

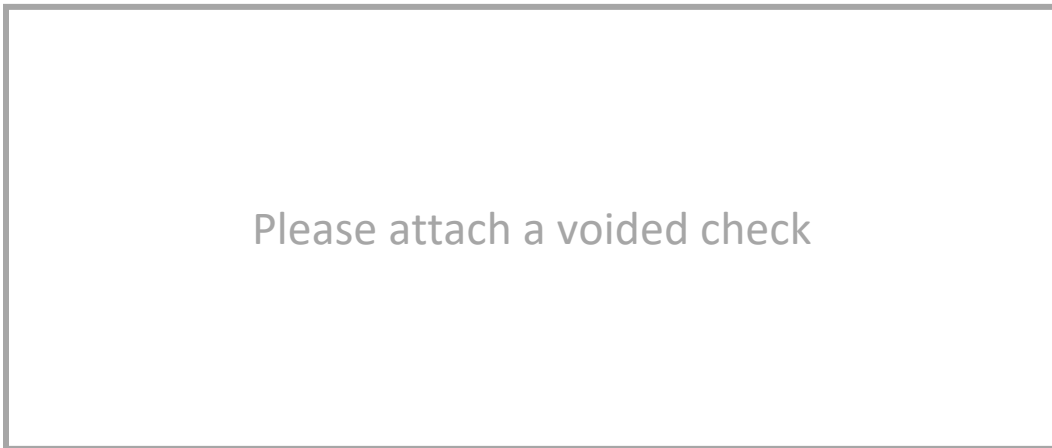
Direct Deposit Set-Up Form

Employee Information

Name _____ Home Phone # _____
Address _____ Cell Phone # _____

Account Information

Routing Number _____ Account Number 12540 _____



Deposit to:

Checking

Employee Agreement

I authorize _____ to automatically deposit my payroll check into my account listed above (including authorization to correct any entries made in error). This authorization will remain in effect until I give written notice to cancel it.

Employee Signature

Date

