PAYROLL DIRECT DEPOSIT AUTHORIZATION

> Mail to YCCD-Payroll Dept
> PO Box 4065
> Modesto, CA 95352

It may take up to 3 payroll cycles for direct deposit to go into effect. During the first cycle and possibly the second cycle you will receive a check in the mail, sent to the address you have on file with Human Resources. You must attach a voided check or a print out from your banking institution stating your name, routing number, account number, and type of account. A deposit slip is not acceptable. **Failure to follow these instructions will result in denial of your request, and it will be sent back to you unprocessed.**

Last Name   First Name   MI

EMPLOYEE ID #   Work Phone

Action   Effective Date

New   Change   Cancel

Your banking institution must have a physical branch in CA per Labor Code 212,213.

Financial Institution

Account Number   Checking   Savings

Transit Routing Number   Amount

Click here if the balance of the payment is to be deposited to this account

Additional Accounts (if deposit is to be made to multiple accounts)

Financial Institution

Account Number   Checking   Savings

Transit Routing Number   Amount

Click here if the balance of the payment is to be deposited to this account

Additional Accounts (if deposit is to be made to multiple accounts)

Financial Institution

Account Number   Checking   Savings

Transit Routing Number   Amount

Click here if the balance of the payment is to be deposited to this account

I hereby authorize YCCD to deposit and the financial institution listed below to deposit my pay automatically to my account listed above each payday and, if necessary, to adjust or reverse a deposit for any payroll entry made to my account in error. This authorization will remain in effect until I have cancelled it in writing and with such time as to afford YCCD a reasonable opportunity to act on it. YCCD can initiate termination of this agreement based on employment circumstances that may result in overpayment or due to rejection by your financial institution.

_____   _____

Signature   Date