

Lewis and Clark College

Payroll Pay Delivery Authorization

Please print or type:

Name: First MI Last

Lewis & Clark ID Number

PLEASE DELIVER MY MONTHLY PAY AS INDICATED BELOW

☐ **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.

Please direct deposit my monthly 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.

Signature _____ Date _____