PUTNAM COUNTY SCHOOLS
Achieving Excellence

DIRECT DEPOSIT
ENROLLMENT FORM

(Revised 10/28/15)

INSTRUCTIONS:

1. Attach a voided check for this account.
2. Print all information as neatly and legibly as possible.
3. Proof employee ID number for accuracy.

(Please Print)

FULL NAME: _____

EMPLOYEE ID #   97200 _____

(last four digits)

NAME OF DEPOSITORY BANK: _____

ADDRESS OF DEPOSITORY BANK: _____

(Check One)

CHECKING _____   SAVINGS _____

ATTACH VOIDED CHECK HERE

SIGNATURE: _____   DATE: _____

Your money will be in your bank account the morning of the actual pay date.