

PAYROLL: DIRECT DEPOSIT AUTHORIZATION FORM

Election (Check One)

- Add an Account**
- Change an Existing Account**
- Stop Direct Deposit

New Contribution**

- Fixed Amount: _____
- Percentage of Pay: _____

PART I: PERSONAL DATA

Name: _____

Location: _____

Employee ID: _____

Email Address: _____

Work Phone: _____

PART II: ACCOUNT INFORMATION

Please complete all account and bank information below.

Type of Account: Checking Savings

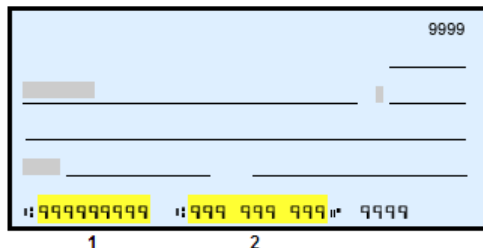
Bank/Institution Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Transit/ABA No: _____ Account No: _____

Check Example



- 1- Transit/ABA Routing Number
- 2- Account Number

Attention

Attach a voided check, deposit slip, or bank document to verify your account number

****No Bank Statements****

Your direct deposit election should begin within two pay periods after receiving the completed form and documentation.

NOTE: For the purposes of direct deposit, banking institutions will sometimes use difference ABA routing numbers and account numbers than what is printed on your check/deposit slip. Please contact your bank to request the correct number and account number to set up your deposit.

I understand CCC does not assume liability for charges incurred due to incorrect data entry/setup on the part of the employee. In addition, I hereby authorize City Colleges of Chicago (CCC) to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account indicated above and the bank/institution named about, thereafter called Bank/Institution, to credit and/or debit to the same such account.

This authority is to remain in full force and effect until CCC has received written notification from me of its termination in such time and in such manner as to afford CCC and the Bank/Institution reasonable opportunity to act on it.

Employee Signature

Date

Send Completed Form to
Payroll Services: 3901 S. State St. Chicago, IL 60609
Or email to cccpayroll@ccc.edu