

**AUTHORIZATION FOR AUTOMATIC BANK DEPOSIT (ACH CREDITS)**

I hereby authorize \_\_\_\_\_  
(District) to credit my account(s) listed below.

Routing #	Account #	Account Type (Checking/Savings)	Amount (indicate if whole check)	Bank Name

**Only 3 Direct Deposit Entries Available**

This authority is to remain in full force and effect until DISTRICT has received written notification from me of its termination in such time and in such manner as to afford DISTRICT and DEPOSITORY a reasonable opportunity to act on it.

School: \_\_\_\_\_

Social Security Number: (last four digits only)   XXX - XX - \_\_\_\_\_

Name: \_\_\_\_\_ Employee # \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_ (H)   (W) \_\_\_\_\_

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

Date: \_\_\_\_\_

**Please attach a blank, voided check for deposit into a CHECKING ACCOUNT.**

**For direct deposit into your SAVINGS ACCOUNT: the employee must go to their bank and request a bank direct deposit form. The bank will complete this form with the correct information. The employee then must attach the bank slip to this payroll direct deposit form and send to payroll.**

**REMINDER: The form must be signed by you and sent to payroll at 193 Maple Ave.**

**Your direct deposit will not take place on the first payroll it is entered. The bank will check all of your account numbers. The following payroll you will receive a direct deposit statement rather than a check.**