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# MONROE-GREGG SCHOOL DISTRICT

## Automatic Deposit Authorization Form

I hereby authorize Monroe-Gregg School District hereinafter called EMPLOYER to initiate credit entries (and if necessary debit entries to adjust the credit entries) to my bank account(s) listed below. I authorize the DEPOSITORY bank to credit (or debit) the same entries to such account(s).

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### ACCOUNT INFORMATION

#### ACCOUNT #1 (Check only one)

\_\_\_\_\_ Checking (attach voided check or bank verification form)

\_\_\_\_\_ Savings (attach deposit slip or obtain ABA routing number from your bank)

Financial Institution \_\_\_\_\_

Bank's Routing Number \_\_\_\_\_

Personal Account Number \_\_\_\_\_

#### ACCOUNT #2 (Check only one)

\_\_\_\_\_ Checking (attach voided check or bank verification form)

\_\_\_\_\_ Savings (attach deposit slip or obtain ABA routing number from your bank)

Financial Institution \_\_\_\_\_

Bank's Routing Number \_\_\_\_\_

Personal Account Number \_\_\_\_\_

Amount of Pay to be deposited into this account \$ \_\_\_\_\_