



La Vernia Independent School District

13600 US Hwy 87 West • La Vernia, Texas 78121
(830) 779 – 6600 • Fax (830) 779 - 2304

**PAYROLL
AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYROLL DEPOSITS**

NAME: _____ DATE: / / _____

I hereby authorize La Vernia I.S.D. and the financial Institution (s) name below (“Bank (s)”) to deposit my net payroll automatically to my account (s). If monies to which I am not entitled are deposited in my account (s), I authorize La Vernia I.S.D. and the Bank (s) to direct the return of said funds and make the necessary debit adjustments to my account (s).

This authority is to remain in effective until La Vernia I.S.D. has received my written notifications of its termination so as to allow La Vernia I.S.D. and Bank (s) a reasonable opportunity to act.

Employee Signature



Please complete the following and attach a voided check:

Bank Name: _____ Branch: _____

Bank Routing #: _____ Account #: _____

Type of Account: Checking Savings

Add Change Cancel



Please complete the following and attach a voided check:

Bank Name: _____ Branch: _____

Bank Routing #: _____ Account #: _____

Type of Account: Checking Savings

Add Change Cancel