

DIRECT DEPOSIT AUTHORIZATION FORM

SPC Tax ID #59-1211489

Employee Name

Employee ID

Phone Number

Last 4 Digits SS#

Zip Code Current Home Address

Check
Number
1948

- Changes may take up to two pay periods before your new direct deposit becomes effective. In the interim, a paper paycheck will be mailed to your home address on record.
- If you want to inactivate a direct deposit account on file **and** also add a new account, complete information for each respective change.
- If your account on file has already been closed at the time of completing this form, notify us immediately (email below).

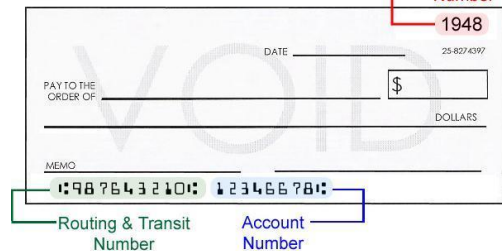


Diagram of a voided check with labels: PAY TO THE ORDER OF, DATE, \$, DOLLARS, MEMO, Routing & Transit Number, Account Number.

NOTE: You must have an account currently established and determine if the bank accepts direct deposit at each financial institution (bank). Employees are responsible for verifying bank routing number, account number, and available funds. The College is not responsible for any fees incurred for insufficient funds.

Please return completed form to employment@spcollege.edu

| DIRECT DEPOSIT #1 | DIRECT DEPOSIT #2 |
|--|--|
| <u>ACCOUNT REQUEST</u> <ul style="list-style-type: none"> ○ Add a new account ○ Change amount for current account ○ Inactivate a current account | <u>ACCOUNT REQUEST</u> <ul style="list-style-type: none"> ○ Add a new account ○ Change amount for current account ○ Inactivate a current account |
| <u>AMOUNT</u> <ul style="list-style-type: none"> ○ Full Deposit: 100% ○ Partial Deposit: \$_____ or _____% ○ Remainder of Deposit | <u>AMOUNT</u> <ul style="list-style-type: none"> ○ Full Deposit: 100% ○ Partial Deposit: \$_____ or _____% ○ Remainder of Deposit |
| <u>BANK ACCOUNT</u> Bank Name: _____ Routing # _____ Account # _____ Account Type: ○ Checking ○ Savings | <u>BANK ACCOUNT</u> Bank Name: _____ Routing # _____ Account # _____ Account Type: ○ Checking ○ Savings |
| <u>Attach a voided check -or- original bank document</u> | <u>Attach a voided check -or- original bank document</u> |

I hereby authorize St. Petersburg College (Employer) hereinafter called College, to initiate credit entries for payroll and if necessary, debit entries for adjustments for any credit entries made in error to my account(s) at the financial institutions listed above. This authority is to remain in force and effect until College has received written notification from me of its termination in such time and manner as to afford the College and financial institution a reasonable opportunity to act on it.

Employee Signature

Date