



# GOVERNMENT OF JAMAICA

## EMPLOYEE INFORMATION FORM

To Principal Finance Officer:

Please note I hereby request that my salary, allowances and any other payment due to me (unless otherwise instructed) be deposited directly to the bank account stated below.

### I. EMPLOYEE'S INFORMATION

Employee's Name:	
Ministry/Department:	
Telephone Number (s):	
Taxpayer Registration Number (TRN):	
Email Address:	

### II. EMPLOYEE'S BANK INFORMATION

Name on the Account:	
Name of Bank:	
Bank Branch (e.g. Duke St.):	
Bank Account Type (Savings, Chequing, Other):	
Bank Account Number:	

Employee:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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### FOR OFFICIAL USE ONLY:

Received on behalf of the Ministry/Department:

Authorised Representative: \_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date