

MARLBOROUGH BOARD OF EDUCATION
AUTHORIZATION FOR DIRECT DEPOSIT

EMPLOYEE NAME _____

DATE _____

To Payroll Department- Please do a direct deposit of my entire paycheck or a portion thereof as shown below:

Bank Name	Bank's Routing #	Checking/Savings	Your bank acct #	Deposit amount

Please attach a VOID check for checking account deposits or a deposit ticket with your bank account number on it for savings account deposits.

If you wish to deposit your entire paycheck or the remaining balance to one account, please write "ALL" in the amount to deposit column.

If you are splitting your deposit among two or more banks, show the amount to deposit for each one and the type of account- checking or savings.

In the event that the Town of Marlborough-Marlborough Board of Education deposits into the above-mentioned accounts in error, I give payroll personnel authorization to correct this matter by withdrawing the deposit made in error.

EMPLOYEE SIGNATURE