

ELMWOOD PARK PUBLIC SCHOOLS

Direct Deposit of Paycheck Authorization

I hereby authorize the Elmwood Park Board of Education to directly deposit my pay in the bank account(s) listed below. I have attached a voided or cancelled personal check (checking accounts), a pre-printed deposit slip (savings accounts), or a direct deposit authorization form provided by my bank for each account specified. This authority is to remain in effect until the payroll department has received written authorization from me of its termination or change. I understand that I must give sufficient advance notice of termination or modification of this authorization to enable time to act on my instructions. Also, I hereby grant the Elmwood Park Board of Education the right to correct any such electronic funds transfer resulting from an erroneous overpayment by debiting my account to the extent of such overpayment.

_____ Employee Name (PLEASE PRINT)

_____-_____-_____ Social Security Number

Check, if **adding** these accounts to existing direct deposit settings

Check, if **changing** amounts or percents of existing direct deposit settings

Please deposit my pay into:

	Account # 1	Account # 2 or [] N/A
Account Type [Check only one for each account]	<input type="checkbox"/> Checking <input type="checkbox"/> Savings (attach voided/cancelled check or pre-printed bank form)	<input type="checkbox"/> Checking <input type="checkbox"/> Savings (attach voided/cancelled check or pre-printed bank form)
Name of Financial Institution		
ABA (Routing) Number [9 Digits]		
Account Number		
Amount of pay to be deposited into the account	\$ _____ / _____ % or <input type="checkbox"/> Remaining Balance	\$ _____ / _____ % or <input type="checkbox"/> Remaining Balance

Notes: _____
 (i.e. This account is replacing my current account; or Stop my direct deposit into acct # ...)

Please only submit handwritten signature forms.

Handwritten Signature: _____ Date: _____