

# WEST JEFFERSON SCHOOL DISTRICT #253

## AUTOMATIC DEPOSIT AUTHORIZATION

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Employee Name: \_\_\_\_\_

I hereby authorize West Jefferson School District #253 to initiate automatic deposits to my checking or savings account indicated below. I also request the financial institution to credit my account.

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Financial Institution: \_\_\_\_\_

City: \_\_\_\_\_ Branch: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Savings: \_\_\_\_\_ Checking: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ or 100%: \_\_\_\_\_

Routing Transit #: \_\_\_\_\_

Account Number: \_\_\_\_\_

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Financial Institution: \_\_\_\_\_

City: \_\_\_\_\_ Branch: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Savings: \_\_\_\_\_ Checking: \_\_\_\_\_ Amount: \_\_\_\_\_ or 100%: \_\_\_\_\_

Routing Transit #: \_\_\_\_\_

Account Number: \_\_\_\_\_

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*Note: May include up to four (4) Institutions/accounts*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**\* Some of the banks/credit unions have routing and transit numbers unique to direct deposit. Please check with your bank/credit union to confirm the proper routing and transit number for direct deposit.**