PAYROLL DIRECT DEPOSIT AUTHORIZATION FORM

Direct depositing of you payroll check is available to all employees. You may have your check deposited into a designated checking or savings account at any bank, savings and loan or credit union of your choice.

By using direct deposit, your net pay will be deposited directly into the checking or savings account of your choice early each payday. You will receive a earning statement that will reflect all earnings paid and deductions taken for the current pay period as well as year to date.

By using direct deposit, not only do you save the District money but it also saves you time. There won't be any bank line to wait in and no more worries over lost payroll checks. With direct deposit you will not need to worry when you are away from work or home on payday. Your money will be available in your account for you.

Remember that all school year employees' payroll checks are mailed during the summer months when school is not in session. In addition, all substitute checks are mailed year round. The US Postal service will only promise delivery within 5 business days so that is the amount of time that must elapse before a replacement check is issued in the event of your check getting lost in the mail. By using direct deposit you will never have to worry about where your check is.

If you wish to sign up for direct deposit, complete the form below and return it to Payroll. You must attach a deposit slip or a voided check to this form. Payroll will process the form as soon as they receive it. Direct depositing of your check will usually start with your next paycheck, but is dependent on the date we receive the form. You may call Payroll at 433-1836 or 10136 at any time to verify when direct deposit will be started or if you have any other questions.

You may change banks or account numbers whenever needed. You may also choose to discontinue using direct deposit at any time. To implement a change, you will need to contact Payroll at 433-1836 or 10136. They will assist you in making any changes.

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I authorize you and the financial institution named below to automatically deposit my net pay to the account indicated below (this includes my authorization to you to reverse any entries made in error). This authority will remain in effect until I give written notice to cancel or change it.

TYPE OF ACCOUNT: Checking _	Savings
FINANCIAL INSTITUTION	EMPLOYEE NAME
INSTITUTES ROUTING NUMBER	EMPLOYEE SOCIAL SECURITY #
YOUR ACCOUNT NUMBER	EMPLOYEE SIGNITURE

STAPLE A VOIDED CHECK OR DEPOSIT SLIP TO FORM