

Direct Deposit Employee Authorization Agreement for Automated Clearing House Entries



I hereby authorize Pinnacle Employee Services, hereinafter called COMPANY, to initiate ACH entries (credit or debit) and to initiate, if necessary, adjustments for any entries in error to my checking and/or savings account(s) indicated below and the depository bank(s) named below, hereinafter called DEPOSITORY, to credit and/or debit the same to my account(s).

Please attach one of the following for each account listed below: a voided check, a copy of a canceled check, or a statement from the bank with routing and account numbers clearly printed. Account will go into a prenotification WITHOUT support.

Please indicate the action to be taken by checking the appropriate classification box below:

- New Enrollment
 Change Account
 Terminate Deposit



Bank Name:

Check One: Checking or Saving

Amount: \$ _____ or _____ %

Routing Number:

Account Number:



Bank Name:

Check One: Checking or Saving

Amount: \$ _____ or _____ %

Routing Number:

Account Number:

This authority is to remain in full force and effect until COMPANY has received written notification from me of its termination, in such time and manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act upon termination.

Name (Print)

Social Security Number (SSN)

Signature

Date