

Lewis and Clark College

Staff/Faculty Payroll Pay Delivery Authorization

Please print or type:

Name: First MI Last _____

Lewis & Clark ID Number _____

PLEASE DELIVER MY MONTHLY PAY AS INDICATED BELOW

(Choose either Direct Deposit or Payroll Check)

DIRECT DEPOSIT – I hereby authorize Lewis and Clark College to deposit my net pay via electronic funds transfer to my bank account at the financial institution of my choice as indicated below. The deposits will be automatic and will continue on each payday until I instruct otherwise in writing. If an incorrect deposit should be made to my account, I authorize the College to direct the bank to return said funds. I understand that the College will notify me of such action.

I elect to *save a tree* and view my earnings statement ONLINE at <https://webadvisor.lclark.edu>
OR check here to receive a PAPER earnings statement instead.

My earnings statement will be available to me on pay day either electronically or through my Department. Paper earnings statements that have not been picked by the end of the fifth business day following the pay date may be mailed to my address of record.

Please direct deposit my monthly net pay to:

Checking Savings Bank/Branch _____ Account No. _____

Additionally, please deposit a fixed amount to the following accounts:

Checking Savings Bank _____ Acct. No. _____ Amount _____

Checking Savings Bank _____ Acct. No. _____ Amount _____

Checking Savings Bank _____ Acct. No. _____ Amount _____

PLEASE ATTACH VOIDED CHECKS OR VERIFICATION OF ACCOUNTS WITH BANK ROUTING NUMBERS AND PERSONAL ACCOUNT NUMBERS

To prevent any delays in the deposits, I will immediately notify the payroll department when I close my account and/or change banks, or bank account numbers.

PAYROLL CHECK – I do not have direct deposit (or I wish to stop my direct deposit).

I will pick up my payroll check in my Department on payday. If I have not picked up my payroll check by the end of the fifth business day following the pay date, my check may be mailed to my address of record.

Please note: Submission of this form will not enable electronic delivery of reimbursements or travel advances. If you wish to elect electronic payment of these funds, please visit http://www.lclark.edu/offices/account_services/electronic_payment

Signature _____ Date _____

Return this form to Payroll by the 15th of the month
Campus Mail, MSC #31 *or* deliver in person, lower level of the Frank Manor House