

Regional School Unit 1

34 Wing Farm Parkway
Bath, ME 04530

DIRECT DEPOSIT AGREEMENT

I authorize the payroll department of Regional School Unit 1 (RSU 1) to deposit the following amounts each pay period unless revoked in writing:

(Please Print)

Bank _____

Account # _____

Type of account _____

Amount or Net Check _____

Employee Name _____

I understand that it is my responsibility to ensure that my account is credited before using these funds and that Regional School Unit (RSU 1) is not responsible for any bank charges to my account.

Direct deposit account numbers need to be verified by one paycheck prior to being sent electronically.

My signature indicates that I have read and understand the above statements.

Employee signature _____

Date _____

ATTACH VOID CHECK HERE