



## Authorization for Direct Deposit

This authorizes **Chariton Valley Association** to send credit entries (and appropriate debit entries), electronically or by any other commercially accepted method, to my account (s) indicated below. This authorizes the financial institution holding the Account to post all such entries.

### Account #1

Type (check one) :  Checking  Savings

\_\_\_\_\_  
Bank Name

\_\_\_\_\_  
Bank Routing # (ABA#)

\_\_\_\_\_  
Account #

\_\_\_\_\_  
Percentage or Dollar Amount to be deposited to  
this account

### Account #2

Type (check one) :  Checking  Savings

\_\_\_\_\_  
Employee Bank Name

\_\_\_\_\_  
Bank Routing # (ABA#)

\_\_\_\_\_  
Account #

\_\_\_\_\_  
Percentage or Dollar Amount to be deposited to  
this account

Please attach a voided check for each  
account here to ensure accuracy and  
verification of bank routing numbers and  
bank account numbers

This Authorization will be in effect until Chariton Valley Association receives a written termination notice and has a reasonable opportunity to act on it.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**Administrative use only**  
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\_\_\_\_\_  
Payroll / Date

\_\_\_\_\_  
Accounts Payable / Date

\_\_\_\_\_  
Prenote / Date

\_\_\_\_\_  
EFT / Date

\_\_\_\_\_  
EFT / Date

\_\_\_\_\_  
Prenote / Date