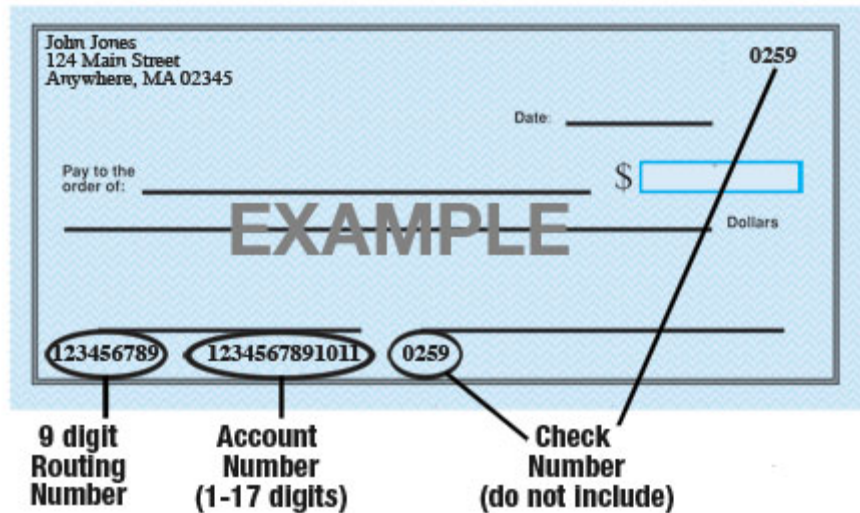


# DIRECT DEPOSIT AUTHORIZATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_



Name of Bank: \_\_\_\_\_

Account #: \_\_\_\_\_ 9-Digit Routing #: \_\_\_\_\_

Amount: ☐ \$ \_\_\_\_\_ ☐ \_\_\_\_\_ % or ☐ Entire Amount

Type of Account: ☐ Checking ☐ Savings

*Attach a voided check for each bank account to which funds should be deposited (if necessary).*

\_\_\_\_\_ is hereby authorized to directly deposit my pay to the account listed above. This authorization will remain in effect until I modify or cancel it in writing.

Payee Signature: \_\_\_\_\_ Date: \_\_\_\_\_