



## Authorization of Direct Deposit

I authorize \_\_\_\_\_ (name of company) to deposit my pay automatically to the account(s) indicated below and, if necessary, to adjust or reverse a deposit for any payroll entry made to my account in error. This authorization will remain in effect until I cancel it in writing and n such time as to afford \_\_\_\_\_ (name of company) a reasonable opportunity to act on it.

Bank Name \_\_\_\_\_

Name on bank account \_\_\_\_\_

Bank Account Number \_\_\_\_\_

Bank Routing Number \_\_\_\_\_

I wish to deposit \$ \_\_\_\_\_ or entire amount

Checking  Savings

Bank Name \_\_\_\_\_

Name on bank account \_\_\_\_\_

Bank Account Number \_\_\_\_\_

Bank Routing Number \_\_\_\_\_

I wish to deposit \$ \_\_\_\_\_ or entire amount

Checking  Savings

Employee Email \_\_\_\_\_

Employee Signature \_\_\_\_\_

Employee Name \_\_\_\_\_ Date \_\_\_\_\_

VOIDED CHECK