Request for Automatic Deposit (ACH Credit)

I hereby request that the **CLEVELAND STATE UNIVERSITY PAYROLL DEPARMENT** initiate credit entries and/or debit entries and adjustments for any credit entries in error to my account indicated below and I further request the FINANCIAL INSTITUTION named below, to credit and/or debit the same to such account.

ONCE COMPLETED IN FULL SCAN/EMAIL THIS FORM TO: payroll@csuohio.edu for processing.

Primary Financial Institution

Name: _____

City: _____ State: _____ Zip: _____

Bank Acct. No.: _____ Checking: ____ or Savings: ____

Routing No.: _____

Deposit Type: ***THE PRIMARY FINANCIAL INSTITUTION IS ALWAYS NET OF BALANCE.***

Secondary Financial Institution

Name: _____

City: _____ State: _____ Zip: _____

Bank Acct. No.: _____ Checking: ____ or Savings: ____

Routing No.: _____

Deposit Type: Percentage: _____ % or Amount: $_____ per pay period.

☐ **PLEASE CHECK HERE IF YOU ARE HAVING PAYROLL FUNDS MOVED FROM YOUR U.S. BANK TO A NON-U.S. BANK AFTER YOUR DEPOSIT HAS BEEN MADE**

I understand and agree that this request will remain in full force and effect until the Cleveland State University Payroll Department has received written notification from me of any change or termination in this request in such a manner as to accord the Cleveland State University Payroll Department a reasonable opportunity to act on this notification.

Name: _____ CSU ID: _____
(Please Print)
Best Contact Phone Number/Campus Ext.: _____

Date: _____ Signature: _____

STAPLE VOIDED CHECK TO BACK OF CARD

FOR OFFICE USE ONLY: EFFECTIVE DATE: _____ PAY CYCLE: BW SW M INITIALS:_____

UPDATED 4/23