

MIDDLESEX COUNTY MAGNET SCHOOL

DIRECT DEPOSIT OF PAYROLL

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS (ACH CREDITS)
MIDDLESEX COUNTY MAGNET SCHOOLS Fed. ID #22-6002455

I (we) hereby authorize Middlesex County Magnet Schools, herein after called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries made in error to my (our) () Checking Account or () Savings Account. (select one or both) indicated below at the depository named below, herein after called DEPOSITORY, to credit and/or debit the same to such account.

PRIMARY DEPOSITORY (BANK) NAME: _____

BRANCH: _____ CITY: _____ STATE: _____ ZIP: _____

PRIMARY BANK TRANSIT ROUTING NUMBER: _____ PRIMARY ACCOUNT NUMBER: _____

*SECONDARY DEPOSITORY (BANK) NAME: _____

BRANCH: _____ CITY: _____ STATE: _____ ZIP: _____

SECONDARY BANK TRANSIT ROUTING NUMBER: _____ SECONDARY ACCOUNT NUMBER: _____

AMOUNT TO BE DEPOSITED IN SECONDARY ACCOUNT: \$ _____

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

NAME(S): _____ SOCIAL SECURITY # _____
(Please Print)

DATE: _____ SIGNED: _____

SIGNED: _____

NOTE: ATTACH A VOIDED BLANK CHECK IF DEPOSIT IS TO BE MADE TO A CHECKING ACCOUNT.

* SECONDARY DEPOSITORY NOT AVAILABLE FOR EVENING SCHOOL INSTRUCTORS AND PART TIME EMPLOYEES.