AUTHORIZATION AGREEMENT

DIRECT DEPOSIT OF PAYROLL (ACH)

I, _____, hereby authorize

COATESVILLE AREA SCHOOL DISTRICT,

hereinafter called **"Company"**, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my Checking or Savings account indicated below and the bank named below, hereinafter called **Depository**, to credit the same to such account. The credit entries to said account should be

Bank Name _____

ABA Routing # ⑆ ☐☐☐☐☐☐☐☐☐ ⑆

Savings Account Number _____ Amount _____

Checking Account Number _____ Amount _____

This authority is to remain in full force and effect until **Company** has received written notification from me of its termination in such time and in such manner as to afford **Company** a reasonable opportunity to act on it.

Name _____ SS # _____

Date _____ Signed _____