

Lewiston School Department Direct Deposit Authorization Form

Employee Name: _____ **Employee #:** _____

The Lewiston School Department offers the convenience of having all or part of your payroll check electronically deposited on payday into your checking and/or savings account(s) at your choice of financial institutions. You may select up to four accounts (complete a separate form for each financial institution).

Please complete the form below to authorize a direct deposit. Once submitted, new accounts will be prenoted for one payroll cycle. This is done electronically to confirm that your account information is correct before live dollars are deposited.

Start a New Direct Deposit

Financial Institution Name: _____

Branch Address/Phone: _____

Transit Routing Number (nine digits): _____

Checking Account Number (attach a voided check): _____

Amount to be Deposited (\$ Amount or "Full Net"): _____

Savings Account Number (attach deposit slip): _____

Amount to be Deposited (\$ Amount or "Full Net"): _____

Change an Existing Direct Deposit

Change Amount Deposited From _____ To _____

Stop an Existing Direct Deposit

Account Number: _____

I authorize the Lewiston School Department to automatically deposit my designated pay amount into my designated account(s), including any adjustments, if necessary, for any entries made in error to my account(s). This authorization will remain in effect until I have notified the Lewiston School Department in writing.

Employee Signature: _____ **Date:** _____

PAYROLL USE ONLY: Entered by: _____ Date Processed: _____