

**PLEASANTVILLE BOARD of EDUCATION  
801 MILL ROAD, 3<sup>rd</sup> FLR.  
PLEASANTVILLE, NJ 08232**

Phone (609) 383-6800 x 2528

Fax: (609) 383-6117

**AUTHORIZATION AGREEMENT for DIRECT DEPOSIT**

NAME: \_\_\_\_\_

SS#: \_\_\_\_\_

I hereby authorize the Pleasantville Board of Education to initiate credit entries of my paycheck to the depository institution and account listed below. Also, if necessary, to make debit entries in the amount equal to the amount deposited.

---

**This is an application for:**

\_\_\_\_\_ New Direct Deposit

\_\_\_\_\_ Change of Direct Deposit

\_\_\_\_\_ Additional Direct Deposit

\_\_\_\_\_ Stop existing Direct Deposit

\_\_\_\_\_ Stop existing Direct Deposit and replace with new Direct Deposit

If you have an established Direct Deposit, and are making changes to that account, please indicate which account is being changed.

Primary Account:

Bank Name: \_\_\_\_\_

ABA Routing Number: \_\_\_\_\_ (obtain from Bank)

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

Checking _____	Amount
Savings _____	(or net) _____

Secondary Account:

Bank Name: \_\_\_\_\_

ABA Routing Number: \_\_\_\_\_ (obtain from Bank)

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

Checking _____	Amount
Savings _____	(or net) _____

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date