

# BARTHOLOMEW CONSOLIDATED SCHOOL CORPORATION

## Direct Deposit Instructions

Please complete this form and attach:

Either a voided check (or copy of voided check)

Or

A printed or typed document from your bank that is on their letterhead and includes: your name, account number, bank's routing number and type of account

Please return this form and the required bank documentation to the Payroll Department.

## DIRECT DEPOSIT AUTHORIZATION

Name:

\_\_\_\_\_

First Middle Last

Social Security Number: \_\_\_\_\_

Financial Institution: \_\_\_\_\_

Account Number: \_\_\_\_\_ Routing Number: \_\_\_\_\_

Account Type (Circle One):          Checking          Savings

Effective Date of Change: \_\_\_\_\_

I authorize the Bartholomew Consolidated School Corporation to directly deposit the net amount of my payroll check to the above named financial institution account.  
This authorization is continuing until revoked in writing.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_