

Direct Deposit Enrollment Form

To initiate Direct Deposit, complete this form and submit it to Payroll. Attach a voided check or a copy of a check (*not a deposit slip*) for each checking account. If depositing into a savings account, ask your bank to provide the Routing/Transit Number for your account (a Routing/Transit Number may differ between accounts within an institution) to help ensure that your funds are properly deposited.

This sample check shows where you may find information necessary to complete this from.

The image shows a sample check from Main Street Bank. Three callout boxes point to specific information on the check:

- Checking Account Number:** Points to the MICR line at the bottom of the check, specifically the number 012345678.
- Routing Transit Number:** Points to the MICR line at the bottom of the check, specifically the number 087654321.
- Check Number:** Points to the check number 0101 in the top right corner of the check.

Other details on the check include:

- Payee: John Q. Public, Jane Q. Public, 111 Main Street, Anytown, USA 12345
- Bank: MAIN STREET BANK, 800 Main Street, Anytown, USA 12345
- Check Number: 0101
- Amount: \$ _____ Dollars
- Routing/Transit Number: 087654321
- Account Number: 012345678

Authorization (*Important! Please read and sign before completing and submitting.*)

I hereby authorize Associated Universities, INC (AUI) to deposit my payroll by initiating credit entries to my account(s) at the financial institutions (my Bank) indicated on this form. Further, I authorize my Bank to accept and to credit any credit entries indicated by AUI to my accounts. In the event that AUI deposits funds erroneously into my account, I authorize AUI to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in force and effect until AUI has received written notice from me of its termination in such time and in such manner as to afford AUI reasonable opportunity to act on it.

Employee Name: _____ Employee No.: _____

Employee Signature: _____ Date: _____

Requested Action New Account Discontinue Change Effective Date: _____

Account Information

Your payroll may be deposited into no more than three accounts; only one account may be selected for "Entire Net Amount."

1. Bank Name/City/State: _____
 Routing/Transit #: _____ Account #: _____
 Checking or Savings I wish to deposit \$ _____ or Entire Net Amount

2. Bank Name/City/State: _____
 Routing/Transit #: _____ Account #: _____
 Checking or Savings I wish to deposit \$ _____ or Entire Net Amount

3. Bank Name/City/State: _____
 Routing/Transit #: _____ Account #: _____
 Checking or Savings I wish to deposit \$ _____ or Entire Net Amount