wvOASIS PAYROLL DIRECT DEPOSIT CHANGE FORM INSTRUCTIONS

To process a Payroll Direct Deposit Change request the employee must do the following:

1. Provide First and Last Name
2. Provide wvOASIS Employee ID - (Can be provided by your payroll department.)
3. Provide Social Security Number
4. Complete, Sign, Date the form and Print your name below the signature.
5. Deliver the form with your account documentation to your State Agency Payroll Department for completion.

Payroll Primary Account

1. To Change Account Information From, list the name of the Bank your net pay is currently being deposited as well as the Routing and Account number. Indicate whether the account is a checking or savings. **To help prevent a delay in receiving your pay, do not close your old account until you have received a payment in the new account.**

2. List the name of the **new** Bank to which your funds will be deposited as well as the Routing and Account number.

3. Indicate whether the account is checking or savings. **Please select one box ONLY!**

   a. **Checking**
      Attach a voided check, Financial Institution statement, or a letter from the Financial Institution (on FI letterhead) listing the account information, printed name, and signature of the Financial Institution representative, title and contact information.

   b. **Savings**
      Attach a Financial Institution statement or letter from the Financial Institution (on FI letterhead) listing the account information, printed name, and signature of the Financial Institution representative, title and contact information.

Payroll Secondary Account(s)

1. List the name of the Bank your secondary amount is currently being deposited as well as the Routing, and Account number.

2. List the current dollar amount that is being deposited to your secondary account.

3. Indicate whether you want to Change Account Information From or Change Amount Only. **Please select one box ONLY!**

4. If you want to change your current secondary account on file, please select the Change Account Information From box.

5. If you want to keep the same account and change the dollar amount select the Change Amount Only box.

6. If you select the Change Account Information From box, you must list the new Bank Name, Routing and Account Number as well as the dollar amount under the Change Account Information To section.

Payroll Secondary Account(s) - Continued

7. Indicate whether the **new** account is checking or savings. **Mark one box ONLY!**

  a. **Checking**
  Attach a voided check, Financial Institution statement, or a letter from the Financial Institution
  (on FI letterhead) listing the account information, printed name, and signature of the
  Financial Institution representative, title and contact information.

  b. **Saving**
  Attach a Financial Institution statement or letter from the Financial Institution
  (on FI letterhead) listing the account information, printed name, and signature
  of the Financial Institution representative, title and contact information.

3. Changes to more than two secondary accounts will require an additional form to be completed and signed.

To complete the employee's Payroll Direct Deposit request, the State Agency Payroll Department must do the following:
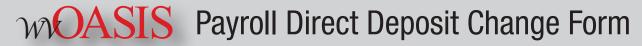
1. Provide the State Agency Name.
2. Provide a Phone Number.
3. Sign and Date the form confirming it was received from the employee.
4. Review the form and make sure it has been completed.
5. Attach the form along with the documentation to the NPD document before submitting into the workflow.

wvOASIS Payroll Direct Deposit Change Form

West Virginia State Auditor's Office, ePayments Division
www.wvsao.gov

First Name: MI: Last Name:

wvOASIS
Employee ID:

SSN:

PAYROLL PRIMARY ACCOUNT CHANGE

CHANGE ACCOUNT INFORMATION FROM

BANK NAME:

ROUTING #:

ACCOUNT #:

Checking - Attach a voided check

Saving

CHANGE ACCOUNT INFORMATION TO

BANK NAME:

ROUTING #:

ACCOUNT #:

Checking - Attach a voided check

Saving

PAYROLL SECONDARY ACOUNT(S) If you have more than two secondary accounts, please complete an additional form.

CURRENT ACCOUNT INFORMATION ON FILE

BANK NAME:

ROUTING #:

ACCOUNT #:

Checking - Attach a voided check   Change acct info from

Saving   Change Amt only

Dollar Amt:

CHANGE ACCOUNT INFORMATION TO

BANK NAME:

ROUTING #:

ACCOUNT #:

Checking - Attach a voided check   Change acct info from

Saving   Change Amt only

Dollar Amt:

wvOASIS Payroll Direct Deposit Change Form

West Virginia State Auditor's Office, ePayments Division
www.wvsao.gov

◗ PAYROLL SECONDARY ACCOUNT(S) CONTINUED

CURRENT ACCOUNT INFORMATION ON FILE

BANK NAME:

ROUTING #:

ACCOUNT #:

Checking - Attach a voided check

Saving

Dollar Amt:

Change acct info from

Change Amt only

CHANGE ACCOUNT INFORMATION TO

BANK NAME:

ROUTING #:

ACCOUNT #:

Checking - Attach a voided check

Saving

Dollar Amt:

Change acct info from

Change Amt only

I hereby authorize the State of West Virginia, hereinafter called STATE, to initiate credit entries to the account(s) as indicated above and to initiate debit entries as adjustments for credit entries made in error. The STATE will not be responsible for any loss that may arise solely by reason of error, mistake or fraud regarding information provided on this form. This authority is to remain in full force and effect until I have filed a new payroll form in a timely manner so as to afford the STATE a reasonable opportunity to act. I further acknowledge that my employee pay stub will be made available to me through a secure internet web site.

Print Name:

Employee Signature: Date:

To be completed by the State Agency Payroll Department

State Agency: Phone:

I hereby certify I am a payroll representative of the herein named State Agency and that being so authorized I do certify the information listed and attached with this authorization has been received from the employee indicated above.

Payroll Representative's Signature:

Date: