford the company and the depository a reasonable opportunity to act.

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return to your Kaiser Permanente HR or Payroll Department – not Mechanics Bank.**