DIRECT DEPOSIT AUTHORIZATION

PRINT or TYPE

Name		Employee ID No		
District		Work Site		
	strict and the San Diego county office of edu ury, debit corrections to previous deposits, to t		agents, to initiate electronic deposits via the autom	
I understand:				
 I must submit a new author Direct deposit status will b 	e temporarily suspended if wages are g	unt (name, branch, etc.); farnished and/or the Crede	tion (approx. 30 days). ailure to do so may result in a deposit delay ntials Unit, SDCOE, places a hold on the wa tes and amounts of any such deposit(s).	
This authorization replaces any pr Deposit authorization form.	reviously made by me and is to remain ir	n effect until changed or can	celed by submission of a new Direct	
Signature:	gnature:Date:			
IF DEPOSITING DEPOSIT INSTRUCTIONS: Name of Financial institution		Amount Change renote needed)	ACH Cancellation	
Financial Institution Transit Routin				
Checking Net Check, or \$ Checking Account Number		Savings Net Check, or \$ Savings account Number		
ATTACH VOIDED BLANK CHECK HERE	Jane A. Doe 1000 Main St. Anywhere, U.S.A. 10001 PAYTOTHE ORDER OF MEMO	9991111222" Account No.		