

South Whidbey School District #206

Direct Deposit Authorization Agreement

All employees are eligible and required to enroll in direct deposit.

Employee Name (Print)	
1 - 9 ()	

I hereby authorize South Whidbey School District to initiate electronic credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to the following accounts:

PRIMARY ACH Transaction	No Change 🔲 Change 🗌 Stop Deduction
Financial Institution	Account Type Checking Savings Other NET PAY
Transit Routing Number TRANSIT ABA	Account Number Information
SECONDARY ACH Transaction	No Change Change Stop Deduction
Financial Institution	Account Type Dollar Amount Checking Savings Other
Transit Routing Number TRANSIT ABA	Account Number Information
SECONDARY ACH Transaction	No Change Change Stop Deduction
Financial Institution	Account Type Dollar Amount Checking Savings Other
Transit Routing Number TRANSIT ABA	Account Number
Number TRANSIT ABA	monnation

This authorization is to remain in full force and effect until South Whidbey School District has received an updated agreement in such timing and in such manner as to afford South Whidbey School District and Financial Institution a reasonable opportunity to act on it. Direct Deposit Authorization Agreement forms must be received by Payroll by the 5th of the month in order to be processed for that month. Forms received after the 5th may not be in affect until the following month. I understand that I must notify Payroll immediately of any changes to my account(s) that would affect this process. I further understand that failure to do so could result in a delay in receiving my pay.

Signature	Date

