



### Direct Deposit Authorization

I (we) hereby authorize eEmployers Solutions, Inc., heinafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) account indicated below and the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

**Employee Name:** \_\_\_\_\_

**Client Name:** \_\_\_\_\_

Check this box if this is a change to your current direct deposit form

<b>Account 1</b>	<b>E-mail address:</b> _____
Bank Name: _____	
Account Name: _____	
Address: _____	
City, State: _____	
Account #: _____	
Routing/Transit #: _____	
Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings (Attach voided check)	
Amount: \$ _____ or % _____	

<b>Account 1</b>	<b>E-mail address:</b> _____
Bank Name: _____	
Account Name: _____	
Address: _____	
City, State: _____	
Account #: _____	
Routing/Transit #: _____	
Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings (Attach voided check)	
Amount: \$ _____ or % _____	

This authority is to remain in effect until eEmployers Solutions, Inc. and \_\_\_\_\_  
Bank Name  
have received written notification from me (or either of us) of its termination. Sufficient  
advance notification will be provided to eEmployers Solutions, Inc. and \_\_\_\_\_  
Bank Name  
to allow for proper processing of all accounts pending.

**AUTHORIZED SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**AUTHORIZED SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_