

**SUNFLOWER COUNTY CONSOLIDATED SCHOOL DISTRICT
AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS (ACH CREDITS)**

I authorize the Sunflower County Consolidated School District to initiate entries to the account indicated below as follows:

1. They may initiate CREDIT entries, which moves money into my account according to the schedule and other conditions to which the Sunflower County Consolidated School District and I have agreed.
2. They may initiate DEBIT entries to reverse any transactions they have originated to my account in error.

Name: _____
(please print)

Account Number: _____

Name of Depository Financial Institution: _____

Location of Depository Financial Institution: _____

City: _____ State: _____ Zip: _____

Please enter your bank's routing and transit number here **and** staple a VOIDED CHECK below.*

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(nine digits)

This authority is to remain in effect until the Sunflower County Consolidated School District has **received written notification** of its termination and has had a reasonable opportunity to act upon it.

Also, by signing this document, I agree to provide written instructions regarding any changes to my information as soon as possible. I further understand that if I fail to provide updated information, that future payments may require an additional amount of time before being credited to my account.

Signed: _____ Date: _____

***DO NOT USE A DEPOSIT SLIP.** Many banks print internal transaction codes instead of their routing and transit numbers on their deposit slips. Using an invalid routing and transit number will prevent your transaction from being directed to the correct bank, resulting in delays in the posting of your payment.