



Clarke County Board of Education

Direct Deposit Authorization Form

The following information is needed to set up direct deposit for your monthly paycheck. You must also attach a voided check. If you do not have checks, you must provide documentation directly from your financial institution confirming your routing and account numbers.

Name _____

Social Security Number _____

Type of Depositor Account _____ Checking _____ Savings

Financial Institution Name _____

Financial Institution Routing Number _____

Depositor Account Number _____

I certify that I am entitled to the payment identified above. In signing this form, I authorize my monthly payroll payment to be sent to the financial institution named above to be deposited to the designated account.

Signature

Date

ATTACH VOIDED CHECK HERE