

**UNIVERSITY OF NEW MEXICO  
PAYROLL DEPARTMENT  
FIXED AMOUNT TO SAVINGS/CHECKING  
AUTOMATIC DEDUCTION AUTHORIZATION**

LAST NAME, FIRST NAME

SOCIAL SECURITY NUMBER

**USE THIS FORM ONLY FOR A FIXED DEDUCTION AMOUNT**

If you would like a fixed amount deposited to a different account, please fill in the proper information and submit to the UNM Payroll Department, seven(7) days PRIOR to the pay date.

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**NOTE:** We must be able to verify your bank routing number and account number.  
FOR CHECKING ACCOUNTS: ATTACH A "VOIDED" CHECK  
FOR SAVINGS ACCOUNTS: ATTACH A COPY OF YOUR SAVINGS "ID" CARD

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FINANCIAL INSTITUTION

BRANCH (STREET LOCATION/CITY)

ACCOUNT NUMBER

\$ AMOUNT

CHECKING  
START  
CANCEL  
CHANGE

SAVINGS  
START  
CANCEL  
CHANGE

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**I HAVE READ THE ABOVE AND I AUTHORIZE UNM TO MAKE THE DEPOSIT DESCRIBED ON THE 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.**

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SIGNATURE

DATE

PHONE

**Staple check/savings card here- Thank You**