

Payroll Direct Deposit Authorization Agreement

Direct deposit requests will go through a *pre-note process* before checks are deposited (unless waived below). It may take a minimum of two (2) pay periods before payments will be deposited into your account.

Employee Name:

(please print)

USF ID # (Located on USF Connect/Paycheck):

1. Complete all required information.
2. Attach a current **VOIDED CHECK for a checking account** or a **savings deposit slip for a savings account**. Forms without the appropriate attachment will be returned.
3. Return all requested forms to:

University of San Francisco
Human Resources – Payroll Services
2130 Fulton St
Lone Mountain 339
San Francisco, CA 94117-1080

(Check One): ENROLL _____ CHANGE _____ CANCEL _____

By checking here, I elect to waive the standard 30 day pre-note period. I understand that if the funds are routed incorrectly, they will not be recovered until the original funds are returned.

Financial Institution Name:

CHECKING	SAVINGS
Routing Number:	Routing Number:
Account Number:	Account Number:
Deposit Amount: _____ 100% Net (or) \$ _____ Flat Amount (enter amt.)	Deposit Amount: _____ 100% Net (or) \$ _____ Flat Amount (enter amt.)

Signature

Date of Request

Phone Number

For Payroll Use Only

Date Received

Date Processed

Completed By