## DIRECT DEPOSIENROLLMENT/CHANGE FORM

I,	requend Itagrate Public Schools directly deposit my	
paycheck into the referenced account(s).	I further authorize Millard Public Schools to	request my bank to deb
my account for any direct deposit made in	erromontaining your	full accountinformation.
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Please Note: Direct Deposit change reque	sts must be received by the Business Offic	e at least 7 days prior to
the next paydate. If you close your accour not responsible for paymentsnade to closed		
PRIMARY BANK ACCOUNT:		