

Negaunee Public Schools

DIRECT DEPOSIT PROCEDURE

NPS employees are paid via direct deposit only, and earnings statements are provided via NPS EmployeeWeb.

To authorize automatic deposit of your pay, please have your *FINANCIAL INSTITUTION* fill out the routing number and account number at the bottom of this form. This is required. Banks have a certain format for their account/routing numbers and they may not be exactly as they appear on your checks. Attach a voided bank check (not payroll check or a deposit ticket), and return it to the Payroll Department.

If you have any questions, please contact Becky Jacobson at 475-4156.

WE WILL NOT ACCEPT THIS FORM UNLESS YOUR FINANCIAL INSTITUTION HAS FILLED OUT THE ROUTING AND ACCOUNT NUMBER

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT

Please fill out and return to NPS Payroll Department.

Company Name: Negaunee Public Schools

I hereby authorize Negaunee Public Schools, to initiate credit entries and to initiate, if necessary, debit entries and adjustment for any credit entries in error to my bank account(s) indicated below and the financial institution named below, to credit and/or debit the same to such account. This authority is to remain in full force and effect until the Negaunee Public Schools has received written notification from me of its termination in such time and in such manner as to give the Negaunee Public Schools and financial institution a reasonable opportunity to act on it. Termination of employment will void this authorization. I (we) acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

Name of Bank: _____

Name of Bank: _____

| <u>Routing Number</u> | <u>Account Number</u> | <u>% / Amount</u> | <u>Savings or Checking</u> |
|-----------------------|-----------------------|-------------------|----------------------------|
|-----------------------|-----------------------|-------------------|----------------------------|

1) _____

2) _____

3) _____

FINANCIAL INSTITUTION SIGNATURE _____

NPS EMPLOYEE NAME (Please Print) _____

NPS EMPLOYEE SIGNATURE _____ **DATE** _____