

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSIT (ACH CREDITS)

I (we) hereby authorize Beal City Public Schools, hereinafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) account(s) listed below and the depository name below, hereinafter called DEPOSITORY, and to credit and/or debit the same to such account(s).

Checking or Savings	Depository Name	Transit/ ABA No.	Account No.	Amount

This authority is to remain in full force and effect until COMPANY had 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) _____ ID NUMBER _____
(PLEASE PRINT)

Date _____ Signed X _____

Date _____ Signed X _____