

CARTERET COUNTY PUBLIC SCHOOL SYSTEM

DIRECT DEPOSIT FORM

Please complete.

A voided check is required for verification of bank and account numbers.

IMPORTANT NOTICE: Your first paycheck will be prenoted (not direct deposited – account numbers are verified). Thereafter all paychecks will be direct deposited.

NAME _____ SOCIAL SECURITY NO. _____

EMPLOYER: **CARTERET COUNTY SCHOOLS** BANK'S NAME _____

BANK NUMBER (first grouping of numbers printed at the bottom of your check; either 8 or 9 digits)

PLEASE CHECK ONE and record Acct. No.

___ DEPOSIT INTO MY CHECKING ACCOUNT ACCT. NO. _____

___ DEPOSIT INTO MY SAVINGS ACCOUNT ACCT. NO. _____

I AUTHORIZE CREDIT ENTRIES AND ANY ADJUSTMENTS TO BE MADE TO MY ACCOUNT

DATE _____ SIGNATURE _____

