

(For Office Use Only) Effective Date _____ Pay Cycle: BW SM M Initials _____

AUTHORIZATION FOR PAYROLL CARD

I hereby request that the CLEVELAND STATE UNIVERSITY PAYROLL DEPARMENT transfer my net pay to a U.S. BANK PAYROLL CARD and that this card be mailed to me at the home address maintained in CSU's Human Recources Information System. Cleveland State University will provide U.S. Bank with social security numbers and home phone numbers as part of the Payroll Card record.

Name		CSU ID
	(Please Print)	
CSU Extension	Mother's Maiden Name	
		(U. S. Bank requirement)
Date	Signature	
received written notificati		ct until the Cleveland State University Payroll Department ha s request in such manner as to accord the Cleveland State otification.

BANK ROUTING NO_	_121139313_			BANK ACCT. NO			XXXXXXXX	
FINANCIAL INST U.	S. BANK	CITY	CLEVELAND	STATE	ОН	ZIP	44115	