

Non-Federal Direct Deposit Enrollment Request Form

Authorization agreement for automatic deposits (ACH credits)

非聯邦直接存款登記申請表

自動存款授權協定 (ACH 貸記)

Directions for Customer Use:

- 1) **Ensure entire form is complete, then sign and date**
 - Use the ABA routing number from the state where your account was opened
- 2) **Ensure appropriate Employer / Company address is used when mailing completed form.**
- 3) **Employer/Company should review this form for completeness and suitability.** If Employer / Company prefers or requires their own form, use account type, number and ABA routing number below to help complete their form
- 4) **Mail form directly to Employer / Company** (Note: It is not necessary for employer or company to return the form to the bank once direct deposit is set up into the payroll system)

客戶使用指南：

- 1) **確保完整填寫表格，然後署名並標註日期**
 - 使用開戶州的美國銀行家協會路由代碼 (ABA routing number)
- 2) **在郵寄填寫好的表格時確保使用正確的僱主 / 公司地址。**
- 3) **僱主 / 公司應審核本表的完整性和適宜性。** 若僱主 / 公司偏好或要求使用自己的表格，請使用以下帳戶類型、帳號和美國銀行家協會路由代碼填寫表格
- 4) **將表格直接郵寄給僱主 / 公司**
(備註：一旦直接存款進入工資發放系統，僱主或公司無需將本表退還給銀行)

Employer / Company Name:

僱主 / 公司名稱： _____

Employer Address 僱主地址	City 市	State 州	Zip 郵遞區號
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I (we) authorize the above named **Company** to initiate credit entries to my **Bank of America** Checking and/or Savings accounts indicated below and to credit the same to such account. I (we) acknowledge that the origination of the ACH transactions to my (our) account must comply with the provisions of U.S. law.

本人 (我們) 授權上述公司在下方所指定之本人 **Bank of America** 支票帳戶和 / 或儲蓄帳戶上進行貸項記帳並在此帳戶上存入相同款額。本人 (我們) 同意在本人 (我們) 的帳戶上發起的 ACH 交易必須遵守美國法律的規定。

Note: Funds can be deposited into one account or split between accounts as a set percent or dollar amount.

備註：資金可存入一個帳戶或以固定百分比或美元金額在帳戶之間進行分割。

Account type 帳戶類型	<input type="checkbox"/> Checking 支票	<input type="checkbox"/> Savings 儲蓄	State Acct Opened 開戶州
Account number 帳號	_____		
ABA Routing Number 美國銀行家協會 (ABA) 路由代碼	_____		
Deposit Amount 存款金額	_____ % OR \$ _____	(Flat Amount) OR <input type="checkbox"/> Remaining	(固定金額) 或 餘額

Account type 帳戶類型	<input type="checkbox"/> Checking 支票	<input type="checkbox"/> Savings 儲蓄	State Acct Opened 開戶州
Account number 帳號	_____		
ABA Routing Number 美國銀行家協會 (ABA) 路由代碼	_____		
Deposit Amount 存款金額	_____ % OR \$ _____ _____ % 或 \$ _____	(Flat Amount) OR <input type="checkbox"/> Remaining (固定金額) 或 餘額	

Account type 帳戶類型	<input type="checkbox"/> Checking 支票	<input type="checkbox"/> Savings 儲蓄	State Acct Opened 開戶州
Account number 帳號	_____		
ABA Routing Number 美國銀行家協會 (ABA) 路由代碼	_____		
Deposit Amount 存款金額	_____ % OR \$ _____ _____ % 或 \$ _____	(Flat Amount) OR <input type="checkbox"/> Remaining (固定金額) 或 餘額	

If monies to which I am not entitled are deposited to my account, I authorize the Company (issuer) to direct the financial institution to return said funds and I authorize the financial institution to act on the Company's direction and to return said funds. This authority will remain in effect until Employer/Company has received written notification from me of its termination in such time and in such manner as to afford Company and financial institution a reasonable opportunity to act on it.

本人無權獲得的資金若被存入本人帳戶，本人授權公司（發行者）指示此金融機構退還上述資金，且本人授權此金融機構按照公司指示行事並退還上述資金。本授權將持續生效，直至雇主／公司收到本人發出的終止通知，要求公司和金融機構在特定時間內以特定方式依據終止通知合理行事。

First Name 名字	Middle Name 中間名	Last Name 姓氏	
Address 地址	City 市	State 州	Zip 郵遞區號
Signature (required) 簽名 (必須)	Date 日期	Telephone Number 電話號碼	

NOTE: Written credit authorization must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.

備註：書面貸記授權必須規定接收者僅可透過以授權書中指定方式通知發起者來撤銷此授權。