

CARMAN-AINSWORTH COMMUNITY SCHOOLS
G-3475 W. Court Street
Flint, MI 48532
810-591-8212 FAX: 810-591-3290

DIRECT DEPOSIT ENROLLMENT FORM

Direct deposit is available to all employees. Please complete this form and return it to the Payroll Office in the Administration Building.

EMPLOYEE NAME (Please print): _____

EMPLOYEE SSN: _____

CHECK ONE: _____Start Deposit _____Change Deposit _____Stop Deposit

NAME OF FINANCIAL INSTITUTION: _____

DEPOSIT AMOUNT (for whole check write net): _____

ABA ROUTING NUMBER: | | | | | | | | | |
(Nine digit number at bottom left of check)

ACCOUNT NUMBER: | | | | | | | | | | | | | | | | | |

ACCOUNT TYPE: _____Checking _____Savings

I hereby authorize Carman-Ainsworth Community Schools to make deposits to the account identified here. Adjusting entries to correct errors are also authorized. It is agreed that these deposits and adjustments may be made electronically and under the rules of the National Automated Clearing House Association. This authorization remains in effect until written notice of termination is submitted to Carman-Ainsworth.

Signature

Date

ATTACH VOIDED CHECK HERE