

Central Piedmont Community College Authorization Agreement For Automatic Deposits

I hereby authorize Central Piedmont Community College, hereinafter called **CPCC**, to initiate credit entries or such adjusting entries, either debit or credit, which are necessary for corrections, to my account(s) indicated below and the depository(ies) named below, hereinafter called Depository, to credit (or debit) the same to such account. For additional account please use a new form. Limit of 3 accounts. **Direct Deposits will start when received in payroll.**

| Primary Account | | | |
|---|----------------------|--------|--|
| | <input type="text"/> | Add | Please note that all net pay will go into this account unless you have specified an amount to be deposited into a second and/or third account. If you have indicated other accounts, the balance of your pay will be deposited into your Primary account. |
| | <input type="text"/> | Change | |
| | <input type="text"/> | Delete | |
| <input type="text"/> Checking <input type="text"/> Savings | | | |

Financial Institution Name: _____

City: _____ State: _____ Zip: _____

Bank Routing No: _____ Account No: _____

| Secondary Account | | | |
|---|----------------------|--------|------------------------------|
| | <input type="text"/> | Add | Amount to be deposited _____ |
| | <input type="text"/> | Change | |
| | <input type="text"/> | Delete | |
| <input type="text"/> Checking <input type="text"/> Savings | | | |

Financial Institution Name : _____

City: _____ State: _____ Zip: _____

Bank Routing No: _____ Account No: _____

NEW ACCOUNT SET-UP WILL NOT BE HONORED WITHOUT PROPER DOCUMENTATION.

- <----Attach void check here.
- <----Attach direct deposit savings request form from bank here.
- <----Attach direct deposit request form from bank here.

This authority is to remain in full force and effect until **CPCC** has received written notification from me of its termination in such time and in such manner as to afford **CPCC** a reasonable opportunity to act on it.

Name: _____ SS. Or ID # _____

Date: _____ Signed: _____