

DIRECT DEPOSIT/DISTRIBUTION OF PAYCHECK AUTHORIZATION

COMPANY NAME	EMPLOYEE NAME (Print)	SOCIAL SECURITY NO.
Valley Central School District		

I authorize the Valley Central School District each pay day to deposit my pay check directly to the bank account named below. This authority will remain in force until I have given Valley Central written notification that I have terminated it or until Valley Central has notified me that it has terminated this deposit service. I understand I must give Valley Central School District enough advance notice to give it reasonable time to act on my instructions.

Please deposit my ENTIRE PAY into:

Checking Account

Savings Account

(check One Only)

Transit Routing No/ABA

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(Bank Name)

(Account No)

(NOTE: Money Market Accounts are always considered checking accounts.)

Attach VOID check here:

Employee Signature

Date