

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS/AUTOMATED CLEARINGHOUSE CREDITS

Independent School District No. 30
Bartlesville, Oklahoma
I.D. No. 73-6021263

I hereby authorize Independent School District No. 30, hereinafter called DISTRICT, to initiate credit entrees and to initiate, if necessary, debit entrees and adjustments for any credit entrees in error to my checking/savings account indicated below and as designated on the corresponding payroll advice, and the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to my account.

DEPOSITORY NAME _____

CITY _____ STATE _____ ZIP CODE _____

TRANSIT/ABA NO. _____ ACCOUNT NO. _____

This authority is to remain in full force and effect until DISTRICT has received written notification from me of its termination in such time and in such manner as to afford DISTRICT and DEPOSITORY a reasonable opportunity to act upon.

NAME _____ SOCIAL SECURITY NO. _____

DATE _____ SIGNED _____

- CHECKING ACCOUNT (ATTACHED A VOIDED CHECK, DEPOSIT SLIPS ARE NOT ACCEPTED)**

- SAVINGS ACCOUNT (ATTACHED A DOCUMENT FROM YOUR FINANCIAL INSTITUTION SHOWING THE FINANCIAL INSTITUTION'S ROUTING NUMBER AND YOUR ACCOUNT NUMBER)**

TAPE VOIDED CHECK/DOCUMENT HERE