

Mt. San Antonio College

1100 North Grand Avenue Walnut, California 91789-1399 www.mtsac.edu

Direct Deposit Authorization

Step		Check the Appropria	te Box							<u></u>		
		Employee			☐ Student (Financial Aid)							
Check the Appropriate Box												
	□ New Request □ C			Changed Information		☐ Cancel Direct Deposit			sit			
Step 2 Employee/Student/Vendor Information												
	Nam dor Na						rst ame				Middle Initial	
		/Student/Vendor er (Required)			E-mail Address							
Address												
Addi	655											
City							State			Zip Code		
Cou	ntry			Paytime Telephone Number								
Authorization												
College at any time. If any of the above information changes, I will promptly complete a new authorization agreement. If the direct deposit is not stopped before closing an account, funds payable to me will be returned to the College for distribution. This will delay my payment. 2. This authorization remains in effect until the College receives written notification of change or cancellation from you or your financial institution. 3. The College reserves the right to recall or adjust any deposits improperly created and deposited to my account. 4. I will hold the College harmless for any liability to pay charges for insufficient fund transactions that result from failure within the Automated Clearing House network to correctly and timely deposit monies into my account. **Disclosure Statement** The first time a Payroll payment is processed it must go through a "pre-note" or "test run" to our bank. Therefore, your first payment after requesting direct deposit will be a check. The pre-note allows our bank the opportunity to notify us if there is a problem with the banking information that we entered. The pre-note period must occur with Accounts Payable/Student Accounts checks as well. If the pre-note does not occur on the Accounts Payable system before the processing of a check, then the first payment processed from Accounts Payable may be a check as well with all subsequent payments being directly deposited. As the account holder, I authorize, by signing below, credits to be made to my bank account listed here												
AC	COU	NT HOLDER SIG	NATUR	E:					DAT	E:		
Step 3 You must verify that your bank is a member of an Automated Clearing House (ACH). Failure to do so could delay the processing of your payment. You must attach a voided check or have your bank complete the bank information and the account holder must sign below.												
几	S	taple voided check here ((DO NOT attac	h a deposit slip) OR	Have bank rep	resentati	ve complete h	ere		$-\!\!\!\!/\!\!\!\!/$		
				TC	BE COM	PLETE	D BY YOU	JR BANK		- V		
	NAME	TO BE COMPLETED BY YOUR BANK NAME OF YOUR BANK:										
Here		CCOUNT HOLDER NAME(S):										
Staple Here		CHECKING SAVINGS	ACCOUNT N	LIMBER:				ROLITI	NG NUMBER:			
0	BANK	(REPRESENTATIVE NAME:	ACCOUNT	O. DETA				10011	TO HOWIDER.	<u> </u>		
	BANK	(REPRESENTATIVE NAME. ATURE:							DATE:			

Revised 8/13/14