



Mad River Local Schools
801 Old Harshman Road
Riverside, Ohio 45431

Authorization for Direct Deposit of Wages

Please e-mail my direct deposit notification to the following e-mail address: _____.

I (we) hereby authorize Mad River Local Schools, hereinafter called COMPANY, to initiate electronic entries to my (our) account or accounts listed below, and the Financial Institution named below to credit and/or debit the same to such account.

Financial Institution	Transit/ ABA No.	Account Number
1 _____	_____	_____

Account Type

- Checking Account 100 % or Amount \$ _____
- Saving Account 100 % or Amount \$ _____

Financial Institution	Transit/ ABA No.	Account Number
2 _____	_____	_____

Account Type

- Checking Account 100 % or Amount \$ _____
- Saving Account 100 % or Amount \$ _____

This authority is to remain in effect until COMPANY receives written notification from me of its termination in such time and in such manner as to afford COMPANY and Financial Institution a reasonable opportunity to act on it.

NAME: _____ BLDG: _____

SIGNATURE: _____ DATE: _____

TRANSIT/ABA NUMBERS ARE THE FIRST SET OF NUMBERS ALONG THE BOTTOM OF A PERSONAL CHECK—NINE DIGITS IN LENGTH AND TYPICALLY BEGIN WITH A 24 OR 04

VOIDED CHECK MUST BE ATTACHED TO AUTHORIZATION FOR CHECKING ACCOUNT DEPOSITS.