Altus Public Schools

Direct Payroll Deposit Authorization

I hereby authorize Altus Public Schools to make payroll deposits (credit entries) directly into my account as indicated below. I acknowledge that the origination of ACH (*Automated Clearing House*) transactions to my account must comply with the provisions of US law.

Employee Name (Please Prin	nt)	Social Security #
Name of Financial Institution	Address	City, State, & Zip
Account Type ($\sqrt{\ }$): Checking _	SavingsRoutir (YOU MAY LEAVE THESE LINES BLANK	ng Number Account Number IF YOUR VOIDED CHECK IS ENCODED WITH THESE NUMBERS
Must provi	de voided check form fro	m bank.
		1234
		Date
Pay to the Order of		\$
Dollars	A VOIDED CHECK IN T	
Memo		
Return this authoriz	zation form to the Adn	ninistrative Office.
Signed		Date
		Royicod March 2000