

# DIRECT DEPOSIT FORM

Employee Name (Print) \_\_\_\_\_

Social Security Number \_\_\_\_\_

Name of Financial Institution \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

ABA Routing Number (get from bank) \_\_\_\_\_

Account Number \_\_\_\_\_

Type of account                      Checking \_\_\_\_\_      Savings \_\_\_\_\_

*Employee Signature* \_\_\_\_\_ *Date* \_\_\_\_\_

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Attach a voided check or deposit slip here

Please complete this form if you would like your paycheck directly deposited into your checking or savings account. Funds will be available, in your account the morning of payday. It may take up to two pay cycles to take effect depending on when paperwork is received by the payroll department.

Once complete, please return form to the attention of Risa Ross, District Office. Any questions, feel free to contact Risa at ext. 4210.