

**AUTHORIZATION AGREEMENT  
FOR  
AUTOMATIC DEPOSITS (ACH CREDIT)**

I (we) hereby authorize Dorchester School District Four to initiate deposits to and, if necessary, to adjust entries to correct any entries made in error, to my (our) \_\_\_\_\_ **checking** or \_\_\_\_\_ **savings** account indicated below and the financial institution named below.

Financial Institution \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Account Number \_\_\_\_\_ Transit/Routing Number \_\_\_\_\_

This authorization is to remain in effect until Dorchester School District Four has been notified in writing by me (or either of us) to discontinue the process. This notification must allow Dorchester School District Four and the listed financial institution a reasonable amount of time to act on the request.

Name(s) \_\_\_\_\_ Date \_\_\_\_\_  
(Please Print)

Signed \_\_\_\_\_

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

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

*[Please attach voided check here]*