

Jarrell Independent School District Proud home of *The Cougars!* 108 E Ave F Jarrell, TX 76537 512-746-2124 | 512-746-2518 Fax www.jarrellisd.org

Direct Deposit Authorization Form

Please print and complet Name: Address: City, State, Zip:	Jane Doe 123 Main Street Location, Place 12345 PAY TO THE ORDER OF FOR 1:000123456 1:000123456 Check
	number number
Name of Bank:	
Account Number:	
9-Digit Routing Number	er:
Amount:	□ \$ □ % or □ Entire Check
Type of Account:	□ Checking □ Savings
Please attach a voided check for each bank account to which funds should be deposited. Jarrell ISD is hereby authorized to direct deposit my pay to the account listed above. Should I	
change my checking or sav Cancellation Form listing th	ings account, I will complete a new Electronic Funds Transfer and/or he new account information. I realize if I fail to notify Jarrell Independent account changes, returned items will be reissued with the next payroll
	dependent School District is not responsible for any banking errors. This n effect until Jarrell Independent School District has received written
Signature	Date