

**AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYROLL DEPOSITS**

**Ashdown School District**

I hereby authorize Ashdown School District, hereinafter called COMPANY, to deposit to my account indicated the net amount that I am due for any pay period with the same effect as if a check has been delivered to me for such amount. I also authorize the Financial Institution indicated below, herein after called FINANCIAL INSTITUTION, to credit the same to such account. SHOULD AN OVER-DEPOSIT BE MADE, THE FINANCIAL INSTITUTION IS AUTHORIZED TO DEBIT SUCH ACCOUNT AND RETURN TO COMPANY THE AMOUNT OF ANY SUCH OVERAGE.

I also agree that the COMPANY shall have no liability to me for any damage to me arising out of or anyway connected with automatic payroll deposits, except to the extent as such damages are directly caused by the errors or omissions of the COMPANY.

Financial Institution Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Transit/ABA# \_\_\_\_\_ Account No. \_\_\_\_\_

(Please call your bank to verify these numbers)

This authority is to remain in full effect until COMPANY has received written notification from me of its termination in such time and manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it. Termination of employment also voids this agreement.

Employee Name \_\_\_\_\_ Soc Sec No. \_\_\_\_\_

(Please Print)

Date \_\_\_\_\_ Employee Signature \_\_\_\_\_

**ATTACH A PERSONALIZED DEPOSIT SLIP OR VOIDED CHECK**

**Ashdown School District**  
**Policies & Guidelines Concerning Payroll Direct Deposit Service**

Your signature below indicates your understanding and agreement with the following:

- 1) ALL of your checks will be deposited into your single checking or savings account. Neither partial check deposits nor split deposits into more than one account will be allowed.
- 2) Direct Deposit will begin with your September 15th paycheck and cannot be cancelled until the September payroll the next year. The only exception will be a change in banks or accounts.

If Central Office staff deems it necessary to discontinue this service for any reason, you will be contacted in writing one month prior to discontinuing the service.

- 3) No fees will be charged for this service at this time.

You will be notified 30 days in advance of any change regarding fees and will be given the opportunity to discontinue the service at that time.

- 4) Any and all of your payroll checks will be direct deposited except pay for extra time in July and August.
- 5) You will receive a check voucher each pay date with salary and deduction information on it.
- 6) If payday (15) falls on a weekend or school holiday, your paycheck will be deposited in your bank on the last working day prior to the pay date.
- 7) For nine-month employees, your June, July, and August payroll checks will be direct deposited into your account in June.
- 8) A personalized deposit slip or voided check must be attached to a completed, signed Authorization Agreement for Automatic Payroll Deposits in order to begin direct deposit.
- 9) Your first check will be a pre-note. This means it will NOT be Direct Deposited the first month. It will begin with your second check.
- 10) We only direct deposit into local banks and in the surrounding areas.

- 11) Both completed, signed, dated forms must be returned to Beth at Central Office **no later than August 31st.**

Employee Name \_\_\_\_\_ Soc Sec No. \_\_\_\_\_

(Please Print)

Date \_\_\_\_\_ Employee Signature \_\_\_\_\_