



**AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS
MANDATORY FOR ALL EMPLOYEES**

I hereby authorize the Jackson Board of Education to initiate by electronic means direct deposits (credit entries) of my net earnings to my account(s) in the entity named below ("Depository") and to initiate, if necessary, debit entries and adjustments for any credit entries in error. I authorize the Depository to accept and to credit and/or debit the amount of such entries to my account.

**If using more than one account, you MUST specify a dollar amount where indicated on the form.
The balance of your net pay will automatically be deposited into the last account named on the form.**

1. DEPOSITORY NAME: _____ LOCATION: _____
 SAVINGS CHECKING ACCOUNT NUMBER: _____
 TRANSIT NUMBER/ABA NUMBER: _____
 SPECIFY DOLLAR AMOUNT (if using more than one account): _____
2. DEPOSITORY NAME: _____ LOCATION: _____
 SAVINGS CHECKING ACCOUNT NUMBER: _____
 TRANSIT NUMBER/ABA NUMBER: _____
 SPECIFY DOLLAR AMOUNT (if using more then two accounts): _____
3. DEPOSITORY NAME: _____ LOCATION: _____
 SAVINGS CHECKING ACCOUNT NUMBER: _____
 TRANSIT NUMBER/ABA NUMBER: _____
 SPECIFY DOLLAR AMOUNT (if using more than one account): _____

SPECIAL INSTRUCTIONS ON DEPOSITING EXTRA PAY

If using multiple accounts you may specify one account that you would like the net of your extra pay deposited to.
If left blank, extra pay will be deposited the same as your regular pay.

DEPOSIT MY EXTRA PAY INTO DEPOSITORY NUMBER: _____

This authorization is to remain in full force and effect until the Jackson Board of Education has received written notification from me of its termination in such time and in such manner as to afford the Jackson Board of Education and the Depository a reasonable opportunity to act on it and in no event shall a termination notice be effective with respect to entries processed by the Jackson Board of Education or the Depository prior to its receipt.

EMPLOYEE NAME: _____ SS # _____

EMPLOYEE SIGNATURE: _____ DATE: _____

___ NEW DIRECT DEPOSIT ___ CHANGE TO BANKING ___ ADDITION TO CURRENT BANKING ONLY

For deposit to a checking account submit a voided blank personalized check. (NO DEPOSIT SLIPS)
ATTACH CHECK HERE