JAMES MADISON UNIVERSITY.

EMPLOYEE DIRECT DEPOSIT AUTHORIZATION

I agree as a condition of employment, to have JMU deposit my net pay each pay date directly to my account(s) at the bank/credit union(s) listed below. I agree to notify my employer immediately of any changes to the information so that my pay may be properly distributed.

Please attach a voided check from bank/credit union for each account

Account No. 1 – Net Pay (Required)

Name of Bank/Credit Union	Routing/Transit Number	Account Number	Checking/Savings

Account No. 2 – Fixed Account (Optional)

Name of Bank/Credit Union	Routing/Transit Number	Account Number	Checking/Savings	Amount

STAPLE CHECKS HERE

Account No. 3 – Fixed Account (Optional)

Name of Bank/Credit Union	Routing/Transit Number	Account Number	Checking/Savings	Amount

Account No. 4 – Fixed Account (Optional

Name of Bank/Credit Union	Routing/Transit Number	Account Number	Checking/Savings	Amount

**I understand that James Madison University may authorize my financial institution to debit my account for any deposits that are not for the correct amount due to me.*

Printed Name	Department	Phone Number

Employee's Full Signature	Date	SSN

FULL TIME FACULTY AND STAFF ONLY

Non-payroll related reimbursement payments (i.e., travel, business expenditures)

Payroll Net Account No 1 listed above (Default account) OR

Other- _____ _____ _____ _____

Name of Bank/Credit Union | Routing/Transit Number | Account Number | Checking/Savings