

# EMPLOYEE DIRECT DEPOSIT PAYROLL CARD

For Payroll and Expense Reimbursement

## Sign Up Now!

Sign up online at the SD  
Employee/Manager Self Service Center,  
<https://bfm.sd.gov/empselfservice/sea.asp>

Or

Complete the direct deposit form and  
return it to your personnel representative.

### EMPLOYEE'S AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT

I hereby authorize the state of South Dakota to initiate direct deposit of my payroll/reimbursement check into the depository (ies) which I have indicated below, and to initiate any debit or credit entries to my account that may be needed to correct any errors that have occurred. (NOTE: Financial Institution #1 will be your default account.)

**MANDATORY** NET ACCOUNT (DEFAULT for Payroll and Expense Reimbursement)	
<b>1 Financial Inst:</b>	Address:
Transit ABA No.:	City State
( ) Checking or ( ) Savings Account No.	
Deduction Amt: <b>NET AMOUNT</b>	
<b>OR Send me a Payroll Card for my NET amount (Check here and leave above blank)</b>	
<b>Please use this account for travel expense reimbursement (Check here)</b>	
OPTIONAL ACCOUNT	
<b>2 Financial Inst:</b>	Address:
Transit ABA No.:	City State
( ) Checking or ( ) Savings Account No.	
Deduction Amt: \$ OR %	
<b>OR Send me a Payroll Card for this amount \$</b>	
<b>Please use this account for travel expense reimbursement (Check here)</b>	
OPTIONAL ACCOUNT	
<b>3 Financial Inst:</b>	Address:
Transit ABA No.:	City State
( ) Checking or ( ) Savings Account No.	
Deduction Amt: \$ OR %	
<b>Please use this account for travel expense reimbursement (Check here)</b>	

Please attach a voided check (s) to ensure accurate account information.

- New direct deposit accounts go through a pre-notification process where a zero amount transaction is sent through the system to verify bank and account information. **UNTIL THIS PROCESS IS COMPLETED, YOU MAY RECEIVE A NEGOTIABLE CHECK IN THE MAIL. PLEASE ENSURE THAT WE HAVE YOUR CORRECT MAILING ADDRESS.** If you move, please notify your personnel representative. If you have questions concerning this process, contact your personnel representative.

\*\*Send my payroll and reimbursement e-stub to my email address.

⇒ E-Mail: \_\_\_\_\_

Your e-mail address can be other than your work e-mail address. Use a semi-colon to separate multiple addresses. Ex. [John.doe@state.sd.us](mailto:John.doe@state.sd.us); [xxxx@xxx.xxx](mailto:xxxx@xxx.xxx)

Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_

SSN: \_\_\_\_\_ EMP#: \_\_\_\_\_ Date: \_\_\_\_\_