



Authorization Agreement for Direct Deposit

I hereby authorize Roseville Area Schools to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) account or accounts listed below. If I designate more and one account, I understand this constitutes a split deposit of my credit entry with a portion, as so designated by the indicated dollar amounts, going to each designated account.

Please Note: The total amount of your net check will be deposited into the account designated "Account One" unless otherwise specified below.

Account One:

Action Taking (check one): Add Change Delete

Financial Institution Name: _____

Routing Number: _____

Account Number: _____

Type of Account (check one) * Checking Account Savings Account

Note: Account below is ONLY to be filled if you would like specific amounts to be sent to additional accounts (i.e., savings and checking).

Account Two:

Action Taking (check one) Add Change Delete

Financial Institution Name: _____

Routing Number: _____

Account Number: _____

Type of Account (check one) * Checking Account Savings Account

Amount: _____

The authority is to remain in full force until Employer has received written notification from me of its termination in such timely manner as to afford Employer and Financial Institution a reasonable opportunity to act on it. I understand that Roseville Area Schools may terminate this agreement at any time.

Name: _____

Signature: _____ **Date:** _____

*** Please Attach a Voided Check (for checking accounts) and/or savings slip (for savings accounts) ***