

Direct Deposit Authorization Form

LC Employee ID	Employee's First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

To enroll in Direct Deposit:
 * Complete the authorization form below and submit to the Payroll Office.

To change or add accounts:
 * Additional accounts can be added by completing a new authorization form.
 * Changes to existing accounts will be effective the following payroll after submitting this form.

To cancel Direct Deposit:
 * You should notify the Payroll Department (using the authorization form below) before closing any direct deposit accounts.

PLEASE CHECK ONE

<input type="checkbox"/> New Enrollment	<input type="checkbox"/> Change Bank and/or Account Number
<input type="checkbox"/> Cancel Direct Deposit	<input type="checkbox"/> Change Amount

Direct Deposit Accounts

	Enter dollar amount, percent of pay or "Total Net Pay"		Name of Financial Institution
1. Deposit	<input type="text"/>	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="text"/> Routing No. <input type="text"/> Account No. <input type="text"/>
2. Deposit	<input type="text"/>	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="text"/> Routing No. <input type="text"/> Account No. <input type="text"/>
3. Deposit	<input type="text"/>	<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="text"/> Routing No. <input type="text"/> Account No. <input type="text"/>

A voided check, account identification card, or bank direct deposit form with routing number and account number is required and must be attached for each account listed above.

PLEASE NOTE: Copies of payroll advices are available online by logging in at **myLC Campus** at www.lee.edu.

I hereby authorize Lee College to initiate credit entries to the account(s) stated above and to initiate, if necessary, any debits or adjustments for any direct deposit errors made. This authorization is to remain in effect until revoked by me in writing.

Employee's Signature	Date
<input type="text"/>	<input type="text"/>

Please return this form to:
 Lee College, Payroll Department