



DIRECT DEPOSIT AUTHORIZATION FORM

FAX TO: (757) 424-8663 (VA Office)

FAX TO: (954) 227-2115 (FL Office)

EMPLOYER NAME: _____

CLIENT CODE: _____

- New Agreement
- Change Account
- Cancel Agreement

DIRECT DEPOSIT AUTHORIZATION FORM

I hereby authorize Payday Payroll, Inc to initiate credit or debit entries to my account with the financial institution indicated below. This authorization is to remain in full force and effect until Payday Payroll, Inc has received written notification from me of its termination; at such time and in such manner as to afford Payday Payroll, Inc and the financial institution a reasonable opportunity to act on my request. I understand this authorization is for my payroll earnings from my employer.

EMPLOYEE NAME: _____

SIGNATURE: _____ DATE: _____

Employee Account Information

1. Bank Name, City, & State: _____

Routing & Transit Number: _____ Account Number: _____

Checking Savings Please deposit: \$_____.____ or ____% or Entire Net Pay

2. Bank Name, City, & State: _____

Routing & Transit Number: _____ Account Number: _____

Checking Savings Please deposit: \$_____.____ or ____% or Remaining Net

ATTACH VOIDED CHECK

The diagram shows a check from John & Jane Doe, 123 Your Street, Anywhere, USA 12345. The check is dated 2001 and is payable to the order of _____ for \$_____. The bank is YOUR BANK, 123 Your Bank's Street, Anywhere, USA 12345. The check number is 2001. The routing and transit numbers are 123456789 and 1012345678. The callouts explain that the routing and transit numbers are 9-digit numbers between two symbols, and that the check number is not needed to complete the form.