PAYROLL DIRECT DEPOSIT AUTHORIZATION FORM

For further instructions and explanations, please refer to the other side of this form.

NAME		**ID NUMBER**

TYPE OF TRANSACTION:	**TYPE OF ACCOUNT:**	**PAYROLL USE ONLY**
❑ Start ❑ Change ❑ Cancel ❑ Add: 1st _____% or $_____	❑ Checking ❑ Savings ACCOUNT NUMBER	Routing Numbers – Code ☐☐☐☐☐☐☐☐☐

FINANCIAL INSTITUTION	**CITY, STATE, ZIP CODE**

TYPE OF TRANSACTION:	**TYPE OF ACCOUNT:**	**PAYROLL USE ONLY**
❑ Start ❑ Change ❑ Cancel ❑ Add: 2nd _____% or $_____	❑ Checking ❑ Savings ACCOUNT NUMBER	Routing Numbers – Code ☐☐☐☐☐☐☐☐☐

FINANCIAL INSTITUTION	**CITY, STATE, ZIP CODE**

TYPE OF TRANSACTION:	**TYPE OF ACCOUNT:**	**PAYROLL USE ONLY**
❑ Start ❑ Change ❑ Cancel ❑ Add: 3rd _____% or $_____	❑ Checking ❑ Savings ACCOUNT NUMBER	Routing Numbers – Code ☐☐☐☐☐☐☐☐☐

FINANCIAL INSTITUTION	**CITY, STATE, ZIP CODE**

STAPLE VOIDED <u>PERSONAL CHECK</u> FOR EACH ACCOUNT.

Additional instructions: _____

_____

_____

_____

_____

I hereby authorize the University of the Pacific to initiate credits (and/or corrections to the previous credits) to my account at the institutions listed above. This authority is to remain in full force and in effect until I revoke it in writing giving the UOP Payroll Department a reasonable opportunity to act on it, or upon termination of my employment.

_____ _____ _____

Employee Signature | Phone Number (ext.) | Date