## OSWEGO CITY SCHOOL DISTRICT PAYROLL DEPOSIT FORM

## OSWEGO TEACHERS E. FEDERAL CREDIT UNION ABA# 221379060 District Employee Name (please print): Social Security #: Credit Union Account #: Effective Payroll Date: Start Change Savings Checking

DIRECT DEPOSIT (ALL OF NET) ELECTION

I hereby authorize the Oswego City School District to Initiate Direct Deposit payroll credit entries through the Automated Clearing House to the Oswego Teachers Credit Union. Further, in the event that a credit entry is made to my account in error, I authorize the Oswego City School District to make a correcting entry.

I understand my pay will not be direct deposited until a test ("prenote") has been done on my account to verify the accuracy of the information provided.

## STOP/CEASE DIRECT DEPOSIT (ALL OF NET ELECTION

I hereby request/authorize the Oswego City School District to cease/stop Direct Deposit payroll credit entries through the Automated Clearing House to the Oswego Teachers Credit Union

I understand it is my responsibility to either:

- > Contact the Oswego City School District for a form to redirect my Direct Deposit OR
- Complete the Payroll Deduction Election portion of this form and receive the balance of my pay in a check issued by the Oswego City School District.

PAYROLL DEDUCTION ELECTION

I hereby authorize the Oswego City School District to forward the following deduction, each pay period, to the Oswego Teachers E. Federal Credit Union.

Amount: \$\_\_\_\_\_

Employee Signature \_\_\_\_\_