

CLA uses Direct Deposit to pay all employees.

Please complete this form with your current bank account information and return it to:

krcmak@clanet.org or turn in paper documents to

Community Living Alliance, 1414 MacArthur Road, Madison, WI 53714

DIRECT DEPOSIT AUTHORIZATION AGREEMENT

Community Living Alliance

I hereby authorize Community Living Alliance to initiate credit entries to my checking account, savings account, or financial institution indicated below and my financial institution, named below, to credit the same such account.

PRIMARY ACCOUNT (See instructions on Page 2)

Name of Financial Institution:		
City:	State:	Zip Code:
Financial Institution Routing #:		
Account #:	<i>Amount for Primary Account</i> Net of check:	Account Type:
	Dollar Amount: Percentage:	Checking Savings

SECONDARY ACCOUNT

Name of Financial Institution:		
City:	State:	Zip Code:
Financial Institution Routing #:		
Account #:	<i>Amount for Secondary Account</i> Net of check:	Account Type:
	Dollar Amount: Percentage:	Checking Savings

This authority is to remain in full force and effect until Community Living Alliance has received written notification from me of its termination in such time and in such manner as to afford Community Living Alliance and the Financial Institution(s) a reasonable opportunity to act upon it.

Employee Name (Print)

Employee Signature

Date Signed

*****PLEASE RETURN WITH A VOIDED CHECK*****

Instructions on Page 2

Below are instructions to assist you in completing the form accurately.

Please note **ALL mileage & expense reimbursements** will be direct deposited into your Primary Account.
Complete name of Financial Institution.

Complete name of city, state, and zip code where your branch is located.

Complete the routing number of your Financial Institution.

Complete the checking/savings account number.

In the Amount box, you have three options. You can designate a specific dollar amount to go into an account. You can designate a percentage of your check to go into each account. The total for the two accounts must add up to 100 percent. Or you may designate "Net of check," meaning all remaining funds from the check will go into this account.

Check appropriate box for checking or savings.

Print your name.

Sign your name.

Write date of submission.

****ALL information must be complete or the form will be returned****

Checking Accounts: If you are depositing funds into a checking account, write void across the front of a blank check or acquire a form from your financial institution that shows the routing and account numbers and attach it to the completed form to be submitted. Community Living Alliance requires this documentation to confirm the funds are going to the correct account.

Savings Accounts: If you are depositing funds into a savings account, you will need to get a form from your financial institution that has the routing and account numbers on it and attach it to the completed form to be submitted. Community Living Alliance requires this documentation to confirm the funds are going to the correct account.

FORM SUBMISSION OPTIONS

-Email completed forms to krcmak@clanet.org

-Submit paper forms in person or mail to:

Community Living Alliance, Attn: Payroll Department, 1414 MacArthur Road, Madison, WI 53714

Please inform the Payroll Department if there are any changes to your direct deposit accounts. If the account(s) you have designated has been closed or in other unique situations, Community Living Alliance may need to temporarily pay you via a physical check. In such circumstances, you may need to provide Community Living Alliance with a new Direct Deposit Authorization Agreement form as soon as possible.

If you have any questions regarding this form or direct deposit, please feel free to contact our Payroll Department at (608) 240-8521 or via email at krcmak@clanet.org – Kelli Krcma.