

Direct Deposit Authorization

1. Employer Information

Company Name	Company Number
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2. Employee Information

Last Name	First Name	MI
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Employee Identification Number

3. Bank Information *

Bank Name	Account Type
	Checking Savings

Routing/Transit Number. <i>These are the nine digits to the left of your account number on the bottom of your check (must begin with 0, 1, 2, or 3).</i>

Account Number

Amount to be deposited <i>(Select either percentage or dollar amount.)</i>	
Percentage. Please specify: %	Dollar amount. Please specify: \$

4. Additional Bank Information *

Bank Name	Account Type
	Checking Savings

Routing/Transit Number. <i>These are the nine digits to the left of your account number on the bottom of your check (must begin with 0, 1, 2, or 3).</i>

Account Number

Amount to be deposited <i>(Select either percentage or dollar amount.)</i>	
Percentage. Please specify: %	Dollar amount. Please specify: \$

5. Authorization Agreement for Direct Deposit

*Please note, it can take one to two payroll periods to process your direct deposit request and for you to begin receiving direct deposits.

I authorize my employer to make deposits to my account. In the unlikely event of a deposit error, I authorize my employer to make adjustments to correct the error.

Signature	Date
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*Attach a voided check with this agreement. Deposit slips are not accepted. Information provided should match voided check.