Jackson County Public Schools
Direct Deposit Sign-Up Form

DIRECT PAYROLL DEPOSIT AUTHORIZATION

Please complete and return to the Payroll Department. Do not send electronically.

I authorize the Jackson County Board of Education and the bank identified below to deposit my net pay automatically into my account each payday. If funds to which I am not entitled are deposited into my account, I authorize you to direct the bank to return said funds. This authority will remain in effect until cancelled by me in writing.

EMPLOYEE NAME (PRINT) DATE

NAME OF FINANCIAL INSTITUTION BRANCH

ADDRESS CITY/STATE ZIP

TRANSIT NUMBER (ROUTING #) ACCOUNT NUMBER

CHECKING ACCOUNT OR SAVINGS ACCOUNT (CIRCLE ONE)

SIGNATURE DATE

Attach a void (or copy of) personal check to assure correct account verification.