



Business Office

364 South Park Street • Walla Walla WA 99362-3293 • FAX (509) 526-1682 • (509) 527-3000

DIRECT DEPOSIT AUTHORIZATION INSTRUCTIONS

All new employees hired by Walla Walla School District will be required to participate in direct deposit of all payments processed by the Business Office; i.e., payroll and accounts payable.

You will need to provide a direct deposit authorization form from your banking institution or a voided check. The document you provide must include the banking institution, your name on the account, the bank routing number and your account number. The district will not accept a screenshot from your phone, or a typed document that is not from your banking institution. If you have any questions regarding direct deposit documentation, please feel free to contact the payroll department. We have provided an example of a direct deposit authorization form below.

Please notify us immediately if you have changed bank accounts or have had to close an account due to fraud. There are steps we can take to make sure you receive your pay as scheduled. If Direct Deposit information is received by the 10th of the month, the direct deposit will take place for that payroll month. If it is received after the 10th of the month, it will be processed the following month.

DIRECT DEPOSIT REQUEST FORM

Banking
Institution

Complete this form, then print it, sign it and take it to your employer's payroll department to request direct deposit of your paycheck.

Your Name

Customer name

123 Street

Address

Anywhere

WA

01234

City

State

ZIP code

Please have my paycheck automatically deposited into the following account:

01234567890

☒ Checking account number

Or

☐ Savings/MIA/Money market account number

123456789

Your bank's routing number

You can find your account and routing numbers when you sign in to chase.com:

- Click on the last four digits of your account number that appear above your account information, or
- Select the "Account & routing number PDF" from the "Things you can do" menu.

I authorize Walla Walla School District (name of business)

and my bank to automatically deposit my paycheck into my account listed above (this includes my authorization to correct entries made in error). This authorization will remain in effect until I give written notice to cancel it.

Customer signature

Date

**WALLA WALLA SCHOOL DISTRICT
AUTHORIZATION AGREEMENT FOR
AUTOMATIC PAYROLL/ACCOUNTS PAYABLE DEPOSIT**

EMPLOYEE NAME: _____
(PLEASE PRINT)

I hereby authorize the Walla Walla School District, hereinafter called the District, to initiate credit entries to my bank account(s), and the depository (bank) indicated below to credit the same such account.

NET PAYROLL/ACCOUNTS PAYABLE DIRECT DEPOSIT:

BANK NAME: _____

☐ CHECKING ☐ SAVINGS

ADDITIONAL DIRECT DEPOSIT:

BANK NAME: _____

☐ CHECKING ☐ SAVINGS AMOUNT \$ _____

ADDITIONAL DIRECT DEPOSIT:

BANK NAME: _____

☐ CHECKING ☐ SAVINGS AMOUNT \$ _____

This authority is to remain in full force and effect until the District has received written notification from me of its termination in such a time and manner as to afford the District a reasonable opportunity to act. If overpayment is, for any reason, credited to my account, I understand that arrangements must be made with the District to return such payments. I agree to indemnify the Walla Walla School District for any loss, liability, or expense incurred in connection with this agreement.

Employee Signature

Date

IMPORTANT: To verify your account, please attach a direct deposit authorization or similar documentation from your financial institution that includes the routing number and account number.