

**THE COLLEGE OF WILLIAM AND MARY / VIMS
PAYROLL DIRECT DEPOSIT AUTHORIZATION**

Name (Please print or type)	Banner ID
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Please indicate the department and building name where this form can be returned for correction (if needed):

Department	Building Name
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Please indicate the type of transaction you are requesting:

You may have a total of two Direct Deposits.

1. Deposit	<input type="text" value="Enter a dollar amount or 'my net pay'"/>	each pay period into my	<input type="text" value="Select account type"/>	account with	<input type="text" value="Financial Institution"/>
2. Deposit	<input type="text" value="Enter a dollar amount or 'my net pay'"/>	each pay period into my	<input type="text" value="Select account type"/>	account with	<input type="text" value="Financial Institution"/>

If depositing into a checking account, please attach a voided check.
(it must include your pre-printed name and address)

If depositing to a Credit Union or into a savings account, please attach one of the following:

A completed direct deposit sign-up form 1199-a (available from your financial institution)
or
Correspondence from your financial institution listing your account and their routing number

Note: The information requested is necessary to identify your account and your financial institution's routing number.

I hereby authorize the College of William and Mary to initiate credit entries (deposits) and, if necessary, debit entries and adjustments for any credit entries made in error, to my account(s) listed above. To ensure proper distribution of my pay, I agree to immediately notify the Payroll department of any changes to this information. This direct deposit request will remain in effect until I notify, in writing, the Payroll department to terminate it, or until my employment with the College is terminated. I also attest, that the full amount of my direct deposit is not being forwarded to a bank in another country and that if at any point I establish a standing order for my receiving bank to forward the full direct deposit to a bank in another country, I will inform the Payroll department immediately.

Signature

Date

(This testament is being made as required by the Federal Office of Foreign Asset Control in support of U.S.C. Title 50, War & National Defense)

Return this form to: The College of William and Mary, Payroll Office, P.O. Box 8795, Williamsburg, VA 23187-8795