

435 Glenwood Rd. Binghamton, NY 13905

## **ACH/Direct Deposit Enrollment Form**

for Reimbursements ONLY (NOT payroll)

Broome-Tioga BOCES will send payments to you electronically as per information provided via this form. This pertains to reimbursement payments ONLY (mileage, conference/workshop expenses, course reimbursements).

Employee Name: Employee Address:		
Select <b>one</b> option:	(if paycheck is to more	nt as payroll direct deposit than one account, the account where deposited will be used)
		r than payroll direct deposit /Address, Routing, Account info below)
Name of Bank:		
Address:		
Routing Number:		
Account Number:		
Select <b>one</b> :	Checking Account	
	Savings Account	
I herby request that BOC	ES deposit such funds as I requ	est to the above bank/credit union.
_	s employees and agents harmle omissions of the BOCES, its emp	ess from any financial loss which ployees or agents including
		Please return completed form to: ipecheny@btboces.org
Signature		or
		Broome Tioga BOCES Attention: Irina Pecheny
l	Date	435 Glenwood Rd. Binghamton, NY 13905

Please call 607-766-3820 if you have questions

or concerns.