

DIRECT DEPOSIT OF PAY AUTHORIZATION

We've arranged to make DIRECT DEPOSIT OF PAY available as an employee benefit. There is no cost to you, just convenience.

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DIRECT DEPOSIT OF PAY EMPLOYEES AUTHORIZATION

I authorize you and the financial institution listed below to deposit my pay automatically to my ____CHECKING ACCOUNT ____SAVINGS ACCOUNT each payday. Adjusting entries to correct errors are also authorized. This authority will remain in effect until I have cancelled in writing.

Financial Institution Name

Date

Address (if known)

Employee Name (please print)

City State

Signature

Bank Name

Transit Routing Number

Checking Acct. Number Info.

Transit Routing Number

Savings Acct. Number Info.

Authorized Signature for Financial Institution