



MIDDLEBOROUGH PUBLIC SCHOOLS  
FLORA M. CLARK ADMINISTRATION BUILDING  
30 FOREST STREET  
MIDDLEBOROUGH, MA 02346  
TELEPHONE 508-946-2000

## Authorization Agreement for Automatic Deposits (ACH Credits)

I (we) hereby authorize Middleboro Public Schools, hereinafter called company, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) account indicated below and the depository named below, hereinafter called Depository, to credit and/ or debit the same to such account.

Name (print): \_\_\_\_\_

Circle Type of Account:    CHECKING    /    SAVINGS

Account Number: \_\_\_\_\_

Routing/Transit (ABA) number: \_\_\_\_\_

BANK Depository Name: \_\_\_\_\_

Branch: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

### SECONDARY ACCOUNT    (Optional)

(The amount specified below will be directly deposited into this secondary bank account and the remaining net amount of your paycheck will then be directly deposited into your primary account as specified above.)

Circle Type of Account:    CHECKING    /    SAVINGS

MUST SPECIFY a DOLLAR AMOUNT for secondary acct: \$ \_\_\_\_\_

Account Number: \_\_\_\_\_

Routing/Transit (ABA) number: \_\_\_\_\_

BANK Depository Name: \_\_\_\_\_

Branch: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\* If this is a checking account, a voided check must be attached.