

Direct Deposit Enrollment/Change Form

Name: (Please Print: Last Name, First Name)	Email:
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IMPORTANT

Before completing this form, please read the instructions printed on the reverse side. *You are responsible for completing this form accurately.*

Authorization Statement: I understand that this authorization will remain in effect until I change my account number(s) and notify Avon Local Schools Payroll Department in writing by completing a new Direct Deposit Enrollment/Change Form at least 15 business days prior to my next direct deposit. By signing this form, I agree to the following terms and authorize Avon Local Schools to deposit my funds to my account(s) as stated below.

Signature

Date

Phone

<i>Voided Check, Savings Deposit Slip, or Bank Verification Required</i>	Account # 1	Add <input type="checkbox"/> <u>or</u> Change <input type="checkbox"/> <u>or</u> Cancel <input type="checkbox"/>		
	Bank/Financial Institution Information			
	Bank Name			
	Branch			
	Routing #	Account #		
	Account Type	Amount per Pay Period		
	<input type="checkbox"/> Checking <u>or</u> <input type="checkbox"/> Savings			

<i>Voided Check, Savings Deposit Slip, or Bank Verification Required</i>	Account # 2	Add <input type="checkbox"/> <u>or</u> Change <input type="checkbox"/> <u>or</u> Cancel <input type="checkbox"/>		
	Bank/Financial Institution Information			
	Bank Name			
	Branch			
	Routing #	Account #		
	Account Type	Amount per Pay Period		
	<input type="checkbox"/> Checking <u>or</u> <input type="checkbox"/> Savings			

<i>Voided Check, Savings Deposit Slip, or Bank Verification Required</i>	Account # 3	Add <input type="checkbox"/> <u>or</u> Change <input type="checkbox"/> <u>or</u> Cancel <input type="checkbox"/>		
	Bank/Financial Institution Information			
	Bank Name			
	Branch			
	Routing #	Account #		
	Account Type	Amount per Pay Period		
	<input type="checkbox"/> Checking <u>or</u> <input type="checkbox"/> Savings			

Direct Deposit

Please read the following instructions carefully. An incomplete form will delay processing.

1. Please **PRINT** your name legibly with last name first, followed by your email. Employees will receive a deposit notification via email provided. You will receive this notification one day prior to the actual date of deposit. The actual deposit date is noted on the notification.
2. **Read the authorization statement.**
3. **Sign, date and provide a contact number.**

Add or Change or Cancel

Check [] appropriate box:

- **Add** when applying for direct deposit or adding a new financial institution or account number
- **Change** when changing the amount per pay period or to change from a fixed dollar amount to net pay
- **Cancel** to discontinue direct deposit to that account

If adding, changing, or canceling multiple accounts, please complete a separate section for each account. Use additional forms, if necessary.

Financial Institution

Indicate your bank, credit union, or brokerage firm's name and branch

Bank Routing Number (a.k.a. Bank Transit Number or Bank ABA Number)

The routing number is located on the bottom left hand side of a *CHECK*. If depositing to:

- **Checking** account, you must attach a voided check NOT deposit slip
- **Savings** account, you must attach a voided deposit slip

Account

Complete your account number or have your financial institution complete this information for you

Account Type

Check [] appropriate box

- "C" for checking account
- "S" for savings account

Amount Per Pay Period

- Three Accounts
 - Fixed amount in first account
 - Fixed amount in the second account
 - Net (remaining amount) in the third account
- Two Accounts
 - Fixed amount in first account
 - Net (remaining amount) in the second account
- One Account
 - Net (100% of your pay)

Please note the following:

- Any new request or changes to account information (Routing #, Account #, or Type) *will* require **at least one pay period** to become effective.
- You must **immediately** notify Payroll if you make any changes or cancel/close any of your accounts. Failure to do so will **delay** receipt of your funds.
- You **must** be an **owner** of the account(s) to authorize direct deposit.
- Any questions should be directed to Payroll at 440-937-4687