



OWOSSO PUBLIC SCHOOLS

Ready for the World

You may select two accounts for direct deposit. Indicate your PRIMARY ACCOUNT first. Funds available, after all required deductions have been made, will be deposited into this account first and any residual or specified amount will be deposited into the secondary account. (Note: Owosso Public Schools cannot accept responsibility for errors that occur related to circumstances, systems, and institutions beyond its scope of control). ATTACH A VOIDED CHECK.

### DIRECT DEPOSIT AUTHORIZATION AGREEMENT

Name (please print): \_\_\_\_\_

I hereby authorize Owosso Public Schools to initiate credit entries to the following financial institution utilizing the following information supplied by me:

**It is highly recommended that you contact your financial institution for assistance in completing this section.**

PRIMARY FINANCIAL INSTITUTION INFORMATION	
Bank/Credit Union:	ABA Routing Number:
Location (City & State):	Account Number:
Account Type (circle one): *Checking or Savings * For checking, please attach a voided check.	
Amount: _____ (Fill in amount) or select Net Check	
SECONDARY FINANCIAL INSTITUTION INFORMATION	
Bank/Credit Union:	ABA Routing Number:
Location (City & State):	Account Number:
Account Type (circle one): *Checking or Savings * For checking, please attach a voided check.	
Amount: _____ (Fill in amount) or select Net Check	

Employees that select direct deposit of their net payroll will not receive a pay stub. All employees will have access to an online payroll system to view their payroll activity.

This authorization allows Owosso Public Schools to correct errors, if necessary, and is to remain in full force and effect until Owosso Public Schools has received written notification from me of its termination in such time and in such manner as to afford the District and the Financial Institution a reasonable opportunity to act on it. I understand that if I have provided incorrect information, my monies may not be available on payday due to the reprocessing function.

Signature \_\_\_\_\_

Date \_\_\_\_\_

<b>Payroll Department Only</b>	
Schools Open Updated	
By _____	Date _____
Begin Pay # _____	