

LITTLE CYPRESS-MAURICEVILLE CISD

6586 FM 1130
Orange, Texas 77632
(409) 883-2232

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS

COMPANY

COMPANY

NAME: LITTLE CYPRESS-MAURICEVILLE CISD ID NUMBER 74-1607121

I hereby authorize LITTLE CYPRESS-MAURICEVILLE CISD, herein called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my Checking Savings account (select one) indicated below and the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

DEPOSITORY(Bank/Credit Union)

NAME _____ BRANCH _____

CITY _____ STATE _____ ZIP CODE _____

TRANSIT/ABA NO. _____ ACCT NO. _____

This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

NAME _____

(PLEASE PRINT)

SIGNATURE

DATE

Please attach a voided check here