Automatic Deposit Authorization Form

Automatic Deposit into your Savings or checking account.
Your check can be deposited into one, two or three accounts.
If more than one account is selected, one account Amount must receive the "balance".

Please attach a voided check or deposit slip for each account.

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I authorize Willmar Public Shcools and the financial institution listed below to initiate electronic entries to my account each pay day.

_____ Checking
_____ Savings _____ Amount in this account

_____ Bank _____ Name (please print)

_____ Address of Bank _____ Signature

Routing Number

Date: _____

Account Number

****

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