## Wellington Exempted Village School District - Authorization for Direct Deposits



New Enrollment

**Change Current Enrollment** 

Verify Enrollment

To enroll in Direct Deposit, please complete this form and return to the Treasurer's office. For each checking account, please attach a **voided check** to verify the account numbers. A deposit slip <u>cannot</u> be used. For each savings account, ask your bank to give you the **Routing / Transit Number** for your account. A deposit slip <u>cannot</u> be used.

The Treasurer's office or your bank can assist you to find the necessary information.

## **Direct Deposit Authorization**

I hereby authorize Wellington Exempted Village School District to deposit any amounts owed to me by initiating credit entries to my account(s) at the financial institutions indicated on this form. Further, I authorize my financial institution to accept and to credit any entries indicated by Wellington Exempted Village School District to my account(s). In the event that Wellington Exempted Village School District deposits funds erroneously into my accounts(s), I authorize Wellington Exempted Village School District to debit my account(s) for an amount not to exceed the original amount of the erroneous credit.

I understand that as an employee of the Wellington Exempted Village School District that it is my responsibility to verify that any amounts owed have been directly deposited to my account(s) and that any discrepancies are reported to the Treasurer's office within three (3) business days.

This authorization is to remain in full force and effect until Wellington Exempted Village School District receives written notice from me requesting that all direct deposits to my account(s) be changed or cancelled.

En	nployee Signature	Employee Name (printed)	Soc. Sec. No.	Date	
Account Information					
Yo	u may choose up to three(3) accounts.	(Your last item must be for the re	maining amount owed to y	ou.)	
1)	Bank Name/City/State:				
	Bank Phone Number:				
	Pouting/Transit Number:				
	Account Number:				
	Amount to Deposit:	Account type (Checking/Sa	ivings):		
2)	Bank Name/City/State:				
	David Dhara Number				
	Routing/Transit Number				
	Account Number:				
	Amount to Deposit:	Account type (Checking/Sa	ivings):		
3)	Bank Name/City/State:				
	Bank Phone Number:				
	Pouting/Transit Number:				
	Account Number:				
	Amount to Deposit:	Account type (Checking/Sa	ivings):		

Employees utilizing the Direct Deposit method for payroll may also elect to receive their Direct Deposit Notice by email. The email address must be the Wellington Exempted Village School Network email address. Personal email addresses cannot be used.

If you elect to receive your Direct Deposit Notices via email, please indicate your email address below: