****

PAYROLL DIRECT DEPOSIT HR 04.12

AUTHORIZATION AND AGREEMENT

**The Payroll Direct Deposit service is offered with explicit understanding that WVSU R&D Corporation is not responsible for any financial liability that may result from the electronic transactions by and between the Corporation’s banking institution and your own. The accuracy for the information you are providing is solely your responsibility. The effective date of the direct deposit is generally the next paydate; however, when dealing with smaller financial institutions, it may take two pay periods before the pay is directly deposited to your account(s). Pay days are the 15th/16th & the 30/31st of the month. Do not rely on direct deposits being made prior to the actual paydate.**

**[ ]  New Request** **[ ]  Change** **[ ]  STOP Direct Deposit**

PRIMARY ACCOUNT – To deposit your net pay into only one account, complete only the information required for Primary Account

SECONDARY ACCOUNT – If you wish to deposit money into two different accounts/two different banks, complete both sections but include the specific amount in the Secondary Account.

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SS# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First MI

Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRIMARY ACCOUNT

Type (check one): [ ]  Checking [ ]  Savings

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please attach a voided check for the primary account here.

Bank Routing Number Account number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Financial Institution Name Financial Institution Address

SECONDARY ACCOUNT

Type (check one): [ ]  Checking [ ]  Savings

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Routing Number Account number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please attach a voided check for the secondary account here.

Financial Institution Name Financial Institution Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dollar Amount to be Deposited to This Account

AUTHORIZATION

I hereby authorize WVSU R&D Corporation to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my account(s) indicated above, or to stop such deposit as indicated. This authorizes the financial institution holding the Account to post all such entries. This authorization will be in effect until WVSU R&D receives a written termination notice from myself and has a reasonable opportunity to act upon it, typically 10 days.

*The accuracy of the deposit is not guaranteed without a voided check* *attached*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

*Employee: Please fill out and return to the Payroll office.*