

# Cranston Public Schools

## Direct Deposit Authorization

Employee # \_\_\_\_\_ Social Security # \_\_\_\_\_

Name \_\_\_\_\_

PLEASE PRINT: First Middle Last

### **\*\*A Void Check Or Bank Documentation Is Necessary For Verification\*\***

#### Only One Bank Per Sheet

\_\_\_\_\_ 025 Sovereign  
\_\_\_\_\_ 120 Bank RI  
\_\_\_\_\_ 065 Washington Trust  
\_\_\_\_\_ 060 Citizens RI  
\_\_\_\_\_ 280 CMECU  
\_\_\_\_\_ 070 Centerville Sav. **Checking**  
\_\_\_\_\_ 052 Bank of America **MA**

\_\_\_\_\_ 024 Sovereign **Global**  
\_\_\_\_\_ 050 Bank of America **RI**  
\_\_\_\_\_ 225 Coastway Credit Unnion  
\_\_\_\_\_ 300 Pawtucket Credit Union  
\_\_\_\_\_ 235 Coventry Credit Union  
\_\_\_\_\_ 072 Centerville **Savings**

Other Banks Listed On Back Of Form

1. I hereby authorize and request you to:  START,  STOP,  CHANGE AMOUNT

SAVINGS or  CHECKING  Full Net Deposit or  Fixed Amount \$ \_\_\_\_\_

Routing # \_\_\_\_\_ Account # \_\_\_\_\_

2. I hereby authorize and request you to:  START,  STOP,  CHANGE AMOUNT

SAVINGS or  CHECKING  Full Net Deposit or  Fixed Amount \$ \_\_\_\_\_

Routing # \_\_\_\_\_ Account # \_\_\_\_\_

3. I hereby authorize and request you to:  START,  STOP,  CHANGE AMOUNT

SAVINGS or  CHECKING  Full Net Deposit or  Fixed Amount \$ \_\_\_\_\_

Routing # \_\_\_\_\_ Account # \_\_\_\_\_

*This authorization may be cancelled at any time by notification, in writing, to The Cranston Public Schools Payroll Office. Any such notification shall be effective only after Cranston Public Schools has had reasonable time to act upon it.*

Signature of Employee \_\_\_\_\_ Date \_\_\_\_\_

Entered By \_\_\_\_\_ Date \_\_\_\_\_