



PAYROLL DIRECT DEPOSIT FORM

PRE-TAX DEPOSIT INTO H.S.A. ACCOUNT

EMPLOYEE'S AUTHORIZATION – PLEASE FILL OUT AND RETURN TO THE PAYROLL DEPARTMENT.

I authorize Onsted Community Schools and the financial institution listed below to deposit my pay automatically as stated below. Adjusting entries to correct errors are also authorized. This authority will remain in effect until I have cancelled it in writing.

Effective Date: _____

Employee Name: _____
(please print)

_____ Checking Account

Account Number: _____

Routing Number: _____ 24127085

Financial Institution: _____ First Federal Bank

Specific Dollar Amount Per Pay Of \$ _____
(Note: if no dollar amount is specified, the net amount will be deposited.)

Employee Signature: _____