

**LONG BRANCH BOARD OF EDUCATION
AUTOMATIC PAYROLL DEPOSITS
AUTHORIZATON AGREEMENT**

I hereby authorize Long Branch Board of Education, (**LBBOE**) to initiate credit entries and, if necessary, debit entries and adjustments for any credits posted in error to my account indicated below. The **DEPOSITORY** named below, is also authorized to credit and/or debit same to the account specified.

DEPOSITORY (Your Financial Institution)

NAME _____

BRANCH _____

TRANSIT/ABA NO. _____

ACCOUNT NO. _____ Acct. Type: Checking

To ensure that this information is entered into our payroll system as completely and accurately as possible, please attach a **VOIDED CHECK** for verification.

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

EMPLOYEE NAME: _____
(Please print)

SOCIAL SECURITY # _____

DATE _____

EMPLOYEE SIGNATURE _____

BUSINESS OFFICE USE ONLY

Confirmed by: _____

Date: _____

Employee #

Entered By: Initial

Date: