Kilgore ISD Payroll Direct Deposit Agreement

I hereby authorize KILGORE ISD, hereinafter called KISD, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account(s):

This agreement is to remain effective until KISD has received written notification from me of its termination in such time and in such manner as to afford KISD and DEPOSITORY a reasonable opportunity to act on it.

_____ _____
Employee Name Social Security Number

_____ _____
Signature Date

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

Primary Account: Checking ____ Savings ____

Bank Name: _____

Routing Number: _____

Account Number: _____

Secondary Account: Checking ____ Savings ____ Dollar Amount: _____

Bank Name: _____

Routing Number: _____

Account Number: _____

<u>Attach a voided check or direct deposit letter from your bank.</u>

Note: Direct Deposit accounts may take two months to activate. One month to verify your banking information and the second will be an actual deposit.

KISD Official Use Only

_____ _____
KISD Accepted by Date