

DIRECT DEPOSIT FORM

To sign up for direct deposit, complete the highlighted sections in the form below as follows:

1. **Bank Name**
2. Indicate with an "X" whether your account is a checking or savings account
3. **Transit/ABA No.:** Your bank's routing number. It appears in the lower left corner of a check (a nine-digit number). If you are depositing to a savings acct., check with your bank for the ABA#.
4. **Account No.:** Your account number.
5. Choose to deposit a fixed amount from your check to this account OR the remainder of your pay
6. Complete your printed name, your social security number, date and signature

This form requires a VOIDED CHECK or PRINT OUT from your bank containing the account number and routing number for verification purposes. No direct deposit can be processed unless these forms are attached to this Direct Deposit Form.

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEBITS (ACH DEBITS)

COMPANY NAME: Logan-Hocking Schools COMPANY ID NUMBER: 31-6400666

I (We) hereby authorize Logan-Hocking Schools, hereinafter called company to initiate credit entries and to initiate, if necessary debit entries and adjustments for any credit entries in error to (our) Checking or Savings account indicated below and the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

BANK NAME _____ () CHECKING () SAVINGS

TRANSIT/ABA NO. _____ **ACCT NO.** _____

DEPOSIT FIXED AMOUNT OF \$ _____ **OR** **DEPOSIT REMAINDER OF CHECK** ()

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) _____ **SSN** _____

(PLEASE PRINT)

DATE _____ **SIGNED X** _____