LANE COMMUNITY COLLEGE PAYROLL DIRECT DEPOSIT AUTHORIZATION				
New Request Cancel Existing Change Existing Direct deposit changes and new requests take one (1) full pay period to take effect. Therefore,				
you will receive a paper check while your account is validated through the prenote process.				
L#:			Home Phone:	
Name:			Work Phone:	
SS#:			Email:	
 WE ARE UNABLE TO PROCESS INCOMPLETE FORMS Please fill out the form in its entirety. Staple a voided check to this form for the setup of all checking accounts. For checking accounts, the bank routing number is the first 9 digits listed on the bottom of your check. For savings accounts, please contact your bank to obtain the routing number. For multiple accounts, please list them in the order of funding preference. If this is a change to an existing authorization, please complete the entire form as though you are setting it up for the first time. Sign, date and return the form to Human Resources. 				
Bank Routing #:		% of your net pa	Account Type:	Savings
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Bank Routing #:			Account Type:	☐Checking ☐Savings
Account #: \$	-or-	% of your net pa	y to be deposited ir	nto this account
Bank Name: Bank Routing #: _ Account #:		% of your net pa	Account Type:	Checking
Signature			Date	9
Payroll Office Use Only				
Entered by:			Date:	