

Payroll Direct Deposit Authorization Form

CHECK APPROPRIATE COMPANY

□LG&E Ut	ility □LG&E ar	nd KU Services Co	mpany □KU	
Date:		Employee ID #:		
Printed Employee Name:				
Employee Signature:				
I hereby authorize LG&E and KU Energy., hereinafter called COMPANY, to initiate credit entries to my checking / savings accounts indicated below, and the depositories named below to credit the same such accounts. The COMPANY is also authorized to draw drafts to adjust any over-deposit which it has caused to be made to my account. The authority is to remain in full force and effect until COMPANY has received written notification from me of its termination; in such time and in such manner as to afford COMPANY a reasonable opportunity to act on it.				
NOTE: If making changes to your LG&E or KU credit union direct deposits, please send the form to the Credit Union FIRST. They will forward to Payroll.				
 CHECK APPROPRIATE BOXES (if applicable) ☐ I would like to start a 100% deposit to the below account. ☐ Add/ change below indicated account deposit(s); leave all other accounts as previously authorized. 				
PLEASE ATTACH A VOIDED CHECK WITH THIS FORM				
Do not attach deposit slips as account verification	CHECKING ACCOUNT	SAVINGS ACCOUNT	CHECKING ACCOUNT	SAVINGS ACCOUNT
Bank/ Financial Institution Name				
Routing Number (9 digits)				
Account Number				
Bank/ Financial Institution Phone Number				
Deposit \$\$ amount per pay period OR 'remainder' **				
** Indicate 'remainder' for account where balance of payroll should be deposited after other deposits have been made, or for full payroll deposit.				
OPTIONS: □ Paperless-I do not wis □ Mail my advice stubs t		•		ved on My HR.)
RETURN TO: PAYROLL DEPARTMENT—LG&E CENTER 10 TH FLOOR				
LG&E Credit Union Use ONLY:				
□ Stop deduction; start as direct deposit. □ Credit Union reviewed and approved. Initials				