EXCELLENCE IN EDUCATION FOR THE 21st CENTURY





Employee Authorization for Auto-Pay Deposit (APD)			
Part 1 – Employee Information	Please check the appropriate box: New Change (financial institution, account number, or type of account) Cancel		
	Name		Social Security #
	Street Address	City	State Zip Code
Part 2 – Deposit Method	Direct Deposit into Bank Account ☐ Checking ☐ Savings Complete Parts 3 and 4	For future us	е
Part 3 – Banking Information	ATTACH VOIDED CHECK OR FINANCIAL INSTITUTION'S DIRECT DEPOSIT AUTHORIZATION FORM		
	Name of Financial Institution	Branch	
	Financial Institution Routing #	Account #	
Part 4 – Authorization	I hereby authorize the EI Dorado County Office of Education on behalf of (school district) to initiate credits to the Financial Institution indicated above, of my net check, to credit with the amounts thereof my checking/savings account indicated above. I acknowledge that I have been notified that: A pre-notification (pre-note) is always sent prior to activating the deposit with real dollars. A pre-note is the initial test of the Transit/ABA/Check Digit and Account Number. A test is ALWAY'S done prior to actual dollars being sent. It is for the employee's protection that we do a pre-note services. It may be at least two months before auto-pay deposits will take effect. Initials Auto-pay funds are deposited on the last working day of each month. I understand that if I close my bank account it is my responsibility to notify the Employer of this action, and, if appropriate, provide my bank account number. Initials I authorize the Employer to send Correcting Entries through the bank's selected ACH processor to correct an erroneous credit entry previously initiated by the Employer to my account. Initials This authorization is to remain in full force and effect until you have received written notification from me of its termination in such time and such manner as to afford the EI Dorado County Office of Education and my financial institution a reasonable opportunity to act on it. Print Name School District		
	Authorized Signature		Date