MOORESVILLE GRADED SCHOOL DISTRICT AUTHORIZATION FOR AUTOMATIC DEPOSIT OF NET PAY

Instructions:	information will b automatic deposit received the initial i	e confirmed throug is made. Paper ch	gh the banking sys ecks should be exp TE: Be sure your ca	stem before the first bected until you have incelled check contains
School / Location:				
Employee Number		First Name	MI	Last Name
Bank Name				
For Deposit To (indicate one by checking):				
☐ Checking Accoun				
Checking Account N	No.	Savings Accoun	t No.	
I authorize the Mooresville Graded School District to deposit \$ per check OR my net pay (complete/circle one option) to the account and bank indicated and to initiate any necessary adjustment entries to my account for any transactions credited to it in error.				
Employee Signature			Date	
Please attach a voided check or deposit slip in this space for the account designated for deposit. A letter from the banking institution containing the routing and account numbers will also be accepted. Forms submitted without a voided check, deposit slip or bank letter will not be processed.				