

PAYROLL BENEFIT DIRECT DEPOSIT

We are pleased to offer you the payday convenience of **Direct Deposit**. You can enjoy the security of having your **pay automatically and safely** deposited into your checking or savings account each payday. No changes need to be made to your present banking relationship to take advantage of this service.

Direct Deposit is helpful in many ways, since it will:

1. **Save you** trips to your financial institution.
2. **Avoid long lines** at the bank.
3. **Protect you** against the possibility of lost, stolen or forged checks.
4. Deposit your pay to your account **even if you are away** from the office, on vacation, illness or business.

Here's how Direct Deposit works:

1. On payday your check will automatically be deposited into your checking or savings account.
2. You'll receive an earnings statement, just like the one you're receiving now, showing gross salary, taxes, deductions and net pay.
3. To take advantage of this safe convenient and easy service, Complete the authorization form on the reverse side and return it to the Payroll Department.

All you need to do is:

1. Fill out the other side of this form.
2. Indicate whether your pay will be deposited into your checking or savings account. If you are doing a savings and checking be sure to indicate how much you want in each account.
3. Attach a voided check and fill in the required bank information.
4. **Remember:** Direct deposit will take effect on the second pay After the paperwork is completed and submitted.

BE SURE TO SIGN AND DATE THIS FORM

PAYROLL DIRECT DEPOSIT AUTHORIZATION FORM

Name

Social Security Number

School Location

Telephone Number

I hereby authorize Coventry Public Schools and the Financial Institution listed below to initiate electronic credit entries, and if necessary, debit entries and adjustment for any credit entries in error each pay period to my account. This authority is to remain in effect until Coventry Public Schools has received written notification from me.

Select One: ___ Checking Account ___ Savings Account

Financial Institution:

Name _____ Branch _____

City _____ State _____ Zip Code _____

Transit/ABA No. _____ Acct. No. _____

_____ 100% of Net _____ Fixed Amount

Select One: ___ Checking Account ___ Savings Account

Financial Institution:

Name _____ Branch _____

City _____ State _____ Zip Code _____

Transit/ABA No. _____ Acct. No. _____

_____ 100% of Net _____ Fixed Amount

Direct Deposit will take effect on the second pay date after the paperwork is completed and submitted. Please attach a voided check.

Your Signature

Date