

**DIRECT DEPOSIT AUTHORIZATION AND INPUT FORM**

CO-1040 REV. 11/03

STATE OF CONNECTICUT  
 OFFICE OF THE COMPTROLLER  
 PAYROLL SERVICES DIVISION  
 55 ELM STREET  
 HARTFORD, CONNECTICUT 06106

**INSTRUCTIONS**

Please read carefully prior to completing this application.

(1) <b>TYPE OF ACTION</b> <input type="checkbox"/> ADD <input type="checkbox"/> CHANGE <input type="checkbox"/> DELETE
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DEPARTMENT ID	EMPLOYEE NUMBER	EMPLOYEE NAME
(2) B O R 7 8 9 0 0	(3)	(4)

TO BE COMPLETED BY PAYROLL

DEPARTMENT	PERIOD ENDING DATE
(5)	(6)

**DIRECT DEPOSIT ACCOUNT INFORMATION**

BANK NAME
(7)

ACCOUNT NUMBER	ACCT TYPE
(8)	(9)

C = CHECKING  
 S = SAVINGS

TO BE COMPLETED BY PAYROLL

ROUTING TRANSIT NUMBER	START DATE
(10)	(11) YY MM DD

(Must be 4 weeks greater than period end date.)

**PLEASE READ THE FOLLOWING CAREFULLY**

I HEREBY AUTHORIZE THE STATE OF CONNECTICUT ("STATE") TO ELECTRONICALLY DEPOSIT MY NET SALARY TO THE BANK ACCOUNT NAMED ABOVE. THIS AUTHORIZATION IS TO REMAIN IN FORCE UNTIL THE STATE HAS RECEIVED WRITTEN NOTIFICATION FROM ME OF ITS TERMINATION IN SUCH TIME AND MANNER AS TO AFFORD THE STATE, AND THE BANK NAMED ABOVE, A REASONABLE OPPORTUNITY TO ACT UPON IT. IN THE EVENT THAT THE STATE NOTIFIES THE BANK THAT FUNDS WHICH I DID NOT EARN HAVE BEEN DEPOSITED TO MY ACCOUNT IN ERROR, I HEREBY AUTHORIZE AND DIRECT THE BANK TO RETURN SAID FUNDS TO THE STATE AS SOON AS POSSIBLE. IN THE EVENT SUCH UNEARNED FUNDS HAVE BEEN DRAWN FROM THAT ACCOUNT SO THAT RETURN OF THOSE FUNDS BY THE BANK TO THE STATE IS NOT POSSIBLE, I HEREBY AUTHORIZE THE STATE TO RECOVER THOSE FUNDS BY DEDUCTING THE AMOUNT OF SAID UNEARNED FUNDS FROM ANY FUTURE SALARY PAYMENTS FROM THE STATE UNTIL THE AMOUNT OF THE UNEARNED DEPOSIT HAS BEEN RECOVERED IN FULL. IN THE EVENT MY EMPLOYMENT WITH THE STATE IS TERMINATED FOR ANY REASON WHATSOEVER, AND IF AT THE TIME OF SUCH TERMINATION I HAVE HAD UNEARNED PAY AUTOMATICALLY DEPOSITED IN MY CHECKING/SAVINGS ACCOUNT, I WILL IMMEDIATELY REPAY THE STATE THE FULL AMOUNT OF SUCH UNEARNED PAY. I FURTHER AGREE THAT IF I DO NOT IMMEDIATELY REPAY SUCH UNEARNED PAY, I WILL BE PERSONALLY LIABLE FOR ALL COSTS OF COLLECTION, INCLUDING REASONABLE ATTORNEY'S FEES INCURRED BY THE STATE IN THE COLLECTION OF SUCH UNEARNED PAY, TOGETHER WITH THE MAXIMUM INTEREST PERMITTED BY LAW.

**I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE AGREEMENT.**

(13) SIGNATURE

DATE