



Central Administration Offices
 Payroll Department
 200 North 23rd Street
 Temple, Texas 76504
 254.215.8473
 www.tisd.org

Payroll Direct Deposit Authorization Form

Name Employee ID#
 Campus

Please Check One: Bi-Weekly Staff Monthly Staff

To set up a new direct deposit account, attach a voided check below. If you are setting up more than one deposit account, make sure to attach a voided check for each account. **All changes and new accounts will not be in effect until the second pay period following the processing of this form.**

Robert Smith 456
 123 Stone Lane
 Rochester, NY 14609

Date _____

Pay to _____ \$
 the order of _____ Dollars

VOID

BANK NAME _____

! 1 2 3 4 5 6 7 8 9 ! 1 3 4 5 6 7 8 9 " 0 4 5 6
 Routing Number Account Number Check Number

New Account Change Account Cancel Account*

***Do not close your current bank account until you are certain your paycheck is no longer being deposited into that account.**

Bank Name #1 Account type:
 Checking or
 Savings

Routing Number Account No.

Percent of Net Check % Or dollar amount \$ Or remaining pay

New Account Change Account Cancel Account*

***Do not close your current bank account until you are certain your paycheck is no longer being deposited into that account.**

Bank Name #2 Account type:
 Checking or

Routing Number

Percent of Net Check % Or dollar amount \$ Or remaining pay

Please read carefully:
 I hereby authorize Temple ISD to make deposits/changes as indicated above. Temple ISD is also authorized to draw drafts to adjust any OVER-deposits which was made to my account. I will not hold my bank liable for any erroneous deposits or adjustments by Temple ISD.

Signature: _____ Date: _____

Return this completed form to Payroll Department, Central Administration Office

8/2015