

Marshall Payroll Direct Deposit - Set-up Form

Marshall University Payroll Office - Old Main Room 203 - One John Marshall Drive - Huntington, WV, 25755
Telephone: (304) 696-6457 FAX: (304) 696-3289 www.marshall.edu

PLEASE FORWARD COMPLETED FORM TO THE MARSHALL UNIVERSITY PAYROLL OFFICE.

EMPLOYEE INFORMATION:

First Name: _____ Middle Initial: _____ Last Name: _____
MU 901 ID #: _____ Phone Number: _____

PAYROLL PRIMARY ACCOUNT:

Choose one:

Bank Name: _____ Checking - Attach supporting documentation
Routing #: _____ Dollar Amount: _____
Account #: _____ Savings \$ _____

PAYROLL SECONDARY ACCOUNT(S): (If you have more than two secondary accounts, please complete an additional form.)

Choose one:

Bank Name: _____ Checking - Attach supporting documentation
Routing #: _____ Dollar Amount: _____
Account #: _____ Savings \$ _____

Choose one:

Bank Name: _____ Checking - Attach supporting documentation
Routing #: _____ Dollar Amount: _____
Account #: _____ Savings \$ _____

I hereby authorize the State of West Virginia, hereafter called STATE, to initiate credit entries to the account(s) as indicated above and to initiate debit entries as adjustments for credit entries made in error. The STATE will not be responsible for any loss that may arise solely by reason of error, mistake or fraud regarding information provided on this form. This authority is to remain in force and effect until I have filed a direct deposit change form in a timely manner, so as to afford the STATE a reasonable opportunity to act. I further acknowledge that my employee pay stub will be made available to me through a secure internet website.

Employee's Signature: _____ Date: _____

Payroll Office Personnel:

By entering this information into the Marshall University Payroll Application, you are certifying that the information provided and any attachment to the form has been received from the employee whose signature appears above.

Date Form Rec'd: _____ Rec'd By: _____

Date Entered: _____ Entered By: _____