Direct Deposit Authorization

This Request Supersedes All Previous Requests for

Primary Account ☐ **Secondary Account** ☐ (Please check)

Your payroll earnings will be deposited into your primary account. You may request an additional direct deposit that is an exact dollar amount to a different financial institution. The first month, all information will be pre-noted with your financial institution. The second month, your wages will be deposited into your account.

I hereby authorize Jordan School District, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account indicated below and the depository named below to credit and debit the same entries to such account. This authorization is to remain in full force and effect until Jordan School District has received written notification from me terminating direct deposit, at such time and in such manner as to afford the district a reasonable time to act. I realize that I am responsible to notify Jordan School District when changes are made regarding my account.

Employee Name *(please print)*	Social Security Number
Employee Signature	Date

Primary Account	Secondary Account $ Amount Only
Name of Institution: _____	**Name of Institution:** _____
City: _____ **State:** _____	**City:** _____ **State:** _____
Routing Number: ☐☐☐☐☐☐☐☐☐	**Routing Number:** ☐☐☐☐☐☐☐☐☐
Account Number: _____	**Account Number:** _____
Deposit To: ☐ **Savings** ☐ **Checking**	**Deposit Amount $** _____
	Deposit To: ☐ **Savings** ☐ **Checking**

Note: Attach a voided blank check to validate account information for checking account deposits. A savings account will require information from your financial institution.