



**AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS**

**Company Name** \_\_\_\_\_

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

**I authorize** \_\_\_\_\_ **to initiate credit entries or debit corrections to my** \_\_\_\_\_ **Checking** \_\_\_\_\_ **Savings account indicated below and the depository named below.**

**Depository Name** \_\_\_\_\_

**Checking Account #** \_\_\_\_\_

**Deposit Amount \$** \_\_\_\_\_ **or Net Pay** \_\_\_\_\_

**Savings Account #** \_\_\_\_\_

**Deposit Amount \$** \_\_\_\_\_ **or Net Pay** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**(Please attach sample check or bank form)**