

To: Chilton County Board of Education

Please deposit my check each month in the _____

(Name of Bank)

Bank effective with the _____ payroll. My account
(month and year)

number is _____.

Please check here if this is a savings account. _____

(yes)

Signed: _____

Date: _____

This information will be entered into our computer files if it is received in the Central Office by the 20th day of the month. The bank will use the information we provide at the end of the month to verify that I have entered it correctly. You will receive a check on the first day of the following month. Direct deposits will begin the next month.

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{Please attach a voided check here}
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