Authorization for Direct Deposits

To enroll in Full Service Direct Deposit, simply fill out this form and give it to your payroll manager. Attach a voided check for each checking account-not a deposit slip. If depositing to a savings account, ask your bank to give you the Routing/Transit Number for your account. It isn't always the same as the number on a savings deposit slip. This will help ensure that you are paid correctly.

This authorizes WORKPLACE CONSULTANTS (the "Company") to send credit entries (and appropriate debit and adjustment entries), electronically or by any other commercially accepted method, to my (our) account (s) indicated below and to other accounts I (we) identify in the future (the "Account"). This authorizes the financial institution holding the Account to post all such entries.

Account Infor	mation:			
You may choose	up to two accou	ants. (Your last item must be for the re	emaining amou	nt owed to you.)
Bank Name/Cit	xy/State:			·
Routing/Transit#:		Account Number:		
[] Checking	[] Savings	I wish to deposit: \$	_ or	Net Amount
Bank Name/Cit	ty/State:			
Routing/Transit#:		Account Number:		
[] Checking	[] Savings	I wish to deposit: \$	_ or	[] Net Amount
		effect until the Company and Bar reasonable opportunity to act on it.	nk receives a	written termination
Employee Nam	e:		Emp No	
Employee Signa	ature		Date	

This document must be signed by employees requesting automatic deposit of paychecks, and retained on file by the employer.