

Lake Stevens School District No. 4

Payroll Direct Deposit Authorization Agreement

Employee Name _____ Position _____

You may split your direct deposit into three separate financial institutions (bank accounts). For payroll to process your information accurately, you **should provide a voided check or letter from your financial institution with your name, bank routing number and your account number.**

Completed forms received in the Payroll office by the 8th of the month will setup direct deposit for that month's payroll, provided there are no errors with the pre-note process. If the form is received after the 8th, your direct deposit will begin the following month.

NO CHANGE	CHANGE	ADD	STOP DEDUCTION
Primary Bank _____			
Account # _____		Routing # _____	
Checking	Savings	\$ <u>Net Pay</u>	
NO CHANGE	CHANGE	ADD	STOP DEDUCTION
Secondary Bank _____			
Account # _____		Routing # _____	
Checking	Savings	\$ _____	
NO CHANGE	CHANGE	ADD	STOP DEDUCTION
Secondary Bank _____			
Account # _____		Routing # _____	
Checking	Savings	\$ _____	

I hereby authorized Lake Stevens School District to execute the direct deposit of my payroll check as indicated above. I understand the District reserves the right to reverse and correct any deposits made in error to the accounts. This authorization is to remain in force until the Payroll Department has received written notification from me of its termination and in such a time to afford the District a reasonable opportunity to act on it.

I do not wish to receive a printed pay stub (pay stubs are available in Employee Access). _____
(Initials)

Signature _____ **Date** _____

Verified by _____ Prenote date _____