

# Bertie County Schools Finance Department

Automatic Deposit of Net Pay

Please Print

Social Security Number \_\_\_\_\_

Name (First, MI, Last) \_\_\_\_\_

Bank Name and Location \_\_\_\_\_

Deposit Method (Please Check)  Checking Account  Savings Account

I hereby authorize Bertie County Schools to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to the account indicated below. I also authorize the depository named below to credit and/or debit the same to such account.

Attach a voided check here with tape (NO STAPLES PLEASE) from a checking account.

Attach a deposit slip here with tape (NO STAPLES PLEASE) from a savings account.

Signature \_\_\_\_\_

Date \_\_\_\_\_