



Elkhart Lake – Glenbeulah School District

DISTRICT OFFICE / HIGH SCHOOL

Dr. Adam Englebreton, District Administrator / Mr. Ryan Faris, Principal
aenglebreton@goresorters.com / rfaris@goresorters.com
201 North Lincoln Street, P.O. Box 326, Elkhart Lake, WI 53020 · Tel (920) 876-3381 · Fax (920) 876-3511

ELEMENTARY / MIDDLE SCHOOL

Dr. Jeanne Courneene, Principal / Mrs. Debbie Hammann, Director of Special Education/Pupil Services
jcourneene@goresorters.com / dhammann@goresorters.com
251 East Maple Street, P.O. Box 518, Elkhart Lake, WI 53020 · Tel (920) 876-3307 · Fax (920) 876-3105

www.elgs.k12.wi.us

ACH BANK AUTHORIZATION

EMPLOYEE NAME: _____

I hereby authorize the Elkhart Lake-Glenbeulah School District and the Financial Institution indicated below to initiate deposits of funds to which I am entitled, automatically to my account. If funds are deposited to my account in error, I authorize my Employer to direct the Financial Institution to return such funds. This authority is to remain in full effect until the Employer or Financial Institution has received written notification from me of its termination in such time and manner as to afford the Employer or Financial Institution a reasonable opportunity to act on it, or until the Employer or Financial Institution has sent me a written notice (10) days prior to their termination of this agreement.

Signature

Date

Name of Financial Institution

Checking: _____ Savings: _____

**PLEASE ATTACH A VOIDED CHECK
Or
SAVINGS ACCOUNT DEPOSIT SLIP.
THANK YOU.**