



Millville Board of Education

110 N. 3rd Street
PO Box 5010
Millville NJ 08332

Authorization Agreement for Automatic Deposit (credits)

Check One

- New Authorization
 Authorization to Transfer to another Institution
 Change of Account Number
 Cancellation*

I hereby authorize the Millville Board of Education to initiate by electronic means direct deposit (credit entries) of my net earnings to my **Checking** or **Savings** account in the financial institution named below and to initiate, if necessary, debit entries and adjustments for any credit entries in error. I authorize the financial institution to accept and to credit and/or debit the amount of such entries to my account.

Financial Institution _____ Branch _____

City _____ State _____ Zip Code _____

Employee's Signature _____ Date _____

Approved _____ Date _____

Account Number*
(Enter Only Numbers, Letters, and Hyphens)

Transit/ABA Number*
(Must be 9 digits)

Leave blank if not known. If direct deposit is to a checking account, attach a voided blank personalized check. If direct deposit is to a savings account enter account number only. Your financial institution can help you complete this information

This authority is to remain in full force and effect until the Millville Board of Education has received written notification from me of its termination in such time and in such manner as to afford the Millville Board of Education and the financial institution a reasonable opportunity to act on it and in no event shall a termination notice be effective with respect to entries processed by the Millville Board of Education or the financial institution prior to its receipt.

Employee ID Number Employee Name

Please send completed form to the Payroll Department at Culver Center **with a Voided Blank Personalized Check.**

* For cancellation **do not supply account number and transit/ABA number.**

Computer Entry

Date

Initials