

Authorization Agreement for Automatic Deposits (ACH Credits)

Company Name:
RUSSELL COUNTY BOARD OF EDUCATION

Company ID Number

I hereby authorize Russell County Board of Education, hereinafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my checking account indicated below at the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

DEPOSITORY (Your bank)
NAME _____

CITY _____ STATE _____ ZIP _____

ROUTING NUMBER _____ ACCOUNT NUMBER _____

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

NAME _____ SSN: _____ - _____ - _____
(Please print)

Date Signature

NOTE: All written credit authorization should provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in the authorization.

NOTE: _____ will be a pre-note to your bank. Your check will direct deposit in _____ pending no problems with your account number.

A PERSONAL VOIDED CHECK MUST ACCOMPANY THIS FORM