

Nadia Romano Superintendent

Gary E. Molenaar Assistant Superintendent Learning/Educational Services 1660 Stelton Road Piscataway, NJ 08854 (732) 777-9848 <u>http://www.escnj.us</u>



Kai_Li Pao Acting Business Administrator

Matthew J Scanlon Ed.D Assistant Superintendent of Operations/Security

Attach a VOIDED CHECK for deposit into checking account.

Pay dates are the 15th and 30th

DIRECT DEPOSIT FORM

Authorization Agreement for Automatic Deposits (Credits)

Check One:

[] New Authorization [] Authorization to transfer

o transfer [] Change of Account Number

[] Cancellation to another depository

I hereby Authorize the Educational Services Commission of New Jersey to initiate by electronic means direct deposits (credit Entries) of my net earnings to my [] Checking or [] Savings account in the entity named below ("Depository") and to initiate, if Necessary, debit entries and adjustments for any credit entries in error. I authorize the Depository to accept and to credit and/or Debit the amount of such entries to my account.

Bank Name			
City	State	Zip Code	
Transit/ABA Number (Must be 9 Digits)	Account Numbe (Enter Only Nur	er nbers, Letters and Hyphens)	If direct deposit is to a checking account attach a voided blank personalized check.
Such time and in such ma	anner as to afford th	e commission and the Depository	eived written notification from me of its termination in y a reasonable opportunity to act on it and in no event e Commission of the Depository prior to its receipt.
Employee			
Employee's Signature			Date
Department Administ	rator's Signature		Date

Academy Learning Center • Adult Community Services • Bright Beginnings Learning Center • Center for Lifelong Learning • Future Foundations Academy • NuView Academy • Pathways to Adult Living • Piscataway Regional Day School • Turning Point Academy