

WESTERN

— TEXAS COLLEGE —

Direct Deposit Authorization

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail address: _____

Start

Change

Stop

To start or change a direct deposit, a voided check printed with your bank routing number and information must be attached.

Bank Name: _____

Bank Routing # _____

Checking Account # _____ %

Savings Account # _____ %

I hereby authorize Western Texas College to transfer my paycheck to the financial institution named above for deposit to my account each and every pay period.

Signature

Date

Please attach voided check to this request.