

**UNIVERSITY OF NEW MEXICO
 AUTOMATIC CHECK DEPOSIT AUTHORIZATION**
 (100% of Net Pay)

This form is used to add, change, or cancel a payroll automatic check deposit. It can ONLY be used for deposits that are for 100% of net pay. Payroll deadlines vary throughout the year. Please ask Payroll when this form will take effect. If changing banks or account numbers, a cancellation is not needed. This form will replace previous information.

 (PRINT: LAST NAME, FIRST NAME)

 (UNM ID NUMBER)

<u>CHECKING</u>	<u>SAVINGS</u>	_____
<input type="checkbox"/> START	<input type="checkbox"/> START	(NAME OF BANK or CREDIT UNION)
<input type="checkbox"/> CHANGE	<input type="checkbox"/> CHANGE	(ACCOUNT NUMBER)
<input type="checkbox"/> CANCEL	<input type="checkbox"/> CANCEL	(CITY, STATE where account was opened)

PLEASE NOTE THE FOLLOWING

A voided check or copy of a savings ID card from your bank must accompany this form for processing. If the documents are not provided, the request WILL NOT BE PROCESSED. It is the responsibility of the employee to notify the Payroll Office that an account has been closed or changed. This authorization will remain in effect unless otherwise notified. If the employee has no active assignment for 120 days or more, the direct deposit will be cancelled.

AUTHORIZATION

I have read the above and I authorize UNM to make the deposit described on this form each pay period. If funds to which I am not entitled are deposited into my account, I authorize UNM to direct the financial institution to return said funds.

 SIGNATURE

 DATE

 Day Time Phone #

STAPLE VOIDED CHECK HERE

John and Jane Doe
 2121 Spruce
 City, ST 11111

1001

Pay to the order of _____ \$ _____

Dollars

:111111111:

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