

## **Direct Deposit Payroll Authorization**

I hereby authorize Centenary University and the financial institution listed below to deposit my net pay from Centenary University automatically into the account listed below each payday. If funds to which I am not entitled are deposited to this account in error, I authorize Centenary University to direct the financial institution to return said funds to Centenary University. I will be notified in writing in the event of any such error. This authorization remains in force until I notify the Human Resources Department in writing either to discontinue this direct payroll deposit or to change information for my direct payroll deposit, or the University notifies employees that it elects to discontinue this service.

Employee Name (printed)

Department	Telephone Ex	t
Financ	ial Institution	
Addres	s	
City, S	tate, Zip Code	
Transit (genera	/ABA Numberllly this is the first set of numbers on your che	ck)
Checki	ng Account Number	vheck)
Deposit into m		
• The fi proceed	at following receipt of this signed authorizations rst paycheck will be an actual paper paycheck dure for initializing direct payroll deposits. Excond paycheck will my first direct payroll deposits.	and not a direct deposit. This is standard operating
	Change of Financial Ins	titution Information
Please <u>cancel</u> o	eurrent direct deposit into my: Checking Acco	ount Savings Account
	Type Name Here	Date