

# DIRECT DEPOSIT

## AUTHORIZATION AGREEMENT FOR AUTOMATIC DEBITS

I authorize Sweet Home School District No. 55 (herein called COMPANY) to initiate debit entries and to initiate, if necessary, credit entries and adjustment for any debit entries in error to my (select one) Checking  or Savings  account hereinafter called DEPOSITORY to debit and/or credit the same to such account. I have included a VOIDED check which has the necessary institution information required for direct deposit.

This authority is to remain in full force and effect until COMPANY has received written notification from me of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Email \_\_\_\_\_

Send direct deposit receipts by regular mail.

Send direct deposit receipts by email.

**ATTACH  
VOIDED CHECK**

Direct deposit forms received in the business office by the 5<sup>th</sup> of the month will be processed for the end of the month payroll. Contact Teri Lowery at 541-367-7112 if you have questions regarding your direct deposit.