## DIRECT DEPOSIT OF PAYCHECK AUTHORIZATION REQUIRED FOR ALL EMPLOYEES

Waldwick Board of Education	
Company Name	Employee Name

I authorize the Waldwick Board of Education each payday to deposit my entire paycheck directly into the bank account(s) designated below. This authority will remain in effect until I give the Payroll Department written notification that I have changed it.

I understand that I must give the Waldwick Board of Education sufficient advance notice of termination or modification of this authorization to enable reasonable time to act on my instructions.

ADDRESS:		
Account Name:		
(as it a		
Account Type:	Checking	Savings
Net Pav	or Amoun	ot \$
· · · /		
	er:	Account Number:
Bank Routing Number* if an amount is entered above	er: e, a second Bank must be ente	ered for Net Pay**
Bank Routing Number* if an amount is entered above	er: e, a second Bank must be ente	Account Number:
Bank Routing Number **if an amount is entered above 2. BANK NAME:	er:e, a second Bank must be ent	ered for Net Pay**
Bank Routing Numbers **if an amount is entered above 2. BANK NAME:	er: e, a second Bank must be ente	Account Number: ered for Net Pay**
Bank Routing Number "*if an amount is entered above 2. BANK NAME: ADDRESS:	er: e, a second Bank must be entr	Account Number: ered for Net Pay**
Bank Routing Numbers **if an amount is entered above 2. BANK NAME:	er: e, a second Bank must be entr	Account Number: ered for Net Pay**

\*\*Attach a voided personal check and/or letter from Bank verifying your account and bank routing number\*\*