

# Direct Deposit...Fast, Safe and Convenient

*Because you have something better to do on Pay Day*

## Authorization Agreement for Automated Payroll Deposits

### Authorization:

I hereby authorize and request the company named below, hereinafter called COMPANY, to initiate deposit entries and to initiate, if necessary, withdrawal entries and adjustments for any deposit entries made in error to my account indicated below. I hereby authorize the financial institution named below, hereinafter called FINANCIAL INSTITUTION to deposit or withdraw from such account.

This authority is to remain in full force and effect until the COMPANY and FINANCIAL INSTITUTION receive written notification from me of its termination in such time and in such manner as to offer COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

### Employee Information:

Company/Employer Name		Espanola Public Schools	
Employee Name		Employee ID/SSN	
Employee Financial Institution/Bank Name			
Check Type of Account	<input type="radio"/> Checking	<input type="radio"/> Savings	Account #:

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**Attach Voided Check for Checking or Money Market Account**

Attach Voided Check Here
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Routing #	Account #
Bank Routing Number	Checking, Savings or Money Market

Date Entered: \_\_\_\_\_ Effective for Pay Period: \_\_\_\_\_