



DEPAUW UNIVERSITY

INFORMATION AND AUTHORIZATION REGARDING DIRECT DEPOSIT

INSTRUCTIONS FOR COMPLETING THIS FORM

1. Provide ALL information requested on this form.
2. Attach a copy of a check, a voided check or a letter from your bank listing the bank's routing number and your account number. Deposit slips of any kind are NOT acceptable.

For PAYROLL:

- A. The first pay after this direct deposit document is processed in the Payroll Office you will receive a paper check. Student checks will be delivered to his or her UB Box. Employees may pick up their check at the Human Resources Office.
- B. Employees and students making changes or closings to an account must be submitted one week prior to the pay date.
- C. Direct deposit "Pay Statements" are available via the ADP Portal.
- D. Any monies going to a closed account will be paid on the first available date following Payroll identification.

For ACCOUNTS PAYABLE:

1. An email address must be provided in order to notify you when a payment has been deposited into your account.
2. A properly executed W-9 is needed in order to receive payments from the Accounts Payable Office.
3. Payments are deposited into the Primary account only, and entire amounts are deposited into this one account.
4. Any invoice that is processed prior to receiving the direct deposit form will be paid in the form of a check. All invoices processed after the Accounts Payable office has processed the direct deposit information will be deposited in the Primary account.

Sample Check:

Routing numbers will always be 9 digits long.

John or Jane Doe 1111 Somewhere Street Someplace, MN 11111		1111
DATE _____		
PAY TO THE ORDER OF _____		\$ _____
		DOLLARS
NON-NEGOTIABLE		
Something Bank 1-800-STBANKS		
FOR _____	1111 Do Not Write in this space	
① 000111100②:110011000111③		④

Routing Number

Account Number

DEPAUW UNIVERSITY DIRECT DEPOSIT FORM

I authorize DePauw University and the financial institution(s) below to deposit any amounts owed to me to the account(s) listed below. In the event that DePauw University deposits funds in error, I authorize a debit from the account not to exceed the original amount that was in error. This authorization will remain in effect until written notice is received by the university.

Name: _____ ID No: _____

Address: _____ SSN/TIN: _____

City, State ZIP: _____

Email Address: _____

Signature: _____ Date: _____

REMINDER: Provide a copy of a check, a voided check or a letter from your bank listing the routing number of the bank and your account number with this bank. For PAYROLL: the **PRIMARY** item must be for the **NET** amount owed to you. Indicate what kind of account, along with the amount to be deposited, if less than your total net pay. Indicate any remaining dollars to be deposited in another account by listing the bank information and specified amount listed below. For ACCOUNTS PAYABLE: **ALL** funds will be deposited into the Primary Bank account only. No exceptions are allowed. Please mark all appropriate boxes:

New Account Change Account Info Cancel Account

Primary Bank Name: _____

Checking Savings

Routing #: _____ Account #: _____

Entire Amount Specified Amount: \$ _____

For PAYROLL ONLY: List below any additional bank account information and specify amounts you authorize deposits to be made into below. **NOTE: This option is NOT available for Students or Vendors.**

New Account Change Account Info Cancel Account

Second Bank Name: _____

Checking Savings

Routing #: _____ Account #: _____

Specified Amount: \$ _____

New Account Change Account Info Cancel Account

Third Bank Name: _____

Checking Savings

Routing #: _____ Account #: _____

Specified Amount: \$ _____

All information on this form is shared between the Payroll Office and the Accounts Payable Office of DePauw University. If you choose to "opt out" of sharing this information between these two offices please indicate so by marking the appropriate box below:

I wish to "Opt Out". Do not share information with the Payroll Office.

I wish to "Opt Out". Do not share information with the Accounts Payable Office.

FOR OFFICE USE ONLY:	
PR _____	AP _____