



# NEW MEXICO HIGHLANDS UNIVERSITY

## Direct Deposit Authorization

This form is for use of adding, changing, or cancelling a payroll or accounts payable direct deposit. For employment purposes (payroll), this form must be submitted to the Human Resources/Payroll Department. If you are only requesting changes/additions for Accounts Payable (reimbursements), submit this form to the Business Office. This form will replace previous information.

\_\_\_\_\_  
(Print: Last Name, First Name)

\_\_\_\_\_  
(ID Number or SSN)

Amounts can be distributed to multiple accounts. For each account, please complete the information below:

### Allocation #1

<u>CHECKING</u>	<u>SAVINGS</u>	Accounts Payable <input type="checkbox"/>	Payroll <input type="checkbox"/>
<input type="checkbox"/> START	<input type="checkbox"/> START	_____ (Name of Financial Institution)	
<input type="checkbox"/> CHANGE	<input type="checkbox"/> CHANGE	_____ (Bank Routing Number)	_____ (Account Number)
<input type="checkbox"/> CANCEL	<input type="checkbox"/> CANCEL	_____ (Dollar Amount or Percentage)	

### Allocation #2

<u>CHECKING</u>	<u>SAVINGS</u>	Accounts Payable <input type="checkbox"/>	Payroll <input type="checkbox"/>
<input type="checkbox"/> START	<input type="checkbox"/> START	_____ (Name of Financial Institution)	
<input type="checkbox"/> CHANGE	<input type="checkbox"/> CHANGE	_____ (Bank Routing Number)	_____ (Account Number)
<input type="checkbox"/> CANCEL	<input type="checkbox"/> CANCEL	_____ (Dollar Amount or Percentage)	

### PLEASE NOTE THE FOLLOWING

A voided check, copy of a savings ID card or information form from your financial institution must accompany this form for processing. If a document is not provided the request, WILL NOT be processed. This authorization will remain in effect unless otherwise notified or termination of employment. The authorization form and documents can be transmitted as follows:

Human Resources/Payroll Email: dspicer@nmhu.edu or aatrujillo@nmhu.edu Building: Mass Communication West, (across from Ilfeld Auditorium). Business Office Email: apdirectdeposit@nmhu.edu Building: Purchasing Building (Accounts Payable/Student Account Reimbursements only)
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Completed documents are necessary to process payments (timesheets, vouchers, clearance forms, etc.) must be received by published deadlines in order to process automatic deposits on scheduled dates.

### AUTHORIZATION

I have read the above and I authorize NMHU to make the deposit described on this form. If funds to which I am not entitled are deposited into my account, I authorize NMHU to direct the financial institution to return said funds.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Work Phone

\_\_\_\_\_  
Home Phone