

# DIRECT DEPOSIT AUTHORIZATION

**Required for all new employees.**

**Attach voided check here**

\*\*\*\*If you do not provide a voided check or print-out from your bank and your information is entered incorrectly it will be corrected on the next payroll.



**White Bear Lake Area Schools  
4855 Bloom Avenue  
White Bear Lake, MN 55110**

## Personal Information

**Name** \_\_\_\_\_

**Building** \_\_\_\_\_

I authorize you and the financial institution(s) listed below to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries in error to my account(s) each payday. This authority will remain in effect until I have cancelled it in writing.

**Bank Name** \_\_\_\_\_

**Bank Name** \_\_\_\_\_

**Primary Account #** \_\_\_\_\_

**Secondary Account#** \_\_\_\_\_

**Transit Routing #** \_\_\_\_\_

**Transit Routing #** \_\_\_\_\_

**Account Type** \_\_\_\_\_ Checking  
\_\_\_\_\_ Savings

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\_\_\_\_\_ Savings

## Payment Options

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**Entire net amount** \_\_\_\_\_

**Amount of deduction \$** \_\_\_\_\_

**Remainder after secondary account deduction** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

Complete this form in full and return to the Finance Department @ District Center  
651-407-7595