

DIRECT DEPOSIT CANCELLATION

I, _____, Employee # _____ that
Millard Public Schools cancel the direct deposit of my paycheck into the referenced account(s).

PRIMARY BANK ACCOUNT FILE:

Bank Name: _____ Account Type: _____

C = Checking S = Savings

Bank Routing Number: _____

Bank Account Number: _____

SECONDARY BANK ACCOUNT (if applicable)

Bank Name: _____ Account Type: _____

C = Checking S = Savings

Bank Routing Number: _____

Bank Account Number: _____ Amount being deposited: _____

Signed: _____ Date _____