

# AUTHORIZATION FOR DIRECT DEPOSIT OF PAYROLL CHECK

NAME: \_\_\_\_\_

ID NO: \_\_\_\_\_ S.S.N : \_\_\_\_\_

I AUTHORIZE NEBRASKA WESLEYAN UNIVERSITY AND THE BANK(S) NAMED BELOW TO INITIATE VARIABLE ENTRIES TO MY CHECKING/SAVINGS ACCOUNT(S).

BANK NAME: \_\_\_\_\_ checking/savings  
ACCT NUMBER: \_\_\_\_\_ AMOUNT: REMAINDER

BANK NAME: \_\_\_\_\_ checking/savings  
ACCT NUMBER: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

BANK NAME: \_\_\_\_\_ checking/savings  
ACCT NUMBER: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

ATTACHED IS A **VOIDED CHECK(S)** GIVING THE BANKING NUMBERS NECESSARY TO SET UP DIRECT DEPOSIT OF MY PAYROLL CHECK.

IT IS AGREED MY PAYROLL CHECK WILL BE DEPOSITED IN MY CHECKING ACCOUNT ON MY PAYDAY. WHEN MY PAYDAY FALLS ON A WEEKEND OR HOLIDAY, MY PAYROLL CHECK WILL BE DEPOSITED ON THE LAST WORKING DAY BEFORE MY PAYDAY.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_