

Mancelona Public Schools

ACH Direct Deposit Form

I hereby authorize my employer Mancelona Public Schools to make periodic electronic deposits into the following account(s):

1.) Bank Name: _____ ABA (routing) # _____

2.) Bank Name: _____ ABA (routing) # _____

3.) Bank Name: _____ ABA (routing) # _____

Entire Check (or Net): _____

Into Checking Account # _____ Savings Account # _____

AND / OR

From Each Pay: \$ _____

Into Checking Account # _____ Savings Account # _____

Employee Social Security # _____

Employee Name (Print) _____

Employee Signature _____ **Date** _____

MPS OFFICE USE ONLY:

Prenote Date _____ **Active Date** _____

