

**DAVISON COMMUNITY SCHOOLS
DIRECT DEPOSIT ENROLLMENT FORM**

Employee Name (Please Print) _____

Social Security Number _____

Bank/Credit Union Account Information
(Up to 3 accounts)

Primary Net Pay Account

Bank/Credit Union Name _____

Account Type (Check One) _____ Savings _____ Checking (Please Attach Void Check)

ABA Routing # _____ Account Number _____

Additional Account #1 (Optional)

Bank/Credit Union Name _____

Account Type (Check One) _____ Savings _____ Checking (Please Attach Void Check)

ABA Routing # _____ Account Number _____

Amount to Be Deposited Per Pay \$ _____

Additional Account #2 (Optional)

Bank/Credit Union Name _____

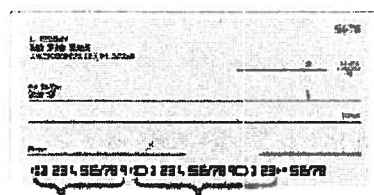
Account Type (Check One) _____ Savings _____ Checking (Please Attach Void Check)

ABA Routing # _____ Account Number _____

Amount to Be Deposited Per Pay \$ _____

Employee Signature _____ Date _____

Sample Check



ABA Routing # Bank Account #