

# CAMDEN COUNTY SCHOOLS

## AUTHORIZATION FOR AUTOMATIC DEPOSIT OF NET PAY

**Instructions:** Complete all items and return to your school office. The deposit information will be confirmed through the banking system before the first automatic deposit is made; payroll checks should be expected until you have received the initial notice of deposits. **NOTE:** Be sure your attached cancelled check contains both the bank transit-routing and account numbers.

Social Security No.	First Name	MI	Last Name
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\_\_\_\_\_ I authorize the Camden County Schools to deposit my net pay to the account and bank indicated and to initiate any necessary adjustment entries to my account for any transactions credited to it in error. (Sign and date below and complete information below.)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

Bank Name	Bank Location
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For Deposit to: (indicate one by checking)	
Checking Account ( )	Savings Account ( )

Indicate Change When Applicable	
If Changing Banks: write former bank name	If Changing Names: write former name

<p>Please Attach a Voided Check for Deposit Account in This Space Using Transparent Tape</p>
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