State of Kansas Department of Administration DA-184 (Rev. 04-2017)

# AUTHORIZATION FOR DIRECT DEPOSIT OF EMPLOYEE PAY AND/OR EMPLOYEE TRAVEL AND EXPENSE

(Please print or type all information)

Employee Info				
Emplo	oyee ID	Name (Last, First, MI)		
Section A: Enr	ollment or Char	nge Authorizatio	on	
and Expense (T maximum of one the authorization 'International ACH	<b>&amp;E)</b> is mandatory account for T&E a form as needed. If I Bank' checkboxs	y. At least one age and a maximum of the direct deposit should be selected	ccount section ten accounts fo may result in th	or account changes. Direct deposit for Payroll and Travel needs to be completed. An employee may select up to a r Payroll. The employee should complete additional pages of the transfer of funds to a financial agency outside the U.S., the
Check if additi	onal pages are att	ached		
	New enrollment	Account char	· ·	Effective date:
Select one or both	n: Payroll	Travel and Ex	xpense (mark or	nly one account in the 'Use for Travel and Expense' box)
Bank Information	on			Cancellation of Account
Routing #				Cancel for Payroll
Bank Name	I ACH Bank (aslast	if deposits to this accou	unt many	Cancel for Travel and Expense
		al institution outside of t		
Account Distrib	oution Data			Travel and Expense
Account Type	Checkin	g Sa	avings	Use for Travel and Expense (only one account may be selected for Travel and Expense payments)
Priority #		Balance		Solected for Traver and Expense payments)
Account #				
% Net Pay/Amo	unt*			
Bank Information	on			Cancellation of Account
Routing #				Cancel for Payroll
Bank Name				Cancel for Travel and Expense
		if deposits to this accou al institution outside of t		
Account Distrib	oution Data			Travel and Expense
Account Type	Checkin	g Sa	avings	Use for Travel and Expense (only one account may be selected for Travel and Expense payments)
Priority #		Balance		
Account #				
% Net Pay/Amo	unt*			
payment directly the Financial Inst receives written n	to the account(s) i itution to post thes	ndicated above an	d to correct any hese accounts.	deposit my employee payroll and/or travel and expense related errors that may occur from these transactions. I also authorize This authorization is to remain in force until the State of Kansas
*Payroll only			EMPLO	YEE SIGNATURE DATE
Section B: Age	ency Certification	n		
I, the undersigner true and correct.	d, certify that I hav	e verified the emp	ployee is the rec	quester of the change of information and that the information is
Signature:			Date:	Print name:
Agency number:		Department ID: _		Phone number:
Method of verifica	ation:			

# Section A: Enrollment or Change Authorization (continued)

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Routing #		
Bank Name		
Internationa	al ACH Bank (select if deposits to this account may	
result in the transfer of funds to a financial institution outside of the U.S.)		

#### **Cancellation of Account**

Cancel for Payroll
Cancel for Travel and Expense

#### **Account Distribution Data**

Account Type	Checking	Savings			
Priority #	Balance				
Account #					
% Net Pay/Amo	ount*				

#### **Travel and Expense**

**Use for Travel and Expense** (only one account may be selected for Travel and Expense payments)

#### **Bank Information**

Routing #	
Bank Name	

International ACH Bank (select if deposits to this account may result in the transfer of funds to a financial institution outside of the U.S.)

# **Cancellation of Account**

Cancel for Payroll

Cancel for Travel and Expense

#### **Account Distribution Data**

Account Type		Checking	Savings
Priority #		Balance	<b>)</b>
Account #			
% Net Pay/Amount*			

# Travel and Expense

**Use for Travel and Expense** (only one account may be selected for Travel and Expense payments)

#### **Bank Information**

Routing #				
Bank Name				
International ACH Bank (select if deposits to this account may				
result in the transfer of funds to a financial institution outside of the U.S.)				

# **Cancellation of Account**

Cancel for Payroll
Cancel for Travel and Expense

# **Account Distribution Data**

Account Type		Checking	Savings
Priority #		Balance	
Account #			
% Net Pay/Amount*			

# Travel and Expense

**Use for Travel and Expense** (only one account may be selected for Travel and Expense payments)

#### **Bank Information**

Routing #	
Bank Name	
Internationa	al ACH Bank (select if deposits to this account may
result in the tran	sfer of funds to a financial institution outside of the LLS \

# Cancellation of Account

Cancel for Payroll

Cancel for Travel and Expense

#### **Account Distribution Data**

Account Type		Checking	Savings
Priority #		Balance	
Account #			
% Net Pay/Amount*			

# Travel and Expense

Use for Travel and Expense (only one account may be selected for Travel and Expense payments)

I authorize the State of Kansas to initiate accounting transactions to deposit my employee payroll and/or travel and expense related payment directly to the account(s) indicated above and to correct any errors that may occur from these transactions. I also authorize the Financial Institution to post these transactions to these accounts. This authorization is to remain in force until the State of Kansas receives written notice from me to cancel or change this authorization.

*Payroll only		
, ,	EMPLOYEE SIGNATURE	DATE

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#### Form Instructions

# **Employee Information**

Employee ID - This is the employee's unique identification number. It is a letter followed by ten digits.

Name - This is the employee's name, as it exists in Payroll or Travel and Expense.

#### Section A: Enrollment or Change Authorization

Check box if more than two accounts are being used and additional pages are attached.

Check box to indicate whether this is a new enrollment in direct deposit or an account change.

Select Payroll box if direct deposit is for employee pay. Select Travel and Expense box to indicate the account is to be used to deposit travel and expense related payments. Please note: only **one** account can be used for Travel and Expense.

Effective date - This may be the current date or any date prior to the paycheck issue date. Requests must allow sufficient time for processing by final payroll cutoff date for the pay cycle.

#### **Bank Information**

Enter bank routing transit number for each account.

Enter bank name for each account.

If the direct deposit may result in the transfer of funds to a financial institution outside the U.S., the International ACH Bank box should be checked.

#### **Account Distribution Data**

Account type - Each account should be checked to indicate whether it is a checking or a savings account. If there is any question on account type, the employee should contact their financial institution.

Priority - This is a required field when multiple accounts are chosen for Payroll. Distributions are made to accounts in order of priority, (e.g. 1, 2, 3). Lower priority numbers are deposited first. Any flat dollar amounts must have lower priority numbers than any percentages of net pay. This will ensure the flat dollar amounts are deposited first.

Balance - When multiple accounts are chosen for Payroll, one account should be designated as the "balance" account to receive any remaining funds left after all other distributions. A balance account is not needed if the deposit is 100% to one account.

Account # - This is the account number of the checking or savings account to which the deposit should be made. For successful and timely direct deposit, it is very important that banking information is accurate. If there are any questions on bank or account numbers, the employees should contact their financial institution.

% Net Pay/Amount - Enter either a percentage of net pay or a dollar amount to be distributed to the account.

#### **Cancellation of Account**

To cancel a direct deposit, check the appropriate box for Payroll or Travel and Expense.

#### **Travel and Expense**

Check box to indicate this account is for Travel and Expense payments. Please note: only one account can be selected for Travel and Expense payments.

Additional pages for more accounts may be used as needed. An employee may select up to a maximum of ten accounts for the deposit of Payroll and one account for Travel and Expense. Each page should be signed and dated.

#### **Section B: Agency Certification**

**For Agency use only.** Agency HR/Payroll staff are required to verify the data in addition to verifying the data was received from the employee who is authorized to make changes to his/her direct deposit information. If the form is received by the agency HR/Payroll staff from the employee's state issued work email account, then no further verification is required. If the form is received by another means, then the agency HR/Payroll staff is required to verify by phone or email the data is from the employee, and is correct.