



Lehigh Carbon

COMMUNITY COLLEGE

4525 Education Park Drive
Schnecksville, PA 18078-2502

610-799-1738
610-799-1566 (fax)
www.lccc.edu

AMAZON PROGRAM DIRECT DEPOSIT FORM FOR ACCOUNTS PAYABLE

Student Instructions:

To enroll in direct deposit, complete this form and return to Accounts Payable. Attach a voided check for checking account, if possible.

STUDENT NAME _____

STUDENT ADDRESS _____

STUDENT L# _____ PHONE _____

E-MAIL ADDRESS TO RECEIVE NOTIFICATION _____

I hereby authorize Lehigh Carbon Community College to initiate **credit** entries to my
 Checking Account **Savings Account** (select one) indicated at the depository financial institution noted below. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of the U.S. law.

FINANCIAL INSTITUTION NAME

(Name of bank where student has account)

_____ CITY

_____ ROUTING NUMBER

FINANCIAL INSTITUTION ADDRESS

_____ STATE ZIP CODE

_____ STUDENT'S ACCOUNT NUMBER

This authority is to remain in full effect until company has received written notification from me of its termination in such time and in such manner as to afford company and depository a reasonable opportunity to act on it.

_____ NAME OF STUDENT *(Please Print)*

_____ SIGNATURE

_____ DATE

NOTE: IN ORDER TO REVOKE AUTHORIZATION, STUDENT MUST PROVIDE WRITTEN NOTIFICATION TO THE ORIGINATOR.