

Pierce County Board of Education

Employee Direct Deposit Authorization

Employees must attach a voided check for each of their accounts to help verify their account numbers and bank routing numbers.

Account 1 _____

Account 1 type: ☐ Checking ☐ Savings

Bank routing number (ABA number): _____

Account number: _____

Percentage or dollar amount to be deposited to this account: _____

Account 2 (remainder to be deposited to this account) _____

Account 2 type: ☐ Checking ☐ Savings

Bank routing number (ABA number): _____

Account number: _____

Attach a voided check for each account here

Authorization

This authorizes **Pierce County Board of Education** to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my (our) account(s) indicated below and to other accounts I (we) identify in the future. This authorizes the financial institution holding the Account to post all such entries. I agree that the ACH transactions authorized herein shall comply with all applicable U.S. Law. This authorization will be in effect until the Company receives a written termination notice from myself and has a reasonable opportunity to act on it.

Authorized signature: _____ Employee ID #: _____

Print name: _____ Date: _____

FOR PAYROLL USE ONLY

Date Entered: / /

Initials: _____