PIKE COUNTY BOARD OF EDUCATION

101 West Love Street Troy, AL 36081

Phone: 334-566-1850 Fax: 334-566-2580

DIRECT DEPOSIT AUTHORIZATION FORM

Pike County Board of Education offers each employee the opportunity to participate in the Direct Deposit Program.

How Direct Deposit works:

Each payday Pike County Board of Education will deposit into your specified bank or credit union account the net of your paycheck. You will receive a Notice of Deposit statement showing your gross salary, taxes, other deductions and the net amount that has been transferred to your checking or savings account. The Notice of Deposit statement looks like a check stub and serves as a reminder that your money has been deposited.

Direct Deposit is convenient

- No more rushing to your financial institution before they close.
- ♦ You will no longer have to make special arrangements to pick up your paycheck from the Central Office.
- ♦ Your money is deposited into your account even if you're sick or on vacation.
- ♦ Your bank's automatic teller machines can immediately dispense the cash you need.

Direct Deposit is safe, free and confidential

- ♦ It eliminates the risk of lost, stolen or forged paychecks.
- ♦ There is NO charge for Direct Deposit.

Direct Deposit is flexible

- ♦ You can use your existing bank or credit union account, it is not necessary for you to use a particular financial institution.
- You can specify that your pay be sent to either a checking account or a savings account.

All you need to do is:

- 1. Complete the information below. Be sure to Sign and Date form.
- 2. Attach a voided check for the account you wish to use.
- 3. Return this form to your school bookkeeper or directly to PAYROLL at the Central Office by the 15th of the month to ensure that the month's payroll will be deposited correctly.

Authorization for Direct Deposit

I authorize the Pike County Board of Education and my financial institution to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries in error to my: () Checking () Savings account. This authority will remain in effect until I have cancelled it in writing.

| Employee Name: | (Please Type or Print) | Financial Institution | |
|----------------|------------------------|-----------------------|-------------------------|
| Signature: | | Date: | ☐ Voided Check Attached |