

## **Direct Deposit Agreement Form**

ESU #6 has the capability to directly deposit your payroll check into your bank account(s). Interested employees need to complete information below.

If you choose to use direct deposit, your earnings will be deposited into your account before the close of the bank's business day on the 22nd of each month. If the 22nd falls on a Saturday, Sunday or holiday, your check will be deposited into your account on the last business day before the 22nd.

## **Authorization Agreement**

I hereby authorize Educational Service Unit #6 (ESU #6) to initiate automatic deposits to my account at the financial institution named below. I agree not to hold ESU #6 responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account. This agreement will remain in effect until ESU #6 receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Payroll Department.

| Account Information (may designate up to three accounts) |          |         |
|--|----------|---------|
| Name of Financial Institution:                           |          |         |
| Routing Number:  | -        |         |
| Account Number:  | Checking | Savings |
| Dollar Amount or % of Payroll:                           |          |         |
| Name of Financial Institution:                           |          |         |
| Routing Number:  | -        |         |
| Account Number:  | Checking | Savings |
| Dollar Amount or % of Payroll:                           |          |         |
| Name of Financial Institution:                           |          |         |
| Routing Number:  |          |         |
| Account Number:  | Checking | Savings |
| Dollar Amount or % of Payroll:                           |          |         |
| Signature  |          |         |
| Authorized Signature:                                    | Date:    |         |

Please attach a voided check for each account and return this form to: Vicki Taylor, ESU #6, 210 5<sup>th</sup> St., Milford, NE 68405