CLEAR FORM | PRINT FORM

DIRECT DEPOSIT AUTHORIZATION

☐ NEW or CHANGE

☐ CANCEL

PRINT or TYPE

NAME	SOCIAL SECURITY NO.
DISTRICT	WORK TELEPHONE
NAME OF BANK, CREDIT UNION or SAVINGS & LOAN	BRANCH
BANK/CREDIT UNION/SAVINGS & LOAN ADDRESS	BANK/CREDIT UNION/SAVINGS & LOAN TELEPHONE

DEPOSIT INTO:

☐ CHECKING

ACCOUNT NUMBER - ATTACH VOIDED BLANK CHECK

☐ SAVINGS

ACCOUNT NUMBER

BANK TRANSIT NUMBER - HAVE FINANCIAL INSTITUTION COMPLETE

I hereby authorize the above named District and the Orange County Department of Education (OCDE) and/or their agents, to initiate electronic deposits and, as necessary, debit corrections to previous deposits, to the above account.

I understand:

- I must submit a new authorization form if I change my account (name, branch, etc.);
- automatic deposit status will be temporarily suspended if wages are garnished.

I agree to hold harmless and indemnity the governing board, the School District, their officers and employees, and the Superintendent of Schools of the County of Orange and his employees, from every claim and demand, of whatever nature, including those based upon negligence of the governing board, the District, their officers and employees, and the Superintendent of Schools of the County of Orange and his employees for failure or delay in making deposits and/or corrections to deposits as herein authorized.

This authorization replaces any previously made by me and will remain in effect until changed or cancelled by my submission of a new Direct Deposit Authorization Form.

SIGNATURE: _____ DATE: _____

ATTACH VOIDED BLANK CHECK HERE

Jane Doe
1000 Main St.
Anywhere, U.S.A. 10001

_____ , 20 _____

PAY TO THE ORDER OF _____ $ _____

_____ DOLLARS

MEMO _____ _____

: 256000649 : 0302 0032178 : 0611

TRANSIT NO. ACCOUNT NO. CHECK NO.

OFFICE USE ONLY

FINANCIAL INSTITUTION ROUTING NO.

EMPLOYEE DEPOSIT ACCOUNT NUMBER