

Windsor Locks Public Schools
PAYROLL ELECTRONIC DIRECT DEPOSIT AUTHORIZATION FORM

PART I - Employee Information

Deposit Action: **New:** ☐ **Change:** ☐ **Stop:** ☐

Employee Name: _____

PART II - Employee Bank Information

Checking account – attach a voided check/Savings account – attach a deposit slip

Bank 1 Name: _____

Address: _____

Routing Number: _____

Checking Acc't #: _____ **Savings Acc't #** _____

Amount to be deposited: \$ _____ **(Checking) or Net \$** _____

Amount to be deposited: \$ _____ **(Savings) or Net \$** _____

Bank 2 Name: _____

Address: _____

Routing Number: _____

Checking Acc't #: _____ **Savings Acc't #** _____

Amount to be deposited: \$ _____ **(Checking) or Net \$** _____

Amount to be deposited: \$ _____ **(Savings) or Net \$** _____

Bank 3 Name: _____

Address: _____

Routing Number: _____

Checking Acc't #: _____ **Savings Acc't #** _____

Amount to be deposited: \$ _____ **(Checking) or Net \$** _____

Amount to be deposited: \$ _____ **(Savings) or Net \$** _____

NOTE: THE ENTIRE AMOUNT OF THE CHECK MUST BE DEPOSITED TO EITHER CHECKING OR SAVINGS OR A COMBINATION OF BOTH IF YOU CHOOSE. A PAYCHECK WILL NOT BE ISSUED TO THE EMPLOYEE.

Employee
Signature _____ **Date** _____