**WISCONSIN STATE LEGISLATURE**
LEGISLATIVE HUMAN RESOURCES OFFICE
Amanda Jorgenson, Human Resources Director

# ELECTRONIC DEPOSIT AUTHORIZATION

| EMPLOYEE'S LAST NAME (PRINT) | FIRST NAME | MI | SOCIAL SECURITY NO. |
|---|---|---|---|
| | | | |

| ☐ ORIGINAL SIGN-UP<br>☐ AUTHORIZATION CHANGE | NAME OF FINANCIAL INSTITUTION | CITY |
|---|---|---|

| TYPE OF ACCOUNT<br>☐ CHECKING ☐ SAVINGS | BANK TRANSIT NUMBER | ACCOUNT NUMBER |
|---|---|---|

**A VOIDED CHECK OR FORM FROM YOUR BANK MUST BE ATTACHED FOR ACCOUNT VERIFICATION**

I authorize the State of Wisconsin to electronically deposit funds I am entitled to receive to my account in the financial institution listed above. If funds to which I am not entitled are deposited in my account I authorize the State of Wisconsin to initiate a correcting (debit) entry.

When a person signs up for direct deposit, their data is made part of a file that is distributed to the Federal Reserve Bank for deposit into individual accounts. The Federal Reserve establishes the rules for direct deposit of checks. The main rule that affects when your check is deposited is that it is not supposed to be deposited on a bank holiday or a non-banking day for the Federal Reserve (i.e. weekend). The deposit is to be made on the next regular bank day (i.e. Monday after the weekend). When the 1st falls on a holiday or a weekend it is suggested that you contact your financial institution to see when the deposit of funds will be made.

This authorization will remain in effect until I cancel it in writing. I understand that the authorization may be rejected or discontinued by the State of Wisconsin at any time. If any of the above information changes, I will promptly complete a new authorization agreement.

Your Social Security Number is being used for accurate employee identification purposes.

| *Employee Signature | Date |
|---|---|
| | |

*** I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO NOTIFY THE LHRO OF ANY CHANGES IN MY BANK OR BANK ACCOUNT NUMBER(S). I UNDERSTAND THAT THIS MUST BE DONE AS SOON AS POSSIBLE TO AVOID ERRONEOUS DEPOSITS.**

Capitol National Bank

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BANK TRANSIT NUMBER — ACCOUNT NUMBER

PO BOX 7882 • MADISON, WI • (608) 316-9700