



**RIVERSIDE COMMUNITY COLLEGE DISTRICT  
BUSINESS & FINANCIAL SERVICES  
PAYROLL DIRECT DEPOSIT AUTHORIZATION FORM**

☐ **New** Employee No. \_\_\_\_\_  
☐ **Change**  
☐ **Cancellation** Name: \_\_\_\_\_

| PAYROLL USE ONLY |  |
|------------------|--|
| Changes entered: |  |
| Completed by:    |  |

I HEREBY REQUEST THAT MY PAYROLL WARRANTS BE ELECTRONICALLY TRANSFERRED TO MY FINANCIAL INSTITUTION(S) AS NOTED BELOW:

You may elect to transfer funds to one, two, or three different accounts. Please indicate the amount(s) and account(s) as applicable:

1. Total Net Pay or \$ \_\_\_\_\_  
Financial Institution: \_\_\_\_\_  
Checking Account # \_\_\_\_\_  
Savings Account # \_\_\_\_\_  
(attach a voided check or portion of bank statement or letter from bank displaying the account & routing number)

2. Remaining Balance or \$ \_\_\_\_\_  
Financial Institution: \_\_\_\_\_  
Checking Account # \_\_\_\_\_  
Savings Account # \_\_\_\_\_  
(attach a voided check or portion of bank statement or letter from bank displaying the account & routing number)

3. Remaining Balance  
Financial Institution: \_\_\_\_\_  
Checking Account # \_\_\_\_\_  
Savings Account # \_\_\_\_\_  
(attach a voided check or portion of bank statement or letter from bank displaying the account & routing number)

I, \_\_\_\_\_ shall hold harmless and indemnify the Riverside Community College District, hereinafter referred to as District, and its officers and employees from any claim or demand of whatever nature including those based upon negligence of the District and its officers and employees, brought by any person, including any financial institution(s), against the District in its capacity as an employer concerning the Payroll Warrant Distribution provided by the District.

I hereby authorize the District to initiate credit entries and, if necessary, debit entries and adjustments for any credit entries in error to my account indicated above. I also authorize the financial institution(s) identified above to credit and/or debit the same to such account.

The request completed above is for the distribution of my payroll warrant(s) until rescinded in writing.

**DATE:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_