

First State Bank of Uvalde  
Direct Deposit Payroll Service  
Debit Credit / Authorization Form

1. Download and complete the form.
2. Send original to payroll office (please do not fax, scan or email).

I hereby authorize Southwest Texas Junior College to initiate entries to my checking, savings and/or bank mobile card accounts at THE FINANCIAL INSTITUTION(S) listed below. The college may also, if necessary, initiate adjustments for any transactions credited in error. This authority will remain in effect until the college is notified by me in writing to **cancel** or **change** deposit information in such time as to afford reasonable opportunity to act accordingly.

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Employee Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Account Information**

The last item must be for the remaining amount owed to you. To distribute to more accounts, please complete another form. **Make sure to indicate what kind of account, along with amount to be deposited, if less than your total net paycheck.**

1. Bank Name / City / State: \_\_\_\_\_

Routing Transit #: \_\_\_\_\_ Account #: \_\_\_\_\_

Checking  Savings  Other I wish to deposit \$ \_\_\_\_\_ or  Entire Net Amount

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2. Bank Name / City / State: \_\_\_\_\_

Routing Transit #: \_\_\_\_\_ Account #: \_\_\_\_\_

Checking  Savings  Other I wish to deposit \$ \_\_\_\_\_ or  Entire Net Amount

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3. Bank Name / City / State: \_\_\_\_\_

Routing Transit #: \_\_\_\_\_ Account #: \_\_\_\_\_

Checking  Savings  Other I wish to deposit \$ \_\_\_\_\_ or  Entire Net Amount

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4. Bank Name / City / State: \_\_\_\_\_

Routing Transit #: \_\_\_\_\_ Account #: \_\_\_\_\_

Checking  Savings  Other I wish to deposit \$ \_\_\_\_\_ or  Entire Net Amount

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5. Bank Name / City / State: \_\_\_\_\_

Routing Transit #: \_\_\_\_\_ Account #: \_\_\_\_\_

Checking  Savings  Other I wish to deposit \$ \_\_\_\_\_ or  Entire Net Amount

**Please attach voided check, deposit slip or bank direct deposit form with account numbers to this form.**