



Surry County Public Schools

P.O. Box 317
Surry, VA 23883

DIRECT DEPOSIT AUTHORIZATION FORM

We are pleased to be able to offer you a new payday convenience – Direct Deposit! Now you can have your paycheck automatically deposited in your checking or savings account on payday. **You do not have to change your present banking relationship to take advantage of this service.**

Direct Deposit will help you in many ways.

- It saves trips to your financial institution.
- It saves time in depositing checks – no waiting in long payday lines.
- It eliminates the possibility of lost, stolen or forged checks.
- Your money is deposited faster – reduces the possibility of overdrafts.
- It means you get your money deposited into your account even if you are on vacation or away from the office on business or illness.

Here is how Direct Deposit works:

On payday you will receive an earnings statement showing gross salary, taxes, other deductions, and net pay. Your money will already have been deposited in your account. The amount of the deposit will appear on your bank statement.

We believe you will like the added convenience of having your net pay automatically deposited for you.

Direct Deposit is safe, convenient and easy. To take advantage of this service, complete the attached authorization form and return it to the Payroll Department.

Please Note! If you decide not to open a checking or savings account with a financial institution your funds will be deposited on a **Rapid Pay Visa Card.**

All you need to do is:

1. Fill in your name.
2. In box one, please check checking or savings to indicate where your funds will go, name of financial institution, routing number and account number.
3. **CHECKING:** attach a voided check to this form for verification of all financial institution information.
SAVINGS: contact your financial institution and ask for a Routing/Transit number and your account number to be used for ACH/Direct Deposit purposes.
4. Sign and date

Please complete and return to Mrs. V. Thomas in the *Payroll Department*
EMPLOYEE'S DIRECT DEPOSIT AUTHORIZATION

Changing or closing an account: It is **IMPERATIVE** that you notify Payroll prior to closing an account. Also, if your bank notifies you of any changes in routing numbers or your account number, you **MUST** notify Payroll immediately. Failure to notify Payroll of account number changes could result in a delay in receiving your pay.

Please Print: Last Name: _____ Frist Name: _____

B O X 1	<input type="checkbox"/> New <input type="checkbox"/> Change <input type="checkbox"/> Delete ACCOUNT SELECTION: <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Fixed Amount \$ _____ <input type="checkbox"/> Remaining Routing Number: _____ Account Number: _____ Name of Financial Institution: _____ Amount: _____ <p style="text-align: center; color: red; font-weight: bold;">ATTACH A VOIDED CHECK HERE</p>
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B O X 2	<input type="checkbox"/> New <input type="checkbox"/> Change <input type="checkbox"/> Delete ACCOUNT SELECTION: <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Fixed Amount \$ _____ <input type="checkbox"/> Remaining Routing Number: _____ Account Number: _____ Name of Financial Institution: _____ Amount: _____ <p style="text-align: center; color: red; font-weight: bold;">ATTACH A VOIDED CHECK HERE</p>
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I authorize **Surry County Public Schools** to initiate electronic credit entries (and appropriate debit and adjustment entries) electronically or by any other commercially accepted method, to my account(s) indicated above and to other accounts I identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of the U.S. law. This authority will remain in effect until written authorization to terminate is received.

Signature: _____ Date: _____