AUTOMATIC PAYROLL DEPOSIT AUTHORIZATION CARD

LOS ANGELES UNIFIED SCHOOL DISTRICT

EMPLOYEE NUMBER ☐☐☐☐☐☐ ☐ ☐☐ _____

10 11 12 13 14 15 17 FI MI LAST NAME

I HEREBY AUTHORIZE THE LOS ANGELES UNIFIED SCHOOL DISTRICT OR ITS AGENTS, TO INITIATE DEPOSITS (AND/OR CORRECTIONS TO PREVIOUS DEPOSITS) TO THE FINANCIAL INSTITUTION INDICATED BELOW. THE INSTITUTION IS AUTHORIZED TO DEPOSIT AND/OR CORRECT THE AMOUNTS TO MY ACCOUNT. I MUST SUBMIT A NEW AUTHORIZATION CARD IF I CHANGE OR CLOSE MY ACCOUNT. THIS AUTHORIZATION REPLACES ANY PREVIOUSLY MADE BY ME AND IS TO REMAIN IN EFFECT UNTL A NEW AUTHORIZATION CARD IS SUBMITTED BY ME. PLEASE ALLOW 1 TO 2 PAY CYCLES FOR AUTHORIZATION TO BE EFFECTIVE.

BANK NAME _____ BRANCH _____ BANK PHONE NO._____

☐ CANCEL APD (50) ☐ CHANGE ACCOUNT NUMBER ☐ CHECK BOX IF SAVINGS ACCOUNT (51)

_____ School or Office _____ Date _____ Employee's Authorized Signature

DO NOT COMPLETE THIS SECTION - PAYROLL SERVICES BRANCH USE ONLY

TRANSIT NO. ☐☐☐☐ (24 25 26 27) ABA NO. ☐☐☐☐ (8 29 30 31) ACCOUNT NUMBER INFORMATION ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ (33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49)

Please forward this card, together with a voided check or savings account statement showing your account number to Payroll Services Branch, 333 South Beaudry Avenue, 27th Floor, Los Angeles, CA 90017.

Form L-60-950 rev. July 2008