

COUNTY OF CARROLL

Human Resources



Administration Building 95 Water Village Road, P.O. Box 152 Ossipee, New Hampshire 03864-0152 Phone 603-539-1721 • Fax 603-539-4287

YES, I am interested i	n DIRECT DEPOSIT. (Please attach	a voided check).
NAME OF BANK:		
	☐ SAVINGS	AMOUNT:
ROUTING NUMBE	R:	
ACCOUNT NUMBE	CR:	
NAME OF BANK:		
☐ CHECKING	☐ SAVINGS	AMOUNT:
ROUTING NUMBE	R:	
ACCOUNT NUMBER	CR:	
NAME OF BANK:_		
☐ CHECKING	☐ SAVINGS	AMOUNT:
ROUTING NUMBE	R:	
ACCOUNT NUMBE	R:	
NO I am NOT interes	ted in DIRECT DEPOSIT at this time.	
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LOYEE SIGNATURE		DATE