

**Jackson County Public Schools
Direct Deposit
Sign-up Form**

ACCOUNT INFORMATION

Name on Checking Account

Bank Name/City/State

Account Number _____ Checking Acct. _____ or Savings Acct. _____

Routing Number _____

I hereby authorize my employer to deposit payroll to my account listed above. Attached is a **voided check** for the checking account, or a deposit slip for the savings account designated above.

Check the following, as applicable:

Begin my direct deposit

Cancel my direct deposit

Change information

I would like a copy of this form.

Employee Signature

Date

****The first payroll you are enrolled in will be a pre-note test to the bank—the 2nd will be a money deposit.****

Attach voided check here!!!!