

Direct Deposit of Payroll

How to Enroll for Direct Deposit:

• Read and complete this Authorization Agreement

Yes! Please sign me up for Direct Deposit of my Payroll.

- Provide details of your AAEC account
- Attach an original voided check
- Return the completed Authorization Agreement to your school secretary or Payroll Dept.

Authorization Agreement

I authorize my employer	,
(Employer name)	
(Employer address)	
(City, State, Zip)	
(Employer phone)	(Employer fax)
to deposit my paycheck each payday directly into the AAEC account named below. This authority will remain in force until I have given written notice that I have terminated it or until my employer has notified me that this deposit service has been terminated. I understand that I must give advance notice to allow reasonable time for my instructions to be executed. If ever an incorrect amount should be entered into my account, I authorize my employer or AAEC to make the appropriate adjustment. This authorization supercedes any I have made previously.	
Signature	Date
☐ Each payday, please d	deposit my entire net pay into the existing account listed below.
☐ Each payday, please d	leposit \$ into the existing account listed below.
AAEC Credit Union 1104 S. Arlington Heigh Arlington Heights, IL 60	
ABA # 271975391	
Name of Account Owner	r (please print)
Account #	Checking □ Savings □