<u>Pasadena Independent School District Authorization Agreement for Direct Deposits</u>

I hereby authorize Pasadena ISD to initiate credit entries (deposits) and if necessary, debit entries for any errors to my account.

Name (please print)		
(Last)	(First)	(Middle Initial)
Employee ID:		
Employee Signature	Date	<u> </u>
YOU MUST PROVIDE THE NECESSARY PROCESSED WITHOUT THIS INFORMATION)	Y BANK INFORMATION. (NO I	DIRECT DEPOSIT WILL BE
You may open up to 5 accounts; your direct	deposit will become effective on	the next payroll processed.
Changes to pre-existing Direct Deposits will a	also become effective on the next	payroll processed.
(Please enter the <i>main account</i> in the space pro	ovided below).	
Name of Financial Institution:	· 	
Bank Transit/ABA number		
Account number		
Checking or Savings (circle one) \$	or %	
(Spaces below are provided for additional direct	deposits).	
Name of Financial Institution:		
Bank Transit/ABA number		
Account number		
Checking or Savings (circle one) \$	or %	
Name of Financial Institution:		
Bank Transit/ABA number		
Account number		
Checking or Savings (circle one) \$	or %	
Name of Financial Institution:		
Bank Transit/ABA number		
Account number		
Checking or Savings (circle one) \$	or %	

I understand it is my responsibility to enter correct account and bank information to ensure transactions are deposited to my account.

I hereby authorize my employer, PASADENA IND. SCHOOL DISTRICT, to initiate credit entries and if necessary, to initiate debit entries and adjustments for any credit entries in error to my accounts.

This authority is to remain in full force until PASADENA IND. SCHOOL DISTRICT has received written notification from me of its termination in such timely manner as to give PASADENA IND. SCHOOL DISTRICT and my financial institution a reasonable opportunity to act on it, or until the termination of my employment.