

TRINITY COLLEGE

PLEASE PRINT OR TYPE NAME HERE:

AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYROLL DEPOSITS AND DEDUCTIONS

Definitions

In this agreement, "I", "Me" and "my" mean the employee. "You" and "your" mean the employer. "Account" means the checking, savings, NCW or IRA account into which payroll funds are sent. "Bank" means the bank that holds my account.

Your Liability

You will use care in sending funds to my Account. I agree that you will not be liable for damages or losses that occur due to an equipment failure, an act by any third party, or something beyond your control. In any event, your liability to me will not exceed the difference between the wages you owe me and what you have paid me.

Payroll Deposits and Deductions

I authorize you to pay me my wages as described in this form. You may send the deposits to my Bank(s), or by paper entry if you need to.

Corrections

If you credit my Account with a wrong amount, you may correct the error with an electronic debit or by paper entry.

Changes

If I want to make any change to this agreement, I must tell you in writing. You may have a reasonable time to act on the change. If you want to stop or change this agreement, you may after you give me a ten day notice in writing.

Employee Signature:

Date:

COMPANY NO.	DIV.	BRANCH	DEPARTMENT	EMPLOYEE NUMBER

FOR DEPOSIT TO: BANK NAME

BANK CITY - STATE

PLEASE NOTE:
DIRECT DEPOSITS WILL BECOME EFFECTIVE WITH THE SECOND PAY PERIOD.

BANK TRANSIT ROUTING - AMERICAN BANKERS ASSOCIATION NUMBER MUST BE 9 CHARACTERS

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BANK ACCOUNT NUMBER TO BE CREDITED

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Checking or NOW Account
Full Net Pay.

Checking or NOW Account
Partial deposit.

Savings Account
Full or partial deposit.

New deposit/deduction

PAY-SAV #2
Partial deposit.

Change to deposit/deduction

PAY-SAV #3
Partial deposit.

**DO NOT USE
HYPHENS OR LEAVE
BLANKS BETWEEN
CHARACTERS IN
ANY FIELD.**

\$ _____ Amount deducted per pay.