

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT OF PAYROLL

I hereby authorize the New Kensington-Arnold School District (hereinafter, NKASD) to deposit any amounts owed to me by initiating credit entries to my account at the financial institution (hereinafter, BANK) indicated below.

Further, I authorize BANK to accept and to credit any credit entries initiated by NKASD to my account.

In the event that NKASD deposits fund erroneously into my account, I authorize NKASD to debit my account for an amount not to exceed the original amount of the erroneous credit.

Bank Name

City

State

Account Number

Checking

Savings

This authorization is to remain in full force and effect until NKASD and/or BANK has received written notice from me of its termination in such time and manner as to afford the NKASD and/or BANK a reasonable opportunity to act on it.

Individual's Name (please print)

Individual's Signature

Date

WE ARE ASKING THAT YOU CONSIDER COMPLETING THE ABOVE DIRECT DEPOSIT FORM FOR YOUR PAYROLL CHECK. THIS FEATURE IS AVAILABLE TO ALL EMPLOYEES AND OFFERS A CONVENIENT WAY TO MAKE SURE THAT YOUR PAYCHECK IS IN YOUR BANK ACCOUNT.

COMPLETE THE ABOVE FORM ATTACHING A VOIDED CHECK AND RETURN IT TO DEBBIE KLEIDER IN THE PAYROLL DEPARTMENT VIA INTER-SCHOOL OR USPS MAIL. AFTER COMPLETION IT WILL TAKE 2 – 3 PAYS BEFORE THE DIRECT DEPOSIT TRANSFERS.

THANK YOU FOR CONSIDERING THIS DEPOSIT OPTION.