

**Terrell County Board of Education Payroll Services  
Authorization Agreement for Automatic (ACH) Credits  
(Direct Deposit)**

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

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

I hereby authorize Terrell County Board of Education to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries made in error to my account indicated below and the DEPOSITORY to credit and/or debit the same to such account:

Depository Name: \_\_\_\_\_

Routing/ABA#: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Please attach a voided check or deposit ticket with form:

\_\_\_\_ Checking-Acct.# \_\_\_\_\_ Amount to deposit, If net due, write NET: \$ \_\_\_\_\_

\_\_\_\_ Savings-Acct# \_\_\_\_\_ Amount to deposit, If net due, write NET: \$ \_\_\_\_\_

This authority is to remain in full force and effect until notified by me or Employer of termination or revocation.

BY: \_\_\_\_\_ DATE: \_\_\_\_\_

ATTACH VOIDED CHECK OR DEPOSIT TICKET HERE