



Authorization Agreement for Automatic Deposits (Credits)

Company Name: Franklin Special School District

I hereby authorize Franklin Special School District, hereinafter called COMPANY to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my:

Checking Savings

account indicated below and the depository named below, hereinafter called DEPOSITORY, to credit and /or debit the same to such account.

DEPOSITORY NAME: _____

(Bank)

CITY: _____ STATE: _____ ZIP: _____

BK/TRANSIT/ABA NO: _____

ACCOUNT NUMBER: _____

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

ACCOUNT NAME(S): _____

EMPLOYEE SOCIAL SECURITY NUMBER: _____

EMPLOYEE SIGNATURE: _____ DATE: _____

ATTACH VOIDED PERSONAL CHECK HERE

After the authorization agreement for automatic deposit is signed, all checks issued through the FSSD payroll will be deposited directly into the designated account. This agreement may be voided in writing by completing forms at the FSSD Central Office.