

Getting Acquainted with

Direct Deposit

1. *What is Direct Deposit:*

Direct Deposit is a system whereby your employer arranges for the deposit of your payroll and reimbursements to a savings or checking account of your choice. Payroll funds will be placed in a single account or distributed amongst several accounts; using either fixed amounts or percentages of net pay. Accounts Payable reimbursements will be deposited to the default number one(1)account, which is already designated for payroll. The transfer of funds is done through the Automated Clearing House (ACH). The ACH is a national organization of major financial institutions that agree to operate by a standard set of regulations and procedures concerning the exchange of funds.

2. *Who is eligible for Direct Deposit?*

Direct deposit is available to all employees who bank with an ACH member.

3. *Which financial institutions are members of ACH?*

With very few exceptions, all banks are members of the ACH. Many savings and loan associations and credit unions are also ACH members. However, you will need to confirm with your particular institution.

4. *When will my pay be deposited?*

With Direct Deposit, your pay is available to you on payday at the branch where your account is located. Your ACH Advise is emailed to you, unless you request otherwise, and is your verification of deposit.

5. *What record of earnings will I receive?*

On payday, each employee on Direct Deposit will receive an ACH Advice sent to their work email, unless otherwise requested. It will contain the same information that currently appears on your check stub.

6. *Can my accounts payable reimbursement checks be directly deposited into my bank?*

Yes. If you are signed up for payroll ACH all accounts payable reimbursements will only be made to the number one (1) account used for payroll deposits. Unless noted otherwise.

7. *Can I discontinue Direct Deposit at any time?*

Yes. To discontinue Direct Deposit contact your payroll department and complete the cancellation request no later than two weeks prior to the pay date.

8. *What happens when I change accounts?*

If you intend to change or close your account(s), or change banks, you must go to your payroll department and complete the appropriate forms. It is your responsibility to ensure account changes are made with sufficient time to process prior to the running of payroll or reimbursement.

9. *Is there a charge for Direct Deposit?*

No. Direct Deposit is provided without charge to employees.

10. *How do I sign up for Direct Deposit?*

To initiate direct deposit just complete and sign the Automatic Deposit Authorization Agreement form. Only one signature is required for joint accounts.

Return the authorization form ALONG WITH VERIFICATION DOCUMENTS indicating your account number(s) to your payroll department. It will take two pay periods for you to begin receiving your payment by Direct Deposit. Your payroll department will advise you of the date the Direct Deposits will begin.

Mendocino County Office of Education
Automatic Deposit Authorization Agreement

I, _____ employee of _____
(Print Employee Name) *(District Name)*

hereby authorize my employing district through the Mendocino County Office of Education and the financial institution(s) indicated below, to deposit payments designated to my account(s). I shall hold harmless and indemnify the Mendocino County Office of Education, herein after referred to as the Superintendent, and its officers and employees from any claim or demand of whatever nature; including those based upon negligence of the Superintendent, its officers and employees, brought by any person, including any bank institution against the Superintendent in its capacity concerning the Payroll/Accounts Payable Reimbursement check disposition provided by the Superintendent. *I understand that all advices of deposits are sent to my work email address unless I request a printed copy.*

I understand it is my responsibility to ensure that my net check has been properly credited to my account(s) before issuing checks against the account(s). If funds to which I am not entitled are deposited, I hereby authorize the Superintendent to direct the financial institution to return such funds or to request a "stop payment" of the Direct Deposit and to issue a check for the correct amount. Electronic fund transfers take effect on the second pay period after this form has been processed to allow for a successful prenote test through the banking system. This completed request is effective from the date signed below until I have signed the cancellation section on the reverse of this document.

_____	_____	_____
<i>Date</i>	<i>Employee ID</i>	<i>Employee Signature</i>
_____	_____	
<i>Date</i>	<i>Superintendent's or Designee's Signature</i>	

Account Information – Payroll Direct Deposit

The last item must be for the remaining amount owed to you. To distribute to more accounts, please complete another form. Make sure to indicate what kind of account, along with amount to be deposited, if less than your total net pay.

1. Bank Name/City/State: _____
Routing Transit #: _____ Account Number: _____
 Checking Savings I wish to deposit: \$ _____ or _____ % or Entire Net Amount

2. Bank Name/City/State: _____
Routing Transit #: _____ Account Number: _____
 Checking Savings I wish to deposit: \$ _____ or _____ % or Remaining Net Amount

3. Bank Name/City/State: _____
Routing Transit #: _____ Account Number: _____
 Checking Savings I wish to deposit: \$ _____ or _____ % or Remaining Net Amount

Account Information – Accounts Payable Reimbursement Direct Deposit

Accounts Payable reimbursements will be deposited into the number one (1) bank account as listed above. Unless noted otherwise.

ATTACH INFORMATION HERE

For **deposits to checking accounts**, ATTACH A VOIDED PREPRINTED CHECK.
(Deposit slips are NOT acceptable.)

For **deposits to savings accounts**, ATTACH A NOTICE OF YOUR ACCOUNT NUMBER
from your financial institution.

PLEASE NOTE: For **deposits to accounts that do not bear your name**, you must also ATTACH AN
AUTHORIZATION LETTER from your financial institution stating
they will accept an ACH to the account that does not bear your name.

Stop do not continue. For cancellation of direct deposit only.

DIRECT DEPOSIT CANCELLATION

I, _____ hereby request that direct deposits to the following account
(Print Employee Name)

number(s) be discontinued effective on pay period after receipt of this request by the **Mendocino County Office of Education**.

Bank Name/City/State: _____

Routing Transit #: _____ Account Number: _____

Bank Name/City/State: _____

Routing Transit #: _____ Account Number: _____

Bank Name/City/State: _____

Routing Transit #: _____ Account Number: _____

Date *Employee's Signature*