

**THE MOKENA SCHOOL DISTRICT 159
PAYROLL DIRECT DEPOSIT AUTHORIZATION**

(Revised 02-2007)

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| Name (Please print or type) |
|-----------------------------|

Please indicate the type of transaction you are requesting:

- New Direct Deposit Change account(s) / amount(s) Terminate authorization

You may have a total of two Direct Deposits.

| | | | | | |
|------------|---------------------------------------------------|-------------------------|------------------------------------------------|--------------|-----------------------|
| 1. Deposit | Enter a dollar amount, percentage or "my net pay" | each pay period into my | Select account type Checking/Savings | account with | Financial Institution |
| 2. Deposit | Enter a dollar amount, percentage or "my net pay" | each pay period into my | Select account type Checking/Savings | account with | Financial Institution |

If depositing into a checking account, please attach a voided check.
(it must include your pre-printed name and address)

If depositing to a Credit Union or into a savings account, please attach one of the following:

- A completed direct deposit sign-up form 1199-a (available from your financial institution)**
or
Correspondence from your financial institution listing your account and their routing number

Note: The information requested is necessary to identify your account and your financial institution's routing number.

I hereby authorize the Mokena School District 159 to initiate credit entries (deposits) and, if necessary, debit entries and adjustments for any credit entries made in error, to my account(s) listed above. To ensure proper distribution of my pay, I agree to immediately notify the Payroll department of any changes to this information. This direct deposit request will remain in effect until I notify, in writing, the payroll department to terminate it, or until my employment with the school is terminated.

Signature

Date

Return this from to:
Mokena School District 159
Payroll Office
11244 W Willowcrest Lane
Mokena IL 60448