

MAINE SCHOOL ADMINISTRATIVE DISTRICT #54

AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED CREDITS *ELECTRONIC DIRECT DEPOSIT*

I hereby authorize and request M.S.A.D. #54, hereinafter called COMPANY, to make payment of any amounts owing me by initiating credit entries to my account indicated below in the bank named below, hereinafter called BANK, and I authorize and request BANK to accept any credit entries initiated by COMPANY to such account and to credit the same to such account without responsibility for the correctness thereof, in the event of an overpayment or payment in error, I hereby authorize the COMPANY to initiate debit entries to my account in the amount of such payment in error.

***please attach a voided check if depositing into your checking account**

Account #1	Checking	Savings	(Circle One)
Bank Name: _____			
Routing/Transit Number: _____			
Account #	_____	Amount or 100% per check	_____
Account #2	Checking	Savings	(Circle One)
Bank Name: _____			
Routing/Transit Number: _____			
Account #	_____	Amount or Remainder per check	_____

It is understood that this agreement may be terminated by me at any time by written notification to COMPANY and BANK. Any such notification to COMPANY shall be effective only with respect to entries initiated by COMPANY after receipt of such notification and a reasonable opportunity to act on it. Any such notification to BANK shall be effective only with respect to entries credited to my account by BANK after receipt of such notification and a reasonable time to act on it.

Print Name: _____

Date: _____ Signature: _____