

# BILOXI PUBLIC SCHOOL DISTRICT

## AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYROLL DEPOSITS

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I authorize Biloxi Public School District to initiate automatic deposit of my payroll check as follows:

### FIRST (OR ONLY) ACCOUNT DESTINATION :

NAME OF BANK \_\_\_\_\_ ACCOUNT TYPE \_\_\_\_\_  
BANK ROUTING \_\_\_\_\_ CHECKING or SAVINGS  
ABA NUMBER \_\_\_\_\_  
ACCOUNT NUMBER \_\_\_\_\_  
DEPOSIT AMOUNT \$ \_\_\_\_\_ ENTIRE CHECK \_\_\_\_\_

### SECOND (OR REMAINDER) ACCOUNT DESTINATION :

NAME OF BANK \_\_\_\_\_ ACCOUNT TYPE \_\_\_\_\_  
BANK ROUTING \_\_\_\_\_ CHECKING or SAVINGS  
ABA NUMBER \_\_\_\_\_  
ACCOUNT NUMBER \_\_\_\_\_  
DEPOSIT AMOUNT \$ \_\_\_\_\_ REMAINDER OF CHECK \_\_\_\_\_

### REMAINDER OF CHECK ACCOUNT DESTINATION :

NAME OF BANK \_\_\_\_\_ ACCOUNT TYPE \_\_\_\_\_  
BANK ROUTING \_\_\_\_\_ CHECKING or SAVINGS  
ABA NUMBER \_\_\_\_\_  
ACCOUNT NUMBER \_\_\_\_\_  
DEPOSIT AMOUNT \$ \_\_\_\_\_ REMAINDER OF CHECK \_\_\_\_\_

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
DATE

Note : A deposit slip or voided check must be attached for each of the above accounts

As of 4/26/2005