CAMP-of-the-WOODS

DIRECT DEPOSIT AUTHORIZATION

EMPLOYEE INFORMATION

Name: _____

Mailing Address:			
ACCOUNTS You can chose to deposit funds into one or multiple accounts. Please indicate the percentage of funds you would like deposited into each account, or write "my net pay" for all funds to deposit into one account.			
Account 1			
Bank Name:			Percentage:
Account Type:	Checking	Savings	
Account 2 (optional)			
Bank Name:			Percentage:
Account Type:	Checking	Savings	
Account 3 (optional)		
Bank Name:			Percentage:
Account Type:	Checking	Savings	
Please attach either a void check , a screenshot from your online banking, or a piece of mail from your bank. The document or screenshot must contain your full account and routing number and your name .			
We cannot accept handwritten bank info or a document without your name visible. This policy protects you from mismatched account information and helps us prevent clerical errors with inputting your info into payroll.			
By signing below, I authorize CAMP-of-the-WOODS to initiate credit entires (deposits) and, if necessary, debit entries and adjustments for any credit entries made in error, to my account(s) listed above. To ensure proper distribution of my pay, I agree to immediately notify the Finance Department of any changes to this information. This direct deposit request will remain in effect until I notify, in writing, the Finance Department to terminate it, or until my employment is terminated.			
			Date: