UNIVERSITY OF OREGON Business Affairs Office

Clear Form

Direct Deposit Authorization

(Campus mail to Payroll or Student Loans: US Mail to University of Oregon Business Affairs PO Box 3237 Eugene, OR 97403-0237)
(Please do not email private banking information)

☐ ***Start*** ☐ ***Stop*** ☐ ***Reactivate*** ☐ ***Change***

UO ID: _____ **Name:** _____ (Last) _____ (First) _____ (Middle)

Phone: _____ **UO Email:** _____ (UO email address)

Check One: ☐ **Payroll Only** ☐ **A/P Only** (Travel, reimbursements, grant advances, non-athletic stipends) ☐ **Both**

_____ (Name of Bank or Credit Union) _____ (Account Number) ☐ **Checking** ☐ **Savings**

Note: We are unable to offer the option of investment banks, money market accounts or foreign banks for direct deposit.

Optional Distributions for Payroll Deposits:

Fixed Amount	Name of Bank or Credit Union	Account Number	
$ _____	_____	_____	☐ Checking ☐ Savings
$ _____	_____	_____	☐ Checking ☐ Savings
$ _____	_____	_____	☐ Checking ☐ Savings

I authorize the University of Oregon to make the payments indicated above via direct deposit to my account(s) in the financial institution(s) named. I authorize the financial institution(s) to accept any credit entries to the above account(s) initiated by the University of Oregon. If funds to which I am not entitled are deposited to my account, I authorize the University of Oregon to direct the financial institution(s) to return said funds. I acknowledge that this direct deposit authorization must comply with Oregon and U.S. law.

I understand that three weeks may pass before this authorization takes effect. I understand that the University needs up to three business days to make the transfer to my account(s) after funds become available. I understand that it is my responsibility to verify that payments have been credited to my account(s) and that the University of Oregon assumes no liability for overdrafts for any reason. I understand that in the event my financial institution is not able to deposit any transfer into my account due to any action I take, the University cannot issue the funds to me until the funds are returned to the University by my financial institution.

I understand that this authorization will override any previous authorization and will remain in effect until a) revoked by my written request; or b) six months after the termination of my last appointment at the University; or c) six months after my last student registration.

☐ I would like to select the “paperless” option and view my earning statement each month on DuckWeb.

Will this money ultimately be routed to a foreign bank account?

☐ Yes, this deposit will ultimately be routed to a bank outside the US (not common).

☐ No, this deposit is going only to the bank I already designated above.

Note: If the destination of your direct deposit payment changes, please login to DuckWeb and update your direct deposit record.

Signature _____ Date _____

Attach voided check(s) or document(s) from your bank that provide routing and account numbers.

Deposit slips and ATM receipts are NOT acceptable.

For questions please call Payroll (541) 346-3151.