

## Hampden-Sydney College **Direct Deposit of Payroll Authorization**

If you have one deposit account, complete Section I and III only. If you have two deposit accounts, complete Sections I, II and III. The financial institution in Section I will be your primary account subject to change as adjustments are made to your secondary account with a fixed dollar amount applied monthly. The amount applied to the secondary account will not be changed without written authorization.

Effective Date:		_		
Section I Financial Institution: _				
Location (City & State)	:			
Type of Account:	Checking - B	Bank Routing #:		
	A	Account #:		
	Savings - B	Bank Routing #:		
C. A. H	A	Account #:		
Section II Financial Institution: _				
Location (City & State)	:			
Type of Account:	Checking - B	Bank Routing #:		
	A	Account #:		
	Savings – B	Bank Routing #:		
	A	Account #:		
Dollar amount of check	to be applied to thi	s account:		
indicated deposit accou am not entitled are de Institution to return said	nt all net pay amou posited to my according funds. This author	onts payable to me by Hount, I authorize Hamprity is to remain in effect	on listed above to credit auto campden-Sydney College. If oden-Sydney College to dire et until cancelled in writing.	funds to which I
Employee Name:				
		(Print)	College ID #	F
Employee Name:		(Signature)		
BUSINESS OFFICE USE	E:			

Received By: \_\_\_\_\_\_ Date: \_\_\_\_\_

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