Payroll Unit

Direct Deposit Authorization

PLEASE CHECK
☐ New ☐ Change ☐ Cancel

PRINT LAST NAME, FIRST NAME, MIDDLE INITIAL	SOCIAL SECURITY NUMBER
NAME OF SCHOOL DISTRICT (IF EMPLOYED WITHIN THE OFFICE, PUT YOUR ROOM NUMBER HERE)	WORK TELEPHONE NUMBER ( )
NAME OF BANK/CREDIT UNION/SAVINGS & LOAN ☐ Checking ☐ Savings	BRANCH TELEPHONE NUMBER ( )
ACCOUNT NUMBER	ADDRESS OF BANK/CREDIT UNION/SAVINGS & LOAN (NUMBER,STREET,CITY AND ZIP CODE)

I hereby authorize the district and the Los Angeles County Office of Education (LACOE) and/or its agents to initiate electronic deposits and, as necessary, debit corrections to previous deposits to my account.

I understand:

- Direct deposit status is not activated until 10 days following a $0 test transaction for new or change authorization.
- I must submit a new *Employee's Direct Deposit Authorization*, Form No. 501-508, if I change my account (name, institution, branch, type account, etc.).
- Direct deposit status will be temporarily suspended if wages are garnished.
- Direct deposit will also be suspended if a a certificated employee's credential expires.
- Direct deposit status may be suspended or rescinded by the district or LACOE and payment made by county warrant, if necesasry, to meet payroll deadlines or under extreme conditions.

I agree to hold harmless and indemnify the district and Los Angeles County Office of Education and its officers, employees, and agents from any claim or demand of whatever nature, including those based upon negligence of LACOE and its officers, employees, and agents for failure or delay in making deposits and/or corrections to deposits as herein authorized.

This authorization replaces any previously made by me and is to remain in effect until changed or canceled by submission of a new *Employee's Direct Deposit Authorization.*

ATTACH BELOW A VOIDED CHECK SHOWING THE INSTITUTION ROUTING NUMBER AND ACCOUNT NUMBER.	SIGNATURE OF EMPLOYEE **X**	DATE SIGNED

ATTACH VOIDED CHECK HERE

FOR COUNTY OFFICE USE ONLY

Refer to the Direct Deposit Reference Guide

FINANCIAL INSTITUTION ROUTING NO.	EMPLOYEE'S DEPOSIT ACCOUNT NO.

INPUT BY (PRINT NAME)

GR 9/2007