

DIRECT DEPOSIT CANCELLATION FORM

Business Services – Payroll Department
406 SE Alvarez Ave – PO Box 670
Ocala, FL 34478-0670 (352) 671-7595

Effective immediately, please stop my direct deposit transaction into the following account:

NAME OF BANK: _____

BANK ACCOUNT NUMBER: _____

Employee Name: _____

Employee Number: _____

Employee Signature: _____
(District requires a physical signature)

Date: _____

******IMPORTANT******

If you are changing to a new account, please be aware that there will be a delay of one pay period, in which you will be issued a regular paycheck, before you begin direct depositing into your new account.

IF YOU ARE A NEW HIRE AS OF JULY 1, 1999, YOU MUST SUBMIT NEW ACCOUNT INFORMATION WITHIN 30 DAYS TO THE PAYROLL DEPARTMENT. IT IS A CONDITION OF EMPLOYMENT AND THEREFORE MANDATORY THAT YOU PARTICIPATE IN DIRECT DEPOSIT ON A CONTINUOUS BASIS.