

NEW ALBANY-FLOYD COUNTY CONSOLIDATED SCHOOL CORPORATION

DIRECT DEPOSIT SIGN-UP FORM

DIRECT DEPOSIT IS MANDATORY FOR ALL EMPLOYEES

You must submit a VOIDED CHECK or a DOCUMENT FROM YOUR BANK for your checking account or a DOCUMENT FROM YOUR BANK with the routing number and account number for your savings account.

Upon receipt of this form and one of the documents listed above we will initiate the Direct Deposit procedures necessary to begin the process of having your payroll check sent directly to your banking account.

Multiple accounts (up to 9) are allowed. You must submit the required documents for each, along with the amounts designated to each whether the account is a savings or a checking account.

DEPOSITORY NAME _____
(Banking Institution)

CITY, STATE, ZIP _____
(Of Banking Institution)

TRANSIT/ABA NUMBER _____
(1ST SET OF NUMBERS AT THE BOTTOM OF YOUR CHECKS)

ACCOUNT NUMBER _____
(2ND SET OF NUMBERS AT THE BOTTOM OF YOUR CHECKS OR SAVINGS ACCOUNT #)

CHECKING OR SAVINGS _____

TODAY'S DATE _____

EMPLOYEE NAME _____
(PLEASE PRINT)

Signature _____

Date _____