

ORANGE COUNTY COMMUNITY COLLEGE DIRECT DEPOSIT AUTHORIZATION FORM

I authorize Orange County Community College to deposit my net pay automatically to my account specified below each pay date by initiating credit entries to my account electronically or by any other commercially accepted method. I further authorize the financial institution names below to credit the same to my account. If funds to which I am not entitled are deposited to my account, I authorize Orange County Community College to direct the financial institution to return said funds to the correct account. I authorize the financial institution to debit the same to my account. This authority will remain in effect until Orange County Community College has received written notice from me.

SECTION 1: TO BE COMPLETED BY EMPLOYEE

EMPLOYEE NAME: _____ SOCIAL SECURITY NUMBER: _____

ACCOUNT TYPE:
(CHECK ONE ONLY)

CHECKING ☐
ATTACH A VOIDED CHECK
OR OFFICIAL BANK FORM

SAVINGS ☐
ATTACH A PREPRINTED DEPOSIT SLIP
OR OFFICIAL BANK FORM

**** IF HUDSON HERITAGE CREDIT UNION, ALSO ATTACH 'START OR CHANGE DIRECT DEPOSIT' CARD****

NAME OF FINANCIAL INSTITUTION: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

SIGNATURE: _____ DATE: _____

SECTION 2: TO BE COMPLETED BY PAYROLL OFFICE

PROCESSED BY: _____ DATE: _____

PRENOTE DATE: _____ DIRECT DEPOSIT DATE: _____

CREDIT UNION DEDUCTION (CODE 20)

REMOVED CREDIT UNION DEDUCTION

YES _____ NO _____

YES _____ NO _____