ACH Credit Authorization

We are pleased to be able to offer you a new payday convenience-*Direct Deposit*. Now you can have your paycheck automatically deposited in your checking or savings account on payday. <u>And you</u> <u>don't have to change your present</u> <u>banking relationship to take advantage of</u> <u>this service.</u>

Direct Deposit will help you in many ways.

- ✓ it saves trips to your financial institution
- ✓ it saves time in depositing checks-no long payday lines to wait in.
- ✓ It eliminates the possibility of lost,
- ✓ stolen or forged checks.
- ✓ your money is deposited fasterreduces
- ✓ the possibility of overdrafts
- ✓ it means you get your money deposited to your account even if you're on vacation or away from the office on business or illness.

Here's how Direct Deposit works: On payday you will receive an earnings statement showing gross salary, taxes, other deductions, and net pay. Your money will already have been deposited in your account. The amount of the deposit

will appear on your bank statement. We believe you will like the added convenience of having your net pay automatically deposited for you. *Direct Deposit* is safe, convenient and easy. To take advantage of this service, complete the attached authorization form and return it to the Payroll Department.

The authorization form, which is provided, gives your company and your financial institution authority to deposit your pay to your account. Simply complete the form in order to take advantage of Direct Deposit.

All you need do is:

- Mark the box before type of account to indicate whether your pay will be deposited in your checking or savings account.
- 2. Fill in your name, financial institution name and location, and date.
- Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please fill in your account number.

NOTE: Be sure to sign the form!

EMPLOYEE'S AUTHORIZATION - Please fill out a	and return to the Payroll Department.

C h	I authorize you and the financial institution listed below to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries in error to my: Checking account savings account each payday. This authority will remain in effect until I have cancelled it in writing.		
i e c k / H	FINANCIAL INSTITUTION	Date NAME (PLEASE PRINT)	
• r •	BRANCH	ACCOUNT NUMBER AT FINANCIAL INSTITUTION	
1	City State	Signature	