

KENT CITY SCHOOLS

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT (ACH CREDIT)

The information requested on this form is required for enrollment in Direct Deposit. Direct Deposit is mandatory for all Kent City Schools Employees. Each employee may designate up to three (3) depository accounts for their payroll deposit. Your entire pay must be deposited.

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Financial Institution Name	ABA#*	Account #	Type of account
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> chk <input type="checkbox"/> sav

Deposit Amount \$ OR percentage % of pay

Financial Institution Name	ABA#*	Account #	Type of account
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> chk <input type="checkbox"/> sav

Deposit Amount \$ OR percentage % of pay

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Deposit Amount \$ OR percentage % of pay

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I hereby authorize the Kent City School District, hereinafter referred to as the DISTRICT, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account or accounts listed below.

This authorization is to remain in full force until the DISTRICT has received written notification from me of its termination in such timely manner as to afford the DISTRICT and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Please Print Name _____ Building _____

Date _____ Signature _____

***ABA# -- Nine-digit number that appears on the bottom left corner of a check. Please attach a voided check or a copy of a check to this form so we may verify this number.**

NOTE: Any changes regarding your account must be provided to the Treasurer's office in writing by completing a new Authorization Agreement. The new account information will go into effect two (2) pay dates from submission.

PLEASE RETURN THIS FORM TO THE PAYROLL DEPARTMENT AT DEPEYSTER.

FOR OFFICE USE
PRENOTE (LIVE CHECK): _____
DIRECT DEPOSIT STARTS: _____

PLEASE RETURN THIS FORM TO THE PAYROLL DEPARTMENT AT DEPEYSTER.

EXAMPLE A: You want your pay to be deposited into your checking account at ABC Bank.

Financial Institution Name	ABA#*	Account #	Type of account
ABC Bank	0 4 1 1 0 0 3 8 1	1234567	<input checked="" type="checkbox"/> chk <input type="checkbox"/> sav
Deposit Amount		\$	OR percentage
			100 % of pay

*100% refers to total of your pay.

EXAMPLE B: You want \$50 deposited into your savings account at ABC Bank, and the rest of your pay deposited into your checking account at ABC Bank.

Financial Institution Name	ABA#*	Account #	Type of account
ABC Bank	0 4 1 1 0 0 3 8 1	1234567	<input checked="" type="checkbox"/> chk <input type="checkbox"/> sav
Deposit Amount		\$	OR percentage
			100 % of pay

Financial Institution Name	ABA#*	Account #	Type of account
ABC Bank	0 4 1 1 0 0 3 8 1	7890198	<input type="checkbox"/> chk <input checked="" type="checkbox"/> sav
Deposit Amount		\$ 50.00	OR percentage
			% of pay

*100% refers to the remainder of your pay after the \$50 is taken out.

EXAMPLE C: You want \$50 deposited into your savings account at City Savings Bank, \$100 deposited into your savings account at ABC Bank, and the rest of your pay into your checking account at ABC Bank.

Financial Institution Name	ABA#*	Account #	Type of account
ABC Bank	0 4 1 1 0 0 3 8 1	1234567	<input checked="" type="checkbox"/> chk <input type="checkbox"/> sav
Deposit Amount		\$	OR percentage
			100 % of

Financial Institution Name	ABA#*	Account #	Type of account
ABC Bank	0 4 1 1 0 0 3 8 1	7890198	<input type="checkbox"/> chk <input checked="" type="checkbox"/> sav
Deposit Amount		\$ 100.00	OR percentage
			% of pay

Financial Institution Name	ABA#*	Account #	Type of account
City Savings	4 2 1 7 6 5 3 9 0	8889988	<input type="checkbox"/> chk <input checked="" type="checkbox"/> sav
Deposit Amount		\$ 50.00	OR percentage
			% of pay

*100% refers to the remainder of your pay after the other amounts have been deducted.